# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A	For the	e 2021 calend	lar year, or tax year beginning 01/01/2021 and ending	12/31/	2021				
в	Check if	f applicable:	C Name of organization SEATTLE INTERNET EXCHANGE		D Emple	oyer identification number			
	Address	s change	Doing business as			91-2148657			
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address) Ro	om/suite	E Telephone number				
	Initial re	turn	1700 7th Ave Ste 116 PMB 400			206-367-4320			
	Final ret	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code						
	Amende	ed return	Seattle, WA 98101-1323		G Gross	receipts \$ 553,739			
	Applicat	tion pending	F Name and address of principal officer: Nikos Mouat	H(a) Is this a gr	a group return for subordinates? 🗌 Yes 🔽 N				
			1700 7th Ave Ste 116 PMB 400, Seattle, WA 98101-1323	H(b) Are all s	subordinates included? See No				
<u> </u>	Tax-exe	empt status:	_ 501(c)(3) ✓ 501(c) ( 6 ) ◄ (insert no.)	If "No," attac	h a list. Se	ee instructions.			
J	Website	e: 🕨 https://v	www.seattleix.net/	H(c) Group e	xemption	number 🕨			
к	Form of	organization:	Corporation Trust Association 🗹 Other ► Nonprofit Cor L Year of formation	on: <b>2001</b>	M State	of legal domicile: WA			
Ρ	art I	Summa	,						
	1	Briefly des	cribe the organization's mission or most significant activities: <b>Operation</b>	on of the Seat	tle Interi	net Exchange.			
ce									
Activities & Governance									
ver	2	Check this	box $\blacktriangleright$ if the organization discontinued its operations or disposed (	of more than	25% of	its net assets.			
ĝ	3	Number of	voting members of the governing body (Part VI, line 1a)		3	5			
š	4	Number of	independent voting members of the governing body (Part VI, line 1b)		4	5			
tie	5	Total numb	per of individuals employed in calendar year 2021 (Part V, line 2a) .		5	0			
ť	6	Total numb	per of volunteers (estimate if necessary)		6	11			
Ac	7a	Total unrel	ated business revenue from Part VIII, column (C), line 12		7a	0			
	b	Net unrelat	7b	0					
				Prior Yea	r	Current Year			
e	8	Contributio	ns and grants (Part VIII, line 1h)		43,810	364,530			
nué	9	Program se	ervice revenue (Part VIII, line 2g)	3	848,038	189,091			
Revenue	10	Investment	income (Part VIII, column (A), lines 3, 4, and 7d)		8,863	117			
Œ	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	1			
	12	Total reven	ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4	00,711	553,739			
	13	Grants and	similar amounts paid (Part IX, column (A), lines 1–3)		0	0			
	14	Benefits pa	aid to or for members (Part IX, column (A), line 4)		0	0			
ŝ	15	Salaries, ot	her compensation, employee benefits (Part IX, column (A), lines 5–10)		0	0			
nse	16a	Profession	al fundraising fees (Part IX, column (A), line 11e)		0	0			
Expenses	b	Total fundr	aising expenses (Part IX, column (D), line 25) ► 0						
Ш	17	Other expe	nses (Part IX, column (A), lines 11a–11d, 11f–24e)	1	89,053	216,712			
	18	Total expe	nses. Add lines 13–17 (must equal Part IX, column (A), line 25) .	1	89,053	216,712			
	19	Revenue le	ss expenses. Subtract line 18 from line 12	2	211,658	337,027			
or			B	eginning of Curr	ent Year	End of Year			
Net Assets or Fund Balances	20	Total asset	s (Part X, line 16)	1,0	024,035	1,361,062			
t As: d Ba	21	Total liabili	ties (Part X, line 26)		0				
E R	22	Net assets	or fund balances. Subtract line 21 from line 20	1,0	024,035	1,361,062			
Pa	art II		re Block	,		. ,			
Lin	dor pop	altico of posium.	I declare that I have examined this return including accompanying schedules and state	monto and to th	host of	my knowledge and belief it is			

