

PUBLIC INSPECTION COPY

OMB No. 1545-0047

Form **990**

Return of Organization Exempt From Income Tax

2012

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2012 calendar year, or tax year beginning 07/01, 2012, **and ending** 06/30, 2013

B Check if applicable:	<input type="checkbox"/>	Address change	C Name of organization INTERNET CORP FOR ASSIGNED NAMES & NUMBERS			D Employer identification number 95-4712218		
	<input type="checkbox"/>	Name change						
	<input type="checkbox"/>	Initial return	Doing Business As			E Telephone number (310) 301-5800		
	<input type="checkbox"/>	Terminated	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 12025 WATERFRONT DRIVE 300					
<input type="checkbox"/>	Amended return	City, town or post office, state, and ZIP code LOS ANGELES, CA 90094-2536			G Gross receipts \$ 236,182,149.			
<input type="checkbox"/>	Application pending	F Name and address of principal officer: FADI CHEHADE 12025 WATERFRONT DR., STE 300 LOS ANGELES, CA 90094						
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527					H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
J Website: ▶ WWW.ICANN.ORG					H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶					L Year of formation: 1998 M State of legal domicile: CA			

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	16.
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	14.
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	160.
	6	Total number of volunteers (estimate if necessary)	6	25.
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	2,621,270.	656,512.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	69,791,646.	232,937,659.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-2,265,636.	2,411,378.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0	176,600.
	12		70,147,280.	236,182,149.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	575,847.	359,178.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	27,780,280.	32,314,216.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶	0	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	41,220,664.	117,717,096.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	69,576,791.	150,390,490.	
19	Revenue less expenses. Subtract line 18 from line 12	570,489.	85,791,659.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	466,375,671.	397,173,980.
	22	Net assets or fund balances. Subtract line 21 from line 20	382,783,826.	228,443,472.
22		83,591,845.	168,730,508.	

Part II Signature Block

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

Sign Here	Signature of officer				Date	13 MAY 2014	
	Type or print name and title	Debra Heiskala, CFO					
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN		
	DEBRA HEISKALA		05/13/14	<input type="checkbox"/>	P00649485		
	Firm's name ▶ ERNST & YOUNG U.S. LLP	Firm's EIN ▶ 34-6565596		Phone no. 858-535-7200			
	Firm's address ▶ 4370 LA JOLLA VILLAGE DRIVE STE 500 SAN DIEGO, CA 92122						

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

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2012)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III X

1 Briefly describe the organization's mission:

SEE SCHEDULE O.

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

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 104,445,256. including grants of \$ 359,178.) (Revenue \$ 233,114,259.)

SEE SCHEDULE O.

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

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

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

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

4e Total program service expenses ▶ 104,445,256.

Part IV Checklist of Required Schedules

Table with 3 columns: Question Number, Question Text, Yes, No. Rows include questions 1 through 20b regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		X
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>	X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25 a Section 501(c)(3) and 501(c)(4) organizations. 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>		X
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>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
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>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>		X
35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
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>		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? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V X

Table with columns for question number, description, and Yes/No checkboxes. Includes questions 1a through 14b regarding IRS filings, employee reporting, foreign accounts, and charitable contributions.

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

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (16), 1b (14), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA,
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in 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, physical address, and telephone number of the person who possesses the books and records of the organization: XAVIER CALVEZ 12025 WATERFRONT DRIVE, SUITE 300 LOS ANGELES, CA 90094-2536 310-301-5838

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

Check if Schedule O contains a response to any question in this Part VII X

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SEBASTIEN BACHOLLET DIRECTOR	16.00 0	X					42,521.	0	0	
(2) CHERINE CHALABY DIRECTOR	16.00 0	X					46,127.	0	0	
(3) FADI CHEHADE DIR./PRES. & CEO (FROM 9/14/12)	60.00 0	X		X			243,031.	0	30,100.	
(4) STEVE CROCKER DIRECTOR	16.00 0	X					75,000.	0	0	
(5) BERTRAND DE LA CHAPELLE DIRECTOR	16.00 0	X					37,205.	0	0	
(6) CHRIS DISSPAIN DIRECTOR	16.00 0	X					0	0	0	
(7) JUDITH DUAVIT VAZQUEZ DIRECTOR	16.00 0	X					0	0	0	
(8) WILLIAM RALPH GRAHAM DIRECTOR	16.00 0	X					38,214.	0	0	
(9) OLGA MADRUGA-FORTI DIRECTOR	16.00 0	X					5,833.	0	0	
(10) ERIKA MANN DIRECTOR	16.00 0	X					45,521.	0	0	
(11) GONZALO NAVARRO DIRECTOR	16.00 0	X					41,513.	0	0	
(12) RAYMOND A. PLZAK DIRECTOR	16.00 0	X					42,521.	0	0	
(13) RAJASEKHAR RAMARAJ DIRECTOR (THRU OCT 2012)	16.00 0	X					0	0	0	
(14) GEORGE SADOWSKY DIRECTOR	16.00 0	X					43,214.	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
15) MIKE SILBER DIRECTOR	16.00 0	X					42,521.	0	0	
16) BRUCE TONKIN DIRECTOR	16.00 0	X					0	0	0	
17) KUO-WEI WU DIRECTOR	16.00 0	X					42,521.	0	0	
18) AKRAM ATALLAH COO/FORMER CEO (THRU 9/13/12)	60.00 0			X			595,269.	0	54,157.	
19) XAVIER CALVEZ CHIEF FINANCIAL OFFICER	60.00 0			X			343,052.	0	47,742.	
20) JOHN JEFFREY GENERAL COUNSEL AND SECRETARY	60.00 0			X			482,510.	0	37,157.	
21) KURT PRITZ CH STRAT OFC/FMR SVP(11/14/12)	60.00 0			X			450,079.	0	52,014.	
22) STEVE ANTONOFF DIRECTOR, HUMAN RESOURCES	60.00 0				X		204,491.	0	37,850.	
23) BARBARA CLAY VICE PRESIDENT, COMMUNICATIONS	60.00 0				X		231,680.	0	39,233.	
24) ELISE GERICH VICE PRESIDENT, IANA	60.00 0				X		278,733.	0	47,089.	
25) JAMES HEDLUND VP STAKEHOLDER ENGAGEMENT N.A.	60.00 0				X		367,635.	0	47,106.	
1b Sub-total							660,700.	0	30,100.	
c Total from continuation sheets to Part VII, Section A							6,226,290.	0	845,251.	
d Total (add lines 1b and 1c)							6,886,990.	0	875,351.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **77**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **22**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) DAVID OLIVE ----- VICE PRESIDENT, POLICY	60.00 0				X			335,220.	0	53,905.
(27) JEFFREY MOSS ----- VP, CHIEF SECURITY OFFICER	60.00 0				X			356,750.	0	46,919.
(28) NICK TOMASSO ----- SR. DIR MEETINGS-LANGUAGE SVCS	60.00 0				X			205,177.	0	44,466.
(29) DANIEL HALLORAN ----- DEPUTY GENERAL COUNSEL	60.00 0					X		303,704.	0	54,157.
(30) DENISE MICHEL ----- VP STRAT INIT./ADVISOR TO PRES	60.00 0					X		285,980.	0	57,657.
(31) MARGARET MILAM ----- SR. DIR., POLICY DEVELOPMENT	60.00 0					X		244,544.	0	53,630.
(32) AMY STATHOS ----- DEPUTY GENERAL COUNSEL	60.00 0					X		335,567.	0	38,516.
(33) JAMES TRENGROVE ----- SR. DIRECTOR, COMMUNICATIONS	60.00 0					X		232,250.	0	52,958.
(34) ROD BECKSTROM ----- FMR DIR/PRES & CEO (6/30/12)	0 0						X	619,484.	0	45,066.
(35) MICHAEL SALAZAR ----- FMR DIRECTOR, GTLD OPERATIONS	0 0						X	269,123.	0	35,629.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **77**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions) . .	1e					
	f All other contributions, gifts, grants, and similar amounts not included above .	1f	656,512.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f ▶			656,512.			
Program Service Revenue	2a <u>NEW GTLD APPLICATION FEES</u>			Business Code			
			900099	158,085,751.	158,085,751.		
	b <u>DOMAIN NAME REGISTRY AND REGISTRAR FEES</u>		900099	68,599,338.	68,599,338.		
	c <u>APPLICATION ACCREDITATION FEES</u>		900099	4,075,000.	4,075,000.		
	d <u>SPONSORSHIPS</u>		900099	990,570.	990,570.		
	e <u>ADDRESS REGISTRY FEES</u>		900099	823,000.	823,000.		
	f All other program service revenue			364,000.	364,000.		
g Total. Add lines 2a-2f ▶			232,937,659.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			1,669,050.			1,669,050.
	4 Income from investment of tax-exempt bond proceeds . . . ▶			0			
	5 Royalties ▶			0			
	6a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss) ▶			0		
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		742,328.					
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)			742,328.		
	d Net gain or (loss) ▶			742,328.			742,328.
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 a						
		b Less: direct expenses b					
		c Net income or (loss) from fundraising events ▶			0		
9a Gross income from gaming activities. See Part IV, line 19 a							
	b Less: direct expenses b		176,600.				
	c Net income or (loss) from gaming activities ▶			176,600.		176,600.	
10a Gross sales of inventory, less returns and allowances a							
	b Less: cost of goods sold b						
	c Net income or (loss) from sales of inventory ▶			0			
Miscellaneous Revenue			Business Code				
11a _____							
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d ▶				0			
12 Total revenue. See instructions ▶				236,182,149.	232,937,659.		2,587,978.