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

	/e-filed/			Ma	y 13th, 2022		
Sign	Signature of officer			Date			
Here	Chris Caputo, Secretary/Treasurer						
	Type or print name and title						
Paid	Print/Type preparer's name	Preparer's signature	Date		Check if self-employed	PTIN	
Preparer Use Only		Firm's EIN ►					
Use Only	Firm's address ►	Phone no.					
May the IRS	discuss this return with the preparer s	shown above? See instructions				🗌 Yes	No
						(	000 (

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Part		
	Check if Schedule O contains a response or note to any line in this Part III	• 🗆
1	riefly describe the organization's mission:	
	Operation of the Seattle Internet Exchange.	
2	id the organization undertake any significant program services during the year which were not listed on the	
	rior Form 990 or 990-EZ?	🗸 No
	"Yes," describe these new services on Schedule O.	
3	id the organization cease conducting, or make significant changes in how it conducts, any program ervices?	
	ervices?	🖌 NO
4	escribe the organization's program service accomplishments for each of its three largest program services, as measured and the second services as measured and the second services and the second services are as the second service accomplishments for each of its three largest program services, as measured as the second service accomplishments for each of its three largest program services as measured as the second service accomplishments for each of its three largest program services as measured as the second service accomplishments for each of its three largest program services as measured as the second service accomplishments for each of its three largest program services as the second service accomplishments for each of the service accomplishments for each of the service accomplishments for each of the second service accomplishments for each of the service accomplish for each of the service accomplishments for	ired by
•	xpenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported.	
4a	Code:         ) (Expenses \$ 216,712 including grants of \$ ) (Revenue \$ 189,091	)
ти	nternet Exchange Point: We aid, support, and assist the efficient transmission of educational, scientific, medical and other	.)
	nformation and communications by creating and maintaining direct communications interconnections between members.	
4b	Code:) (Expenses \$ including grants of \$) (Revenue \$)	)
4c	Code:) (Expenses \$including grants of \$) (Revenue \$)	)
40		.)
4d	ther program services (Describe on Schedule O.)	
	Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )	
4e	otal program service expenses  216,712	

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Part	V Checklist of Required Schedules			
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
1		1		~
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		~
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		~
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> .	5		~
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? <i>If "Yes," complete Schedule D, Part I</i>	6		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		~
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .	9		~
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .	10		~
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		~
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		~
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> .	11c		~
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		~
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		~
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		~
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		~
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundamining hundraling	14a		~
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b		~
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	145		~
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		~
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		~

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Part	V Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~
20	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23	~	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	-	~
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		~
b c	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28b 28c	~	<b>v</b>
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		~ ~
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31		<i>v</i> <i>v</i>
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		~
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		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		~
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
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		~
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	~	
Part	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		<u> </u>	
			Yes	No
1a b c	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1Did the organization comply with backup withholding rules for reportable payments to vendors and	-		
U	reportable gaming (gambling) winnings to prize winners?	1c	~	

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Part			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return <b>2a 0</b>			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O $$ .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		~
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	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?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	dð		
'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?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	-		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	•		
9	Sponsoring organization have excess business nothings at any time during the year?	8		
э а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
4.6	against amounts due or received from them.)	10		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year <b>12b Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	_	
ų	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	Tou		
b	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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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		~
16	If "Yes," see the instructions and file Form 4720, Schedule N.	16		
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		~
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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Part	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			
Secti	on A. Governing Body and Management		V	
1a	Enter the number of voting members of the governing body at the end of the tax year <b>1a</b> 5 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.	-	Yes	No
ь 2	Enter the number of voting members included on line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		~
3	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		~
4 5 6	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? . Did the organization have members or stockholders?	4 5 6	~	ンン
7a	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?	7a	~	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	~	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a b	The governing body?	8a 8b	<u> く く く く く く く く く く く く く く く く く く く</u>	
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? <i>If "Yes," provide the names and addresses on Schedule O</i>	9	•	~
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	,	
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No
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?	10a		•
11a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990.	11a	~	
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a 12b	<u> く く く く く く く く く く く く く く く く く く く</u>	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done.	120	•	~
13	Did the organization have a written whistleblower policy?	13		~
14	Did the organization have a written document retention and destruction policy?	14		~
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		~
b				~
	Other officers or key employees of the organization	15b		
16a	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			Y
16a b	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	15b 16a		2
b	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			7
b Secti	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		>
b	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a 16b	tion £	

- Own website Another's website Upon request Other (explain on Schedule O)
   Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ► Chris Caputo, (206)367-4320

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

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

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

• 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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

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

(A) Name and tile     (B) Average provide built     Position (c) of check more than one hours, unless person is both an officer and a director/trusted organization and related organizations     (C) Estimated amount organizations     (C) Estimated organizations       Nikos Mouat     3.00 (c) of check more than one bolow (c) of check more than one bolow (c) of check more than one bolow (c) of check more than one provide organizations     (C) (c) of check more than one bolow (c) of check more than one bolow (c) of check more than one provide organizations     (C) (c) of check more than one provide (c) of check					(0	C)					
Name and tile       Average Inter and a director/trusteel organizations organizations       Average Inter and a director/trusteel organization organizations       Average Inter and a director/trusteel organizations       Benotrable compensation organizations       Benotrable compensation organizations       Benotrable compensation organizations       Benotrable compensation organizations       Benotrable compensation organizations         Nikos Mouat       3.00       v       v       v       v       0       0       0       0         Nikos Mouat       3.00       v       v       v       0       0       0       0       0       0         President and Director       1.00       v       v       v       0       0       0       0       0         Patrick Gilmore       1.00       v       v       v       0       0       0       0       0         Director       1.00       v       v       v       0       0       0       0       0       0         Director (term started 5/2021)       v       1       v       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0 <t< td=""><td>(A)</td><td>(B)</td><td></td><td></td><td>Pos</td><td>ition</td><td></td><td></td><td>(D)</td><td>(F)</td><td>(F)</td></t<>	(A)	(B)			Pos	ition			(D)	(F)	(F)
phores       officer and a director/tusele)       officer and director       officer andi director											
per weak (list and provided organizations)       organization (list and provided organizations)         Nikos Mouat       3.00       v       v       o       o       o         President and Director       v       v       v       o       o       o         Vice President and Director       v       v       v       o       o       o       o         Director       v       v       v       v       o       o       o       o       o         Director       v       v       v       v       o       o       o       o       o       o         Director (term started 5/2021)       v       v       v       o       <									compensation		
Nikos Mouat         3.00         2         2         0					-	-		<i>,</i>			
Nikos Mouat         3.00         2         2         0			divi	stitu	ffice	ey e	nplc	m			
Nikos Mouat         3.00         2         2         0			dual	Itior	Ť	mp	st c	9	1099-NEC)	1099-NEC)	related organizations
Nikos Mouat         3.00         2         2         0			r tru	al ti		oye	duc				
Nikos Mouat         3.00         2         2         0			stee	ust		œ	ens				
President and Director         v         v         0         0         0         0           Erica Hughes Ehnert         1.00         v         v         0 <td></td> <td></td> <td></td> <td>e</td> <td></td> <td></td> <td>ated</td> <td></td> <td></td> <td></td> <td></td>				e			ated				
President and Director         v         v         0         0         0         0           Erica Hughes Ehnert         1.00         v         v         0 <td>Nikos Mouat</td> <td>3.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Nikos Mouat	3.00									
Vice President and Director         v         v         v         0         0         0           Patrick Gilmore         1.00         v         0 <td>President and Director</td> <td></td> <td>~</td> <td></td> <td>~</td> <td></td> <td></td> <td></td> <td>0</td> <td>0</td> <td>0</td>	President and Director		~		~				0	0	0
Interview Derivation       1.00       0       0       0       0         Director       1.00       1.00       0       0       0       0         Director (term started 5/2021)       1.00       1.00       0       0       0       0         Director (term started 5/2022)       1.00       1.00       0       0       0       0       0         Director (term started 5/2022)       1.00       1.00       1.00       0	Erica Hughes Ehnert	1.00									
Director       ✓       0       0       0       0         Steve Perry       1.00       ✓       0       0       0       0         Director (term started 5/2021)       ✓       0       0       0       0       0         Michael Smith       1.00       ✓       0       0       0       0       0         Director (term started 5/2022)       ✓       ✓       0       0       0       0         Director (term ended 5/2022)       ✓       ✓       ✓       0       0       0         John van Oppen       1.00       ✓       ✓       ✓       0       0       0         Director (term ended 5/2021)       ✓       ✓       ✓       0       0       0       0         Director (term ended 5/2021)       ✓       ✓       ✓       0       0       0       0         Secretary/Treasurer       ✓       ✓       0       ✓       0       0       0       0	Vice President and Director		~		~				0	0	0