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX X

Do not include amounts reported on lines 6b, 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 governments and organizations in the United States. See Part IV, line 21	0			
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16,	359,178.	359,178.		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	6,309,355.	4,774,137.	1,535,218.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	19,563,983.	14,803,594.	4,760,389.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,185,067.	1,653,387.	531,680.	
9 Other employee benefits	2,646,945.	1,776,473.	870,472.	
10 Payroll taxes	1,608,866.	1,217,390.	391,476.	
11 Fees for services (non-employees):				
a Management	511,450.		511,450.	
b Legal	4,234,344.	2,815,675.	1,418,669.	
c Accounting	1,307,854.		1,307,854.	
d Lobbying	520,252.	520,252.		
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	0			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	84,158,167.	58,096,223.	26,061,944.	
12 Advertising and promotion	37,025.	24,849.	12,176.	
13 Office expenses	389,203.	261,210.	127,993.	
14 Information technology	4,961,843.	2,324,746.	2,637,097.	
15 Royalties	0			
16 Occupancy	4,178,218.	2,804,173.	1,374,045.	
17 Travel	9,272,857.	6,223,394.	3,049,463.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	3,855,245.	3,855,245.		
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	2,140,920.	1,436,859.	704,061.	
23 Insurance	386,387.	259,320.	127,067.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a RISK COSTS - GTLD -----	172,832.	172,832.		
b BAD DEBT -----	1,051,625.	704,587.	347,038.	
c DUES, SUBSCRIPTIONS, & PUBS. -----	535,699.	358,919.	176,780.	
d ALL OTHER EXPENSES -----	3,175.	2,813.	362.	
e All other expenses -----				
25 Total functional expenses. Add lines 1 through 24e	150,390,490.	104,445,256.	45,945,234.	
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0			

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	378,123,655.	1	64,887,132.
	2 Savings and temporary cash investments	4,894,288.	2	0
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	17,880,747.	4	22,864,094.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	3,287,533.	9	3,615,128.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 16,597,556.		
	b Less: accumulated depreciation	10b 8,079,999.	5,786,964.	10c 8,517,556.
	11 Investments - publicly traded securities	53,034,940.	11	294,873,768.
	12 Investments - other securities. See Part IV, line 11	0	12	0
	13 Investments - program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	3,367,544.	15	2,416,302.
16 Total assets. Add lines 1 through 15 (must equal line 34)	466,375,671.	16	397,173,980.	
Liabilities	17 Accounts payable and accrued expenses	12,851,323.	17	24,849,786.
	18 Grants payable	0	18	0
	19 Deferred revenue	369,932,503.	19	203,593,686.
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	382,783,826.	26	228,443,472.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	83,591,845.	27	168,730,508.
	28 Temporarily restricted net assets	0	28	0
	29 Permanently restricted net assets	0	29	0
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	83,591,845.	33	168,730,508.	
34 Total liabilities and net assets/fund balances	466,375,671.	34	397,173,980.	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	236,182,149.
2	Total expenses (must equal Part IX, column (A), line 25)	2	150,390,490.
3	Revenue less expenses. Subtract line 2 from line 1	3	85,791,659.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	83,591,845.
5	Net unrealized gains (losses) on investments	5	-568,274.
6	Donated services and use of facilities	6	0
7	Investment expenses	7	-111,640.
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	26,918.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	168,730,508.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** 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 on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2012

Open to Public Inspection

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

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

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

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

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

a Type I b Type II c Type III-Functionally integrated d Type III-Non-functionally integrated

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

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

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

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

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

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

Table with 7 columns: (a) 2008, (b) 2009, (c) 2010, (d) 2011, (e) 2012, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2008, (b) 2009, (c) 2010, (d) 2011, (e) 2012, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities; 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Percentage, %. Rows include: 14 Public support percentage for 2012; 15 Public support percentage from 2011 Schedule A, Part II, line 14; 16a 33 1/3% support test - 2012; b 33 1/3% support test - 2011; 17a 10%-facts-and-circumstances test - 2012; b 10%-facts-and-circumstances test - 2011; 18 Private foundation.