Steve Perry       1.00       v       0       0       0         Director (term started 5/2022)       v       0       0       0       0         Director (term started 5/2022)       v       0       0       0       0         Director (term started 5/2022)       v       0       0       0       0         Director (term ended 5/2022)       v       v       0       0       0       0         John van Oppen       1.00       v       v       0       0       0       0         Director (term ended 5/2021)       v       v       0       0       0       0         Chris Caputo       40.00       v       0       0       0       0       0         Secretary/Treasurer       v       0       0       0       0       0       0	Patrick Gilmore	1.00									
Director (term started 5/2021)       ✓       0       0       0         Michael Smith       1.00       ✓       0       0       0         Director (term started 5/2022)       ✓       ✓       0       0       0         Director (term ended 5/2022)       ✓       ✓       0       0       0         John van Oppen       1.00       ✓       ✓       0       0       0         John van Oppen       1.00       ✓       ✓       0       0       0         Secretary/Treasurer       ✓       0       0       0       0	Director		~						0	0	0
Director (term started 5/2022)       v       0       0       0         Director (term ended 5/2022)       v       v       0       0       0         Director (term ended 5/2022)       v       v       0       0       0         Director (term ended 5/2022)       v       v       0       0       0         John van Oppen       1.00       v       v       0       0       0         Director (term ended 5/2021)       v       v       0       0       0       0         Chris Caputo       40.00       v       0       0       0       0         Secretary/Treasurer       v       0       0       0       0       0	Steve Perry	1.00									
Director (term started 5/2022)       v       v       0       0       0       0         Christian Koch       1.00       v       v       v       0       0       0       0         Director (term ended 5/2022)       v       v       v       0       0       0       0         John van Oppen       1.00       v       v       0       0       0       0         Director (term ended 5/2021)       v       v       0       0       0       0       0         Chris Caputo       40.00       v       v       0       0       0       0       0         Secretary/Treasurer       v       0       0       0       0       0       0                0       0       0       0	Director (term started 5/2021)		~						0	0	0
Director (term ended 5/2022)       1.00       ✓       ✓       0       0       0         John van Oppen       1.00       ✓       ✓       0       0       0         Director (term ended 5/2021)       ✓       ✓       0       0       0         Director (term ended 5/2021)       ✓       ✓       0       0       0         Christ Caputo       40.00       ✓       ✓       0       0       0         Secretary/Treasurer       ✓       0       0       0       0       0	Michael Smith	1.00									
Director (term ended 5/2022)       v       v       0       0       0         John van Oppen       1.00       v       0       0       0       0         Director (term ended 5/2021)       v       v       0       0       0       0         Chris Caputo       40.00       v       0       0       0       0       0         Secretary/Treasurer       v       0       0       0       0       0       0	Director (term started 5/2022)		~						0	0	0
John van Oppen       1.00       v       v       0       0       0         Director (term ended 5/2021)       v       v       0       0       0       0         Chris Caputo       40.00       v       0       0       0       0       0         Secretary/Treasurer       v       0       0       0       0       0       0	Christian Koch	1.00									
Director (term ended 5/2021)       v       v       0       0       0         Chris Caputo       40.00       v       0       0       0       0         Secretary/Treasurer       v       0       0       0       0       0              0       0       0                0       0       0       0	Director (term ended 5/2022)		~					~	0	0	0
Chris Caputo       40.00       ✓       0       0       0         Secretary/Treasurer       I		1.00	-								
Secretary/Treasurer       ✓       0       0       0       0       0       0       0			~					~	0	0	0
		40.00	-								
	Secretary/Treasurer				~				0	0	0
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			]								
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Part	VII Section A. Officers, Directors, 1	Frustees,	Key	Emj		·	s, an	d⊦	lighest Compe	ensated En	nplo	yees (d	contir	nued)
	(A) Name and title	Jame and title Average box, unle hours officer an				rson	is both or/trust	n an	<b>(D)</b> Reportable compensation from the	<b>(E)</b> Reportab compensat from relate	rtable Estinsation		<b>(F)</b> Estimated amou of other compensation	
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)		(W-2/ C/	fro	om the zation	and
			-											
			-											
			-											
			-											
			-											
			-											
			-											
			-											
			-											
1b c	Subtotal	-				 			0		0			0
2	Total number of individuals (including but reportable compensation from the organi						above	e) w	-	e than \$100	-	of		0
3	Did the organization list any <b>former</b> of employee on line 1a? <i>If "Yes," complete s</i>	officer, dire	,									3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual	e sum of re greater th	porta an \$ <sup>-</sup>	ble ( 150,	con 000	npei )? <i>I</i> :	nsatio f "Ye	on a s, "	and other compe	nsation fror dule J for	n the <i>such</i>		-	
5	Did any person listed on line 1a receive of for services rendered to the organization?	or accrue co	ompe	nsat	tion	froi	m any	/ un	related organiza	tion or indiv	vidual	4		~ ~
Secti	on B. Independent Contractors		-									-		
1	Complete this table for your five high compensation from the organization. Rep													
	(A) Name and business add	Iress							<b>(B)</b> Description of ser	vices	(	<b>(C)</b> Compens	ation	
Altop	ia Corporation, 1700 7th Ave Ste 116 PMB 30	0, Seattle, V	A 98 <sup>-</sup>	101				Co	onsulting services				14	4,240

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 1

Part VIII Statement of Revenue

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

							(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under
										sections 512-514
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaig			1a	0				
3ra Iou	b	Membership dues			1b	0				
S, C	C b	Fundraising events			1c 1d	0				
Sift lar	d	Related organization Government grants			10 1e	0				
imi (	e f	All other contribution			16	U				
ion S	•				1f	364,530				
but	and similar amounts not included above <b>1f</b> <b>g</b> Noncash contributions included in					304,330				
d O	J	lines 1a-1f			1g	\$ 0				
an Co	h	Total. Add lines 1a-	-1f.			🕨	364,530			
						Business Code				
Program Service Revenue	2a	Internet Exchange P	oint			517110	189,091	189,091	0	0
e Si	b									
jram Ser Revenue	С									
lev.	d									
ıбо	е									
<u>م</u>	f	All other program se					0	0	0	0
	g	Total. Add lines 2a-					189,091			
	3	Investment income other similar amoun		-						
							117	117	0	0
	<ul> <li>4 Income from investment of tax-exempt bo</li> <li>5 Royalties</li></ul>					0	0	0	0	
	5	noyallies		(i) Real		(ii) Personal	U	U	0	0
	6a	Gross rents	6a	(.) 1 104	0	0				
	b	Less: rental expenses	6b		0	0				
	c	Rental income or (loss)			0	0				
	d	Net rental income o		s)		►	0	0	0	0
	7a	Gross amount from		(i) Securit	ies	(ii) Other				
		sales of assets			0	0				
		other than inventory	7a		U	0				
ne	b	Less: cost or other basis								
Revenue		and sales expenses .	7b		0	0				
Be	c	Gain or (loss)	7c		0	0				
2	d	Net gain or (loss)	•••			🕨	0	0	0	0
Othe	8a	Gross income from events (not including		ndraising						
		of contributions rej		d on line						
		1c). See Part IV, line			8a	0				
	b	Less: direct expens			8b	0				
	С	Net income or (loss)			g eve	nts 🕨	0		0	0
	9a	Gross income f			<u> </u>					
		activities. See Part I	IV, lin	e19.	9a	0				
	b	Less: direct expens	es.		9b	0				
		Net income or (loss)		• •	ctivitie	es 🕨	0	0	0	0
	10a	Gross sales of ir								
	_	returns and allowan			10a	0				
		Less: cost of goods			10b	0				
	С	Net income or (loss)	) irom	i sales of in	ivento	-	0	0	0	0
Snc	11a					Business Code				
scellaneo Revenue	na b									
ella Ver	c b									
Miscellaneous Revenue	d	All other revenue					1	1	0	0
Σ	e	Total. Add lines 11a				►	1			
	12	Total revenue. See					553,739	189,209	0	0
										- 000 (accu)

Part IX Statement of Functional Expenses

from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)