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

Section A. Public Support

Table with 7 columns: (a) 2008, (b) 2009, (c) 2010, (d) 2011, (e) 2012, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2008, (b) 2009, (c) 2010, (d) 2011, (e) 2012, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income; 13 Total support; 14 First five years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) 60.88%. Row 16: Public support percentage from 2011 Schedule A, Part III, line 15 42.47%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)) 1.89%. Row 18: Investment income percentage from 2011 Schedule A, Part III, line 17 2.58%.

19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization [X]
b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization []
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions []

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule of Contributors

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

2012

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

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

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

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

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

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

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

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-- 1 --		\$ ----- 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-- 2 --		\$ ----- 55,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-- 3 --		\$ ----- 85,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-- 4 --		\$ ----- 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-- 5 --		\$ ----- 310,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-- 6 --		\$ ----- 44,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

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

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8		\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization INTERNET CORP FOR ASSIGNED NAMES & NUMBERS

Employer identification number

95-4712218

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

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

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

Part III **Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year.** Complete columns (a) through (e) and the following line entry.
 For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

Political Campaign and Lobbying Activities

2012

Open to Public Inspection

For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

▶ **See separate instructions.**

Department of the Treasury
Internal Revenue Service

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

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

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

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

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

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

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

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

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

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)	-----			
(2)	-----			
(3)	-----			
(4)	-----			
(5)	-----			
(6)	-----			

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

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

Table with 3 main columns: Question, (a) Yes/No, and (b) Amount. Rows include questions about lobbying activities like volunteers, staff, media, mailings, etc., with a total amount of 557,017.

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

Table with 3 columns: Question, Yes, No. Rows include questions about dues, in-house lobbying expenditures, and carryover of lobbying expenses.

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

Table with 3 columns: Question, Yes, No. Rows include questions about dues, non-deductible lobbying expenditures, and carryover of excess lobbying expenses.

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

LOBBYING EXPENDITURES
SCHEDULE C PART II-B
THE ORGANIZATION UTILIZED THE SERVICES OF TWO GOVERNMENT AFFAIRS FIRMS
DURING THE YEAR ENDED JUNE 30, 2013, FOR A COST OF \$520,252.

Part IV Supplemental Information *(continued)*

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Table with 2 columns: Name of the organization (INTERNET CORP FOR ASSIGNED NAMES & NUMBERS) and Employer identification number (95-4712218)

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

Table with 3 columns: Question number, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

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

Table with 2 columns: Question number, Held at the End of the Tax Year. Includes questions 1-9 regarding conservation easements.

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

Table with 2 columns: Question number, Amount. Includes questions 1a, 1b, 2, 2a, 2b regarding art and historical treasures.

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2012

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition, b Scholarly research, c Preservation for future generations, d Loan or exchange programs, e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

b If "Yes," explain the arrangement in Part XIII and complete the following table:

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance.

2a Did the organization include an amount on Form 990, Part X, line 21?

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows: 1a-1g (Beginning of year balance, Contributions, Net investment earnings, gains, and losses, Grants or scholarships, Other expenditures for facilities and programs, Administrative expenses, End of year balance).

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %
b Permanent endowment %
c Temporarily restricted endowment %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
(ii) related organizations

Table with 2 columns: Yes, No. Rows: 3a(i), 3a(ii), 3b.

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

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

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: 1a Land, 1b Buildings, 1c Leasehold improvements, 1d Equipment, 1e Other, Total.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include (1) Financial derivatives, (2) Closely-held equity interests, (3) Other, and sub-rows (A) through (I).

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

Table with 3 columns: (a) Description of investment type, (b) Book value, (c) Method of valuation. Rows are numbered (1) through (10).

Part IX Other Assets. See Form 990, Part X, line 15.

Table with 2 columns: (a) Description, (b) Book value. Rows are numbered (1) through (10).

Part X Other Liabilities. See Form 990, Part X, line 25.

Table with 2 columns: (a) Description of liability, (b) Book value. Row 1 is Federal income taxes, followed by rows (2) through (11).

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

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

1	Total revenue, gains, and other support per audited financial statements		1	235,502,739.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments	2a -568,273.		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d 503.		
e	Add lines 2a through 2d		2e	-567,770.
3	Subtract line 2e from line 1		3	236,070,509.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 111,640.		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	111,640.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	236,182,149.

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

1	Total expenses and losses per audited financial statements		1	150,363,575.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d -26,915.		
e	Add lines 2a through 2d		2e	-26,915.
3	Subtract line 2e from line 1		3	150,390,490.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	150,390,490.

Part XIII Supplemental Information

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

SEE PAGE 5

Part XIII Supplemental Information (continued)

ASC 740-10 FOOTNOTE

SCHEDULE D, PART X, LINE 2

ICANN, UNDER THE PROVISIONS OF ASC 740, INCOME TAXES, HAD NO UNCERTAIN TAX POSITIONS REQUIRING ACCRUAL AS OF JUNE 30, 2013 AND 2012.

RECONCILIATION OF REVENUE PER AFS WITH REVENUE PER RETURN

SCHEDULE D, PART XII, LINE 2D

\$503 - ROUNDING

RECONCILIATION OF EXPENSES PER AFS WITH EXPENSES PER RETURN

SCHEDULE D, PART XIII, LINE 2D

(\$26,918) - UNREALIZED GAIN/LOSS ON FOREIGN EXCHANGE

\$ 3 - ROUNDING

(\$26,915) - TOTAL

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

INTERNET CORP FOR ASSIGNED NAMES & NUMBERS

95-4712218

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

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

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

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., 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 region	(f) Total expenditures for and investments in region
(1) MIDDLE EAST AND NORTH AFRICA		3.	PROGRAM SERVICES	SEE FORM 990 PART III	922,674.
(2) EUROPE	1.	19.	PROGRAM SERVICES	SEE FORM 990 PART III	15,244,310.
(3) EAST ASIA AND THE PACIFIC	1.	46.	PROGRAM SERVICES	SEE FORM 990 PART III	4,132,301.
(4) SOUTH AMERICA		1.	PROGRAM SERVICES	SEE FORM 990 PART III	1,176,172.
(5) NORTH AMERICA		174.	PROGRAM SERVICES	SEE FORM 990 PART III	3,467,945.
(6) SUB-SAHARAN AFRICA		1.	PROGRAM SERVICES	SEE FORM 990 PART III	694,327.
(7) CENTRAL AMERICA/CARIBBEAN		1.	PROGRAM SERVICES	SEE FORM 990 PART III	41,419.
(8) SOUTH ASIA			PROGRAM SERVICES	SEE FORM 990 PART III	88,517.
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total.	2.	245.			25,767,665.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	2.	245.			25,767,665.