#### Check if Schedule O contains a response or note to any line in this Part IX . . . . . **(D)** Fundraising expenses Do not include amounts reported on lines 6b. 7b. (A) Total expenses (B) (C) Program service expenses Management and general expenses 8b, 9b, and 10b of Part VIII. 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . . Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members . . . . Compensation of current officers, directors, 5 trustees, and key employees . . . . . Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . Other salaries and wages . . . . . 7 Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions) Other employee benefits . . . . . . . 9 10 Payroll taxes . . . . . . . . . . . . 11 Fees for services (nonemployees): Management . . . . . . . . . . . 144.240 а Legal . . . . . . . . . . . . . 120 b С Accounting . . . . . . . . . . . 41 d Lobbying . . . . . . . . . . Professional fundraising services. See Part IV, line 17 е Investment management fees . . . . . f Other. (If line 11g amount exceeds 10% of line 25, column a (A), amount, list line 11g expenses on Schedule O.) . 12 Advertising and promotion . . . . . . 13 Office expenses . . . . . . . . 14 Information technology . . . . . . 58,576 15 Royalties . . . . . . . . . Occupancy . . . . . . . . . . . 16 Travel . . . . . . . . . . . . . 17 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 . 3.000 23 Insurance . . . . . . . . . . . . . 2,367 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.) 500 а Address Space Bank Service Charges 1,185 b Licenses, Permits, Sales Tax С 6,223 460 d Postage, Misc, Rounding All other expenses е 25 **Total functional expenses.** Add lines 1 through 24e 216.712 0 0 Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs

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

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Form 990 (2021)

	n 990 (20	•			Page 11
P	art X	Balance Sheet	4 V		<b>—</b>
		Check if Schedule O contains a response or note to any line in this Pa	(A) Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing	168,646	1	203,413
	2	Savings and temporary cash investments	855,389	2	1,157,649
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	~	controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ä	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D <b>10a</b>			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments-publicly traded securities		11	
	12	Investments-other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,024,035	16	1,361,062
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
ş	21 22	Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director,		21	
litie		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
Ľ	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	
	26	Total liabilities. Add lines 17 through 25	0	26	0
seou		Organizations that follow FASB ASC 958, check here ► ✓ and complete lines 27, 28, 32, and 33.			
ılar	27	Net assets without donor restrictions	1,024,035	27	1,361,062
Ba	28	Net assets with donor restrictions	0	28	0
Fund Balances		Organizations that do not follow FASB ASC 958, check here ► and complete lines 29 through 33.			
ŗ	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or	32	Total net assets or fund balances	1,024,035	32	1,361,062
ž	33	Total liabilities and net assets/fund balances	1,024,035		1,361,062

Form **990** (2021)

	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)	1		55	53,739
2	Total expenses (must equal Part IX, column (A), line 25)	2		21	6,712
3	Revenue less expenses. Subtract line 2 from line 1	3		33	37,027
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		1,02	24,035
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6 (			
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0
0	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		1,36	61,062
				Yes	No
1	Check if Schedule O contains a response or note to any line in this Part XII				_
	Schedule O.	•			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		~
	If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both:		20		
	If "Yes," check a box below to indicate whether the financial statements for the year were con		20		
	If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both:	mpiled or	2a		
	If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both:	mpiled or			
	If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited by an independent accountant?	mpiled or			
b	If "Yes," check a box below to indicate whether the financial statements for the year were conversed on a separate basis, consolidated basis, or both:           Separate basis         Consolidated basis         Both consolidated and separate basis           Were the organization's financial statements audited by an independent accountant?         If "Yes," check a box below to indicate whether the financial statements for the year were aud separate basis, consolidated basis, or both:           Separate basis         Consolidated basis         Both consolidated and separate basis           If "Yes," check a box below to indicate whether the financial statements for the year were aud separate basis, consolidated basis, or both:           Separate basis         Consolidated basis         Both consolidated and separate basis           If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ow	mpiled or  ited on a ersight of			
b	<ul> <li>If "Yes," check a box below to indicate whether the financial statements for the year were concerviewed on a separate basis, consolidated basis, or both:</li> <li>Separate basis Consolidated basis Both consolidated and separate basis</li> <li>Were the organization's financial statements audited by an independent accountant?</li> <li>If "Yes," check a box below to indicate whether the financial statements for the year were aud separate basis, consolidated basis, or both:</li> <li>Separate basis, consolidated basis, or both:</li> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> </ul>	mpiled or  ited on a ersight of			
b	If "Yes," check a box below to indicate whether the financial statements for the year were conversed on a separate basis, consolidated basis, or both:           Separate basis         Consolidated basis         Both consolidated and separate basis           Were the organization's financial statements audited by an independent accountant?         If "Yes," check a box below to indicate whether the financial statements for the year were aud separate basis, consolidated basis, or both:           Separate basis         Consolidated basis         Both consolidated and separate basis           If "Yes," check a box below to indicate whether the financial statements for the year were aud separate basis, consolidated basis, or both:           Separate basis         Consolidated basis         Both consolidated and separate basis           If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ow	mpiled or  ited on a rersight of ant? .	2b		
b	If "Yes," check a box below to indicate whether the financial statements for the year were concerviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were aud separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ow the audit, review, or compilation of its financial statements and selection of an independent account If the organization changed either its oversight process or selection process during the tax year, e	mpiled or  ited on a ersight of ant? . explain on orth in the	2b		
b c 3a	If "Yes," check a box below to indicate whether the financial statements for the year were conversion of a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were aud separate basis, consolidated basis, or both: Separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ow the audit, review, or compilation of its financial statements and selection of an independent account If the organization changed either its oversight process or selection process during the tax year, e Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set for	mpiled or  ited on a ersight of ant? . explain on orth in the 	2b 2c		~

- orm	990	(2021)
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SCHI	EDULE J	Compensation Information	10	MB No. 1	545-0	047
(Form	n 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		<u></u>	21	
		Compensated Employees ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.				
Departm	nent of the Treasury	<ul> <li>Attach to Form 990.</li> <li>Go to www.irs.gov/Form990 for instructions and the latest information.</li> </ul>	-	pen to Inspe		
	Revenue Service of the organization	Employer iden			Culo	
SEAT	TLE INTERNET E	EXCHANGE	91-21486	57		
Par		ons Regarding Compensation				
					Yes	No
<b>1</b> a		propriate box(es) if the organization provided any of the following to or for a person listed Section A, line 1a. Complete Part III to provide any relevant information regarding these items				
	First-class	or charter travel	Jse			
	Travel for c	companions	nce			
		nification and gross-up payments				
	Discretiona	ary spending account	nef)			
b		boxes on line 1a are checked, did the organization follow a written policy regarding ment or provision of all of the expenses described above? If "No," complete Pa				
	explain			1b		
2	directors, trus	nization require substantiation prior to reimbursing or allowing expenses incurre stees, and officers, including the CEO/Executive Director, regarding the items checked				
	la?			2	_	
3	organization's	n, if any, of the following the organization used to establish the compensation of the CEO/Executive Director. Check all that apply. Do not check any boxes for methods us zation to establish compensation of the CEO/Executive Director, but explain in Part III.	ed by a			
	-	tion committee				
		nt compensation consultant				
	•	of other organizations Approval by the board or compensation comm	nittee			
4		ar, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the fili or a related organization:	ng			
а		erance payment or change-of-control payment?		4a		~
b		or receive payment from a supplemental nonqualified retirement plan?		4b		~
С		or receive payment from an equity-based compensation arrangement?		4c	_	~
	II Yes to any	y of lines 4a–c, list the persons and provide the applicable amounts for each item in Par	t III.			
	Only section	501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.				
5		listed on Form 990, Part VII, Section A, line 1a, did the organization pay or acc	crue any			
	compensation	n contingent on the revenues of:				
а	•	ion?		5a		
b	•	rganization?		5b		
	If "Yes" on line	e 5a or 5b, describe in Part III.				
6		listed on Form 990, Part VII, Section A, line 1a, did the organization pay or acconcentingent on the net earnings of:	crue any			
а	The organizati	ion?		6a		
b	Any related or	ganization?		6b		
	If "Yes" on line	e 6a or 6b, describe in Part III.				
7		listed on Form 990, Part VII, Section A, line 1a, did the organization provide any				
~		described on lines 5 and 6? If "Yes," describe in Part III		7		
8		punts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was s contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes,"				
				8		
9		ine 8, did the organization also follow the rebuttable presumption procedure desc		9		