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

Schedule F (Form 990) 2012

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. 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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE/ ICELAND/ GREENLAND	ATLAS SPONSO	44,925.	WIRE/ CASH			
(2)			EUROPE/ ICELAND/ GREENLAND	CYBERSECURE SPONSORSHIP	22,982.	WIRE/ CASH			
(3)			EUROPE/ ICELAND/ GREENLAND	ROUNDTABLE SPONSORSHIP	16,474.	WIRE/ CASH			
(4)			EUROPE/ ICELAND/ GREENLAND	IISI FORUM SPONSORSHIP	10,000.	WIRE/ CASH			
(5)			EUROPE/ ICELAND/ GREENLAND	E-ACCESS. SPONSORSHIP	8,107.	WIRE/ CASH			
(6)			EUROPE/ ICELAND/ GREENLAND	WCIT-12 SPONSORSHIP	6,022.	WIRE/ CASH			
(7)			CENT. AMERICA/ CARIBBEAN	IGF FORUM SPONSORSHIP	10,000.	WIRE/ CASH			
(8)			MIDDLE EAST/ NORTH AFRICA	AMAG-4 MEETI SPONSORSHIP	10,000.	WIRE/ CASH			
(9)			SOUTH AMERICA	LACNIC ANNIV SPONSORSHIP	7,000.	WIRE/ CASH			
(10)			SOUTH AMERICA	LACTLD SPONSORSHIP	6,500.	WIRE/ CASH			
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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. 10.

3 Enter total number of other organizations or entities. 10.

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. 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 non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) FELLOWSHIP PROGRAM	CENT. AMERICA/CARIBBEAN	3.	1,500.	WIRE/CASH	6,454.	AIRFARE/LODG	ACTUAL EXP.
(2) FELLOWSHIP PROGRAM	EAST ASIA/PACIFIC	8.	4,000.	WIRE/CASH	25,034.	AIRFARE/LODG	ACTUAL EXP.
(3) FELLOWSHIP PROGRAM	EUROPE/ICELAND/GREENLAND	3.	1,500.	WIRE/CASH	5,838.	AIRFARE/LODG	ACTUAL EXP.
(4) FELLOWSHIP PROGRAM	MIDDLE EAST/NORTH AFRICA	7.	3,500.	WIRE/CASH	16,806.	AIRFARE/LODG	ACTUAL EXP.
(5) FELLOWSHIP PROGRAM	NORTH AMERICA	1.	500.	WIRE/CASH	2,256.	AIRFARE/LODG	ACTUAL EXP.
(6) FELLOWSHIP PROGRAM	RUSSIA/NEWLY IND. STATES	5.	2,500.	WIRE/CASH	13,286.	AIRFARE/LODG	ACTUAL EXP.
(7) FELLOWSHIP PROGRAM	SOUTH AMERICA	9.	4,500.	WIRE/CASH	26,805.	AIRFARE/LODG	ACTUAL EXP.
(8) FELLOWSHIP PROGRAM	SOUTH ASIA	9.	4,500.	WIRE/CASH	20,127.	AIRFARE/LODG	ACTUAL EXP.
(9) FELLOWSHIP PROGRAM	SUB-SAHARAN AFRICA	13.	7,778.	WIRE/CASH	40,211.	AIRFARE/LODG	ACTUAL EXP.
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part 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 No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to 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)* Yes 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 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 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 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 file Form 5713, International Boycott Report (see Instructions for Form 5713)* Yes No

Part V Supplemental Information

Complete this part to 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).

ORGANIZATION'S PROCEDURES FOR MONITORING USE OF GRANT FUNDS OUTSIDE THE US

SCHEDULE F, PART I, LINE 2

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

FELLOWSHIPS ARE AWARDED BY AN INDEPENDENT SELECTION COMMITTEE BASED ON A MIX OF CRITERIA INCLUDING APPLICANT EXPERIENCE AND REFERENCES, GEOGRAPHIC PROXIMITY TO MEETING, RECEIPT OF PAST FELLOWSHIPS, ETC. INDIVIDUALS MAY NOT RECEIVE THIS GRANT OF SUPPORT MORE THAN THREE TIMES.

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

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

Part V Supplemental Information

Complete this part to 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).

TRAVEL AND HOTEL COSTS ASSOCIATED WITH FELLOWS PRE-SELECTED TO ATTEND THE PUBLIC MEETING ARE BOOKED AND PAID FOR DIRECTLY BY ICANN. ALL FELLOWS ARE ELIGIBLE TO RECEIVE A FLAT STIPEND NOT TO EXCEED U.S. \$500.00. STIPENDS ARE GENERALLY PROVIDED TO FELLOWS BY WIRE TRANSFER AND ARE PAID TO EACH FELLOW SUBSEQUENT TO THE MEETING AND AFTER THE FELLOW HAS DEMONSTRATED COMPLETION OF THE FELLOWSHIP PROGRAM. DURING THE TWELVE MONTHS ENDED JUNE 30, 2013, ICANN PAID \$187,095 TO ALLOW FIFTY-EIGHT (58) FELLOWSHIP PARTICIPANTS TO ATTEND TWO ICANN PUBLIC MEETINGS.

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

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

Part V Supplemental Information

Complete this part to 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).

SUPPLEMENTAL INFORMATION

SCHEDULE F, PART I, LINE 3

AT JUNE 30, 2013, ICANN HAD ONE INTERNATIONAL OFFICE LOCATED IN BRUSSELS, BELGIUM. THE SYDNEY, AUSTRALIA OFFICE WAS CLOSED IN FEBRUARY 2013. THE NUMBER OF PEOPLE IN EACH REGION SHOWN IN PART I LINE 3 COL (C) OF SCHEDULE F INCLUDES EMPLOYEES AND LONG-TERM INDEPENDENT CONTRACTORS WORKING FOR ICANN.

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

- A. THE AMOUNTS PAID (FOR COMPENSATION, TRAVEL REIMBURSEMENT, AND OTHER COSTS AND EXPENSES) FROM THE US ACCOUNTS PAYABLE DEPARTMENT APPLICABLE TO THE REGION.
- B. ALL COSTS ASSOCIATED WITH THE TWO ANNUAL PUBLIC MEETINGS (I.E. TORONTO, CANADA; BEIJING, CHINA) FOR FISCAL YEAR 2013.
- C. AMOUNTS EXPENDED TO FUND THE SYDNEY, AUSTRALIA AND BRUSSELS, BELGIUM BRANCH OFFICES AND PERSONNEL COSTS INCLUDING OFFICE EXPENSES, TRAVEL-RELATED AND OTHER EXPENSES PAID BY THE US ACCOUNTS PAYABLE DEPARTMENT.
- D. ALL PAYMENTS MADE TO INTERNATIONAL BASED EMPLOYEES AND CONTRACTORS WERE RECORDED IN US DOLLARS.

Part V **Supplemental Information**

Complete this part to 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).

STATEMENT OF ACTIVITIES OUTSIDE THE UNITED STATES

SCHEDULE F, PART I, LINE 3

THE SUBTOTAL ON LINE 3(A), COLUMN C REPRESENTS THE INDIVIDUAL EMPLOYEES.

THE ACTIVITIES PER REGION IN LINE 3 REPRESENT THE INDIVIDUAL EMPLOYEES

AND LONG-TERM INDEPENDENT CONTRACTORS.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the
organization entered more than \$15,000 on Form 990-EZ, line 6a.
Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No. 1545-0047

2012

Open to Public
Inspection

INTERNET CORP FOR ASSIGNED NAMES & NUMBERS

Employer identification number

95-4712218

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
a Mail solicitations
b Internet and email solicitations
c Phone solicitations
d In-person solicitations
e Solicitation of non-government grants
f Solicitation of government grants
g Special fundraising events
2a Did the organization have a written or oral agreement with any individual...
b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 main columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col. (i), (vi) Amount paid to (or retained by) organization. Includes rows 1-10 and a Total row.

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2).				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				()
	11 Net income summary. Combine line 3, column (d), and line 10 ▶				

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue			176,600.
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes _____% <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				()	
8 Net gaming income summary. Combine line 1, column d, and line 7 ▶				176,600.	

9 Enter the state(s) in which the organization operates gaming activities: CA,
a Is the organization licensed to operate gaming activities in each of these states? Yes No
b If "No," explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
b If "Yes," explain: _____

- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity operated in:

a The organization's facility	13a	%
b An outside facility	13b	100.0000 %
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ XAVIER CALVEZ

Address ▶ 12025 WATERFRONT DRIVE, SUITE 300 LOS ANGELES, CA 90094-2536

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$ _____

Description of services provided ▶

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE G, PART III, LINE 17B

THE ONLY PRIORITIZATION DRAW ICANN HELD WAS CONDUCTED ON 17 DECEMBER 2012
 IN LOS ANGELES TO ASSIGN PRIORITY NUMBERS TO ALL NEW GTLD APPLICATIONS.
 THIS DRAW WAS CONDUCTED PURSUANT TO ICANN'S NON-PROFIT RAFFLE
 REGISTRATION NUMBER RF0007607. THESE PRIORITY NUMBERS WERE USED TO
 DETERMINE THE ORDER IN WHICH INITIAL EVALUATION RESULTS ARE RELEASED. IN
 FISCAL YEAR 2014, 100% OF THE PROCEEDS WERE DONATED TO ELIGIBLE

- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity operated in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

CALIFORNIA CHARITABLE ORGANIZATIONS IN ACCORDANCE WITH CALIFORNIA LEGAL REQUIREMENTS. ICANN SENT \$58,866.67 EACH TO THE FOLLOWING CHARITIES:

WIKIMEDIA FOUNDATION

INVENEO

KIVA MICROFUNDS

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

INTERNET CORP FOR ASSIGNED NAMES & NUMBERS

Employer identification number

95-4712218

Part I Questions Regarding Compensation

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

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

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

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

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

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

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

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

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

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

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

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

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

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

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

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

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

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

Schedule J (Form 990) 2012

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

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

Note. The sum of columns (B)(i)-(iii) 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.

	(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	FADI CHEHADE DIR./PRES. & CEO (FROM 9/14/12)	165,487.	0	77,544.	23,674.	6,426.	273,131.	0
	(i)	165,487.	0	77,544.	23,674.	6,426.	273,131.	0
	(ii)	0	0	0	0	0	0	0
2	AKRAM ATALIAH COO/FORMER CEO (THRU 9/13/12)	482,719.	112,550.	0	29,500.	24,657.	649,426.	0
	(i)	482,719.	112,550.	0	29,500.	24,657.	649,426.	0
	(ii)	0	0	0	0	0	0	0
3	XAVIER CALVEZ CHIEF FINANCIAL OFFICER	262,500.	80,552.	0	24,834.	22,908.	390,794.	0
	(i)	262,500.	80,552.	0	24,834.	22,908.	390,794.	0
	(ii)	0	0	0	0	0	0	0
4	JOHN JEFFREY GENERAL COUNSEL AND SECRETARY	380,409.	102,101.	0	12,500.	24,657.	519,667.	0
	(i)	380,409.	102,101.	0	12,500.	24,657.	519,667.	0
	(ii)	0	0	0	0	0	0	0
5	KURT PRITZ CH STRAT OFC/FMR SVP(11/14/12)	332,111.	117,968.	0	29,500.	22,514.	502,093.	0
	(i)	332,111.	117,968.	0	29,500.	22,514.	502,093.	0
	(ii)	0	0	0	0	0	0	0
6	STEVE ANTONOFF DIRECTOR, HUMAN RESOURCES	175,024.	29,467.	0	20,449.	17,401.	242,341.	0
	(i)	175,024.	29,467.	0	20,449.	17,401.	242,341.	0
	(ii)	0	0	0	0	0	0	0
7	BARBARA CLAY VICE PRESIDENT, COMMUNICATIONS	170,922.	60,758.	0	32,556.	6,677.	270,913.	0
	(i)	170,922.	60,758.	0	32,556.	6,677.	270,913.	0
	(ii)	0	0	0	0	0	0	0
8	ELISE GERICH VICE PRESIDENT, IANA	204,516.	74,217.	0	29,500.	17,589.	325,822.	0
	(i)	204,516.	74,217.	0	29,500.	17,589.	325,822.	0
	(ii)	0	0	0	0	0	0	0
9	JAMES HEDLUND VP STAKEHOLDER ENGAGEMENT N.A.	267,393.	100,242.	0	22,701.	24,405.	414,741.	0
	(i)	267,393.	100,242.	0	22,701.	24,405.	414,741.	0
	(ii)	0	0	0	0	0	0	0
10	DAVID OLIVE VICE PRESIDENT, POLICY	243,600.	91,620.	0	29,500.	24,405.	389,125.	0
	(i)	243,600.	91,620.	0	29,500.	24,405.	389,125.	0
	(ii)	0	0	0	0	0	0	0
11	JEFFREY MOSS VP, CHIEF SECURITY OFFICER	279,125.	77,625.	0	29,500.	17,419.	403,669.	0
	(i)	279,125.	77,625.	0	29,500.	17,419.	403,669.	0
	(ii)	0	0	0	0	0	0	0
12	NICK TOMASSO SR. DIR MEETINGS-LANGUAGE SVCS	173,040.	32,137.	0	27,259.	17,207.	249,643.	0
	(i)	173,040.	32,137.	0	27,259.	17,207.	249,643.	0
	(ii)	0	0	0	0	0	0	0
13	DANIEL HALLORAN DEPUTY GENERAL COUNSEL	210,415.	93,289.	0	29,500.	24,657.	357,861.	0
	(i)	210,415.	93,289.	0	29,500.	24,657.	357,861.	0
	(ii)	0	0	0	0	0	0	0
14	DENISE MICHEL VP STRAT INIT./ADVISOR TO PRES	224,936.	61,044.	0	33,000.	24,657.	343,637.	0
	(i)	224,936.	61,044.	0	33,000.	24,657.	343,637.	0
	(ii)	0	0	0	0	0	0	0
15	MARGARET MILAM SR. DIR., POLICY DEVELOPMENT	204,261.	40,283.	0	29,227.	24,403.	298,174.	0
	(i)	204,261.	40,283.	0	29,227.	24,403.	298,174.	0
	(ii)	0	0	0	0	0	0	0
15	AMY STATHOS DEPUTY GENERAL COUNSEL	231,709.	103,858.	0	29,500.	9,016.	374,083.	0
	(i)	231,709.	103,858.	0	29,500.	9,016.	374,083.	0
	(ii)	0	0	0	0	0	0	0

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

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

Note. The sum of columns (B)(i)-(iii) 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.

	(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	JAMES TRENGROVE SR. DIRECTOR, COMMUNICATIONS	192,272.	39,978.	0	28,613.	24,345.	285,208.	0
		0	0	0	0	0	0	0
2	ROD BECKSTROM FWR DIR/PRES & CEO (6/30/12)	461,534.	157,950.	0	33,000.	12,066.	664,550.	0
		0	0	0	0	0	0	0
3	MICHAEL SALAZAR FWR DIRECTOR, GTLD OPERATIONS	239,384.	29,739.	0	23,563.	12,066.	304,752.	0
		0	0	0	0	0	0	0
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								

Part III Supplemental Information

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

SUPPLEMENTAL COMPENSATION INFORMATION

AMOUNTS LISTED IN PART VII OF FORM 990 AND SCHEDULE J REPRESENT AMOUNTS FOR THE 2012 CALENDAR YEAR.

SCHEDULE J, PART I, LINE 1A

FIRST CLASS TRAVEL

IN THE CASES WHERE FIRST CLASS TRAVEL WAS BOOKED, IT WAS IDENTIFIED AS THE LOWEST FARE AVAILABLE AT THE TIME THE TRAVEL WAS REQUIRED, WAS DUE TO A MEDICAL CONDITION, OR WAS PERMITTED UNDER ICANN'S TRAVEL POLICY WHERE THE SELECTION OF BUSINESS CLASS WAS ALLOWED, BUT WAS AUTOMATICALLY CHANGED TO FIRST CLASS BY THE AIRLINE ON A TWO-CLASS PLANE. THESE AMOUNTS WERE FOR BUSINESS PURPOSES AND WERE NOT REPORTED AS INCOME ON THE EMPLOYEE'S W-2.

SCHEDULE J, PART I, LINE 7

REGARDING BONUSES:

THE OVERARCHING OBJECTIVE OF ICANN'S REMUNERATION FRAMEWORK IS TO ENSURE REMUNERATION PROVIDED IS COMPETITIVE GLOBALLY AND THAT IT PROVIDES STAFF WITH APPROPRIATE MOTIVATION FOR HIGH PERFORMANCE TOWARDS AGREED

Part III Supplemental Information

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

OBJECTIVES. THIS FRAMEWORK IS DESCRIBED IN DETAIL WITHIN THE DOCUMENT ENTITLED ICANN REMUNERATION.

[HTTP://WWW.ICANN.ORG/EN/ABOUT/FINANCIALS/REMUNERATION-PRACTICES-FY14-01JUL](http://www.icann.org/en/about/financials/remuneration-practices-fy14-01jul)

13-EN.PDF

SCHEDULE J, PART II

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

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

NOTABLY, BELGIUM, WHERE ICANN HAS NINE EMPLOYEES AS OF DECEMBER 31, 2012, REPRESENTS QUITE A DIFFERENT EMPLOYMENT MARKET DUE TO DIFFERENCES IN TAX

Part III Supplemental Information

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

RATES AND OTHER FACTORS SUCH AS MEDICAL PROGRAMS. IN ADDITION, EXCHANGE RATE FLUCTUATIONS ALSO AFFECT THE U.S. DOLLAR EQUIVALENCE OF THE BELGIUM STAFF.

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

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

OMB No. 1545-0047

2012

Open To Public Inspection

Name of the organization

INTERNET CORP FOR ASSIGNED NAMES & NUMBERS

Employer identification number

95-4712218

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

- 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
- 3 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	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
			(1)									
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total ▶ \$ _____												

Part III Grants or Assistance Benefiting Interested Persons.

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

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

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

Schedule L (Form 990 or 990-EZ) 2012

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) MELBOURNE IT	BRUCE TONKIN - DIRECTOR	601,918.	SEE PART V		X
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

BUSINESS TRANSACTIONS WITH RELATED PERSONS

SCHEDULE L, PART IV

1. DR. BRUCE TONKIN IS A VOTING MEMBER OF THE BOARD OF DIRECTORS. DR. TONKIN IS ALSO CHIEF STRATEGY OFFICER OF MELBOURNE IT, AN ICANN ACCREDITED REGISTRAR. REVENUE FROM MELBOURNE IT AMOUNTED TO \$601,918 AND \$732,408 FOR THE YEARS ENDED JUNE 30, 2013 AND JUNE 30, 2012, RESPECTIVELY, UNDER THE FEE STRUCTURE OF THE STANDARD REGISTRAR ACCREDITATION AGREEMENT. TO AVOID ANY CONFLICT OF INTEREST BETWEEN ICANN AND MELBOURNE IT, DR. TONKIN ABSTAINS FROM VOTING ON ALL MATTERS HE IDENTIFIES AS POTENTIAL CONFLICTS OF INTEREST WHICH COME BEFORE THE BOARD.

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

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

RESPONSIBLE FOR CONFLICTS OF INTEREST REVIEWS ALL BOARD MEMBER CONFLICTS
OF INTEREST STATEMENTS. SEE:

[HTTP://WWW.ICANN.ORG/EN/GROUPS/BOARD/DOCUMENTS/SOIS](http://www.icann.org/en/groups/board/documents/sois)

SCHEDULE O
(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 990-EZ.**

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Name of the organization

INTERNET CORP FOR ASSIGNED NAMES & NUMBERS

Employer identification number

95-4712218

ORGANIZATION'S MISSION

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

THE MISSION OF THE INTERNET CORPORATION FOR ASSIGNED NAMES AND NUMBERS ("ICANN") IS TO PROMOTE THE GLOBAL PUBLIC INTEREST IN THE OPERATIONAL STABILITY OF THE INTERNET BY: (I) COORDINATING THE ASSIGNMENT OF INTERNET TECHNICAL PARAMETERS AS NEEDED TO MAINTAIN UNIVERSAL CONNECTIVITY ON THE INTERNET; (II) PERFORMING AND OVERSEEING FUNCTIONS RELATED TO THE COORDINATION OF THE INTERNET PROTOCOL ("IP") ADDRESS SPACE; (III) PERFORMING AND OVERSEEING FUNCTIONS RELATED TO THE COORDINATION OF THE INTERNET DOMAIN NAME SYSTEM ("DNS"), INCLUDING THE DEVELOPMENT OF POLICIES FOR DETERMINING THE CIRCUMSTANCES UNDER WHICH NEW TOP-LEVEL DOMAINS ARE ADDED TO THE DNS ROOT SYSTEM; (IV) OVERSEEING OPERATION OF THE AUTHORITATIVE INTERNET DNS ROOT SERVER SYSTEM; AND (V) ENGAGING IN ANY OTHER RELATED LAWFUL ACTIVITY IN FURTHERANCE OF ITEMS (I) THROUGH (IV).

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

GOVERNING BODY

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

IN ADDITION TO THE VOTING MEMBERS OF THE BOARD OF DIRECTORS, ICANN'S BYLAWS AS OF JUNE 30, 2013 ALLOWED FOR FIVE (5) NON-VOTING LIAISONS. THE NON-VOTING LIAISONS ARE ENTITLED TO ATTEND BOARD MEETINGS, PARTICIPATE IN

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

BOARD DISCUSSIONS AND DELIBERATIONS, AND HAVE ACCESS (UNDER CONDITIONS ESTABLISHED BY THE BOARD) TO MATERIALS PROVIDED TO DIRECTORS FOR USE IN BOARD DISCUSSIONS, DELIBERATIONS AND MEETINGS.

THE FOLLOWING INDIVIDUALS SERVED AS NON-VOTING LIAISONS DURING THE FISCAL YEAR ENDING JUNE 30, 2013:

1. FRANCISCO DA SILVA (TLG, OCT 2012 - 2013)
2. HEATHER DRYDEN (GAC, JUNE 2010 - 2015)
3. RAM MOHAN (SSAC, 2009 - 2013)
4. THOMAS NARTEN (IETF, JULY 2005 - JULY 2013)
5. THOMAS ROESSLER (TLG, OCT 2011 - OCT 2012)
6. SUZANNE WOOLF (RSSAC, 2004 - 2013)

NEW GTLD PROGRAM COMMITTEE

IN ORDER TO HAVE EFFICIENT MEETINGS AND TAKE APPROPRIATE ACTIONS WITH RESPECT TO THE NEW GTLD PROGRAM FOR THE CURRENT ROUND OF THE PROGRAM AND AS RELATED TO THE APPLICANT GUIDEBOOK, THE BOARD CREATED THE "NEW GTLD PROGRAM COMMITTEE" IN ACCORDANCE WITH ARTICLE XII OF THE BYLAWS AND HAS DELEGATED DECISION MAKING AUTHORITY TO THE COMMITTEE AS IT RELATES TO THE NEW GTLD PROGRAM FOR THE CURRENT ROUND OF THE PROGRAM WHICH COMMENCED IN JANUARY 2012 AND FOR THE RELATED APPLICANT GUIDEBOOK THAT APPLIES TO THIS CURRENT ROUND.

ESTABLISHING THIS NEW COMMITTEE WITHOUT CONFLICTED MEMBERS, AND

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

DELEGATING TO IT DECISION MAKING AUTHORITY, PROVIDES SOME DISTINCT ADVANTAGES. FIRST, IT HELPS ELIMINATE ANY UNCERTAINTY FOR CONFLICTED BOARD MEMBERS WITH RESPECT TO ATTENDANCE AT BOARD MEETINGS AND WORKSHOPS SINCE THE NEW GTLD PROGRAM TOPICS CAN BE DEALT WITH AT THE COMMITTEE LEVEL. SECOND, IT ALLOWS FOR ACTIONS TO BE TAKEN WITHOUT A MEETING BY THE COMMITTEE. ACTIONS WITHOUT A MEETING CANNOT BE TAKEN UNLESS DONE VIA ELECTRONIC SUBMISSION BY UNANIMOUS CONSENT; SUCH UNANIMOUS CONSENT CANNOT BE ACHIEVED IF EVEN JUST ONE BOARD MEMBER IS CONFLICTED. THIRD, IT PROVIDES THE COMMUNITY WITH A TRANSPARENT VIEW INTO THE BOARD'S COMMITMENT TO DEALING WITH ACTUAL, POTENTIAL OR PERCEIVED CONFLICTS.

MEMBERS AS OF JUNE 30, 2013

CHERINE CHALABY (CHAIR)

FADI CHEHADÉ (MEMBER)

CHRIS DISSPAIN (MEMBER)

BILL GRAHAM (MEMBER)

OLGA MADRUGA-FORTI (MEMBER)

ERIKA MANN (MEMBER)

GONZALO NAVARRO (MEMBER)

RAY PLZAK (MEMBER)

GEORGE SADOWSKY (MEMBER)

MIKE SILBER (MEMBER)

JUDITH VAZQUEZ (MEMBER)

KUO-WEI WU (MEMBER)

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

HEATHER DRYDEN (NON VOTING LIAISON)

FRANCISCO DA SILVA (NON VOTING LIAISON)

PROGRAM SERVICE ACCOMPLISHMENTS

FORM 990, PART III, LINE 2

AS OF JUNE 30, 2013, THE INTERNET NAMESPACE CONSISTED OF 22 GENERIC TOP LEVEL DOMAINS (GTLDS) AND OVER 250 COUNTRY CODE TOP LEVEL DOMAINS (CCTLDS) OPERATING ON VARIOUS MODELS. EACH GTLD HAS A DESIGNATED "REGISTRY OPERATOR" AND, IN MOST CASES, A REGISTRY AGREEMENT BETWEEN THE OPERATOR (OR SPONSOR) AND ICANN. THE REGISTRY OPERATOR IS RESPONSIBLE FOR THE TECHNICAL OPERATION OF THE GTLD, INCLUDING ALL OF THE NAMES REGISTERED IN THAT TLD. OVER 1,000 ICANN ACCREDITED REGISTRARS INTERACT WITH REGISTRANTS (AND OTHERS) TO PERFORM DOMAIN NAME REGISTRATION AND OTHER RELATED SERVICES FOR NEW GTLDS. THE NEW GTLD PROGRAM HAS PROVIDED A MEANS FOR PROSPECTIVE REGISTRY OPERATORS TO APPLY FOR NEW GTLDS, AND CREATE NEW OPTIONS FOR CONSUMERS. THE PROGRAM OPENED ITS FIRST APPLICATION ROUND IN JANUARY 2012 AND ICANN RECEIVED 1930 APPLICATIONS. WHILE SOME OF THOSE APPLICATIONS HAVE BEEN WITHDRAWN, ICANN CONTINUES TO PROCESS THE REMAINING APPLICATIONS.

PROGRAM SERVICE ACCOMPLISHMENTS

FORM 990, PART III, LINE 4

ICANN IS A MULTI-STAKEHOLDER ORGANIZATION THAT COORDINATES THE INTERNET DOMAIN NAME SYSTEM (DNS) AND ADDRESSING FOR THE BENEFIT OF INTERNET USERS WORLDWIDE, ENABLING A SINGLE, INTEROPERABLE INTERNET. AS OF JUNE 30, 2013, ICANN WAS RESPONSIBLE FOR THE GLOBAL TECHNICAL COORDINATION OF THE

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

DNS. AT THAT TIME THERE WERE OVER 240 MILLION INTERNET DOMAIN NAMES, INCLUDING APPROXIMATELY 133 MILLION INTERNET DOMAIN NAMES FOUND IN GENERIC TOP-LEVEL DOMAINS, MOST OF WHICH ARE GOVERNED BY ICANN'S COMMUNITY-DEVELOPED POLICIES. SEE ADDITIONAL INFORMATION ABOUT ICANN'S PROGRAMS AND ACTIVITIES ON THE ICANN WEBSITE AND IN THE ICANN ANNUAL REPORT POSTED AT ICANN.ORG.

NEW GTLD PRIORITIZATION DRAW

FORM 990, PART IV, LINE 19

THE PRIORITIZATION DRAW WAS HELD ON DECEMBER 17, 2012 IN LOS ANGELES TO ASSIGN PRIORITY NUMBERS TO ALL NEW GTLD APPLICATIONS. EACH APPLICATION WAS ASSIGNED A RANDOMLY-DRAWN PRIORITY NUMBER. THESE PRIORITY NUMBERS WERE USED TO DETERMINE THE ORDER IN WHICH INITIAL EVALUATION RESULTS ARE RELEASED. ONLY THOSE APPLICANTS WHO PURCHASED A TICKET WERE ABLE TO PARTICIPATE IN THE DRAW. IN FISCAL YEAR 2014, 100% OF THE PROCEEDS WERE DONATED TO ELIGIBLE CALIFORNIA CHARITABLE ORGANIZATIONS IN ACCORDANCE WITH CALIFORNIA LEGAL REQUIREMENTS. ICANN SENT \$58,866.67 EACH TO THE FOLLOWING CHARITIES:

WIKIMEDIA FOUNDATION

INVENEO

KIVA MICROFUNDS

CHANGES TO GOVERNING DOCUMENTS RELATED TO FISCAL YEAR 2013

FORM 990, PART VI, LINE 4

ON DECEMBER 20, 2012, THE BOARD APPROVED BYLAWS THAT CHANGED TERM ENDING

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

DATES OF THOSE BOARD MEMBERS SELECTED BY ICANN'S SUPPORTING ORGANIZATIONS AND THE AT-LARGE COMMUNITY.

ON APRIL 11, 2013, THE BOARD APPROVED BYLAWS REVISIONS AS THOSE PROVISIONS RELATE TO ONE OF ICANN'S ADVISORY COMMITTEES, THE ROOT SERVER SYSTEM ADVISORY COMMITTEE.

BODIES THAT APPOINT MEMBERS OF ICANN'S GOVERNING BODY FORM 990, PART VI, LINE 7A THE NOMINATING COMMITTEE (NOMCOM) IS RESPONSIBLE FOR THE SELECTION OF EIGHT ICANN VOTING BOARD MEMBERS AND FOR OTHER SELECTIONS AS ARE SET FORTH IN THE BYLAWS. (SEE BYLAWS ARTICLE VII, SECTION 1.)

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

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

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

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

LOCAL CHAPTERS, BRANCHES AND AFFILIATES

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

DURING FISCAL 2013, ICANN HAD OFFICES OUTSIDE OF THE UNITED STATES IN BRUSSELS, BELGIUM, AND SYDNEY, AUSTRALIA (THE SYDNEY, AUSTRALIA OFFICE WAS CLOSED IN FEBRUARY 2013), WHICH PROVIDED OPERATIONAL SUPPORT TO THEIR RESPECTIVE GEOGRAPHICAL REGIONS. IN APRIL 2013 ICANN ENTERED INTO A LEASE FOR OFFICE SPACE IN SINGAPORE, SINGAPORE, BUT OPERATIONS IN THE OFFICE DID NOT BEGIN UNTIL AFTER THE END OF THE FISCAL YEAR.

FORM 990 REVIEW PROCESS

FORM 990, PART VI, LINE 11B

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

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

1. ICANN ENGAGES AN OUTSIDE TAX PREPARER TO ASSIST IN THE PREPARATION OF ITS FORM 990.

2. ICANN'S CHIEF FINANCIAL OFFICER (CFO), AND OFFICE OF THE GENERAL COUNSEL REVIEW THE FORM 990, AND THE CFO SIGNS OFF FOR APPROVAL.

3. THE FORM 990 IS PROVIDED TO THE ICANN BOARD MEMBERS.

CONFLICTS OF INTEREST POLICY

FORM 990, PART VI, LINE 12C

ICANN HAS WRITTEN CONFLICTS OF INTEREST POLICIES, WHICH ARE APPLICABLE TO ALL BOARD MEMBERS AND STAFF MEMBERS. THE OFFICE OF THE GENERAL COUNSEL MONITORS THE POLICIES WITH OVERSIGHT BY THE BOARD GOVERNANCE COMMITTEE AS THEY RELATE TO THE BOARD. A CONFLICTS OF INTEREST DISCLOSURE STATEMENT IS COMPLETED ANNUALLY AND SIGNED BY EACH BOARD MEMBER, OFFICER AND KEY EMPLOYEE (WHICH WAS EXTENDED IN FISCAL YEAR 2013 TO ALL STAFF MEMBERS AND RELEVANT CONTRACTORS). THE STAFF MEMBER AND CONTRACTOR DISCLOSURE STATEMENTS ARE REVIEWED BY THE HEAD OF HUMAN RESOURCES AND DISCUSSED WITH