· · · · · · · · · · · · · · · · · · ·	0	-					
							16 (ii)
							15 (ii)
							()
							14 (ii)
							(1)
							13 (ii)
							()
							12 (ii)
							()
							11 (ii)
							()
							10 (ii)
							()
							(ii)
							()
							8 (ii)
							()
							7 (ii)
							()
							6 (ii)
							()
							5 (i)
							()
							4 (i)
							()
							3 (i)
							()
0	0	0	0	0	0	0	2 eilued 3/2021) (ii)
0	0	0	0	0	0	0	John van Oppen, Director (term (i)
0	0	0	0	0	0	0	(ii) (iii)
0	0	0	0	0	0	0	Christian Koch, Director (term (i)
as deferred on prior Form 990	(E) I oral or columns (B)(I)–(D)	benefits	compensation	(iii) Other reportable compensation	(ii) Bonus & incentive compensation	(i) Base compensation	(A) Name and Title
E Componention			C Dationment and	099-NEC compensation	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	(B) Breakdown of W-2 ar	
s for that individual.	(D) and (E) amounts	a, applicable column	t VII, Section A, line 1	r art vii. ount of Form 990, Par	st equal the total amo	the listed individual mu	Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.
ns, described in the	related organization	on row (i) and from r	m the organization c	rt compensation fro	on Schedule J, repo	n must be reported of	For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the
s needed.	idditional space it	es. Use duplicate copies if additional space is needed.		Compensated E	ees, and Highest	tees, Key Employ	Parill Officers, Directors, Trustees, Key Employees, and Highest Compensated Employe
T aye							
<b>0</b>							0~~~~~

Schedule J (Form 990) 2021

# Schedule J (Form 990) 2021

Schedule J (Form 990) 2021 Page 3
Part III Supplemental Information or descriptions required for Part L lines 1a 1b 3. 4a 4b 4c. 5a 5b 6a 6b 7 and 8 and for Part II Also complete this part Provide the information explanation or descriptions required for Part L lines 1a 1b 3. 4a 4b 4c. 5a 5b 6a 6b 7 and 8 and for Part II Also complete this part
for any additional information.

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

Department of the Treasury

Internal Revenue Service

Name of the organization

Part III

## **Transactions With Interested Persons**

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

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



#### SEATTLE INTERNET EXCHANGE

Employer identification number 91-2148657

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disgualified person	(b) Relationship between disqualified person and	(c) Description of transaction	(d) Cor	rected?
•		organization		Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
2	Enter the amount of tax incurre	ed by the organization managers or dis	qualified persons during the year		
	under section 4958				
3	Enter the amount of tax if any o	on line 2 above reimbursed by the organi	zation		

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

#### Part II Loans to and/or From Interested Persons.

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

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

#### Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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Schedule L (Form 990 or 990-EZ) 2021

# Part IVBusiness Transactions Involving Interested Persons.<br/>Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	<b>(e)</b> Sha organiz reven	ation's
				Yes	No
(1) Altopia Corporation	Chris Caputo, Secretary/T	144,240	Consulting services		~
<u>(2)</u>					
(3)					
<u>(4)</u> (5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Part V Supplemental Information. Provide additional information for	or responses to questions	on Schedule L (see	instructions).		

SCHE	DUL	E (	)	
(Form	990	or	990-	EZ)

Department of the Treasury

Internal Revenue Service

### 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 Form 990-EZ.

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



Name of the organization	Employer identification number
SEATTLE INTERNET EXCHANGE	91-2148657
Form 990, Part VI, Section A, Line 6 - The Members elect the Board of Directors and are also able to amen	d the Bylaws.
Form 990, Part VI, Section A, Line 7a - The Members elect the Board of Directors and are also able to ame	nd the Bylaws.
Form 990, Part VI, Section A, Line 7b - The Members elect the Board of Directors and are also able to ame	nd the Bylaws. Only the
Members may amend Articles 6 and 7 of the Bylaws.	
Form 990, Part VI, Section B, Line 11b - A draft of the Form 990 is emailed to the Board of Directors for rev	iou and commont prior to filing
Form 990, Part VI, Section B, Line TTD - A drait of the Form 990 is emailed to the Board of Directors for rev	new and comment, prior to ming.
Form 990, Part VI, Section C, Line 19 - The governing documents and financial statements are available to	the public at:
https://www.seattleix.net/docs/documents and https://www.seattleix.net/gov	

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

Cat. No. 51056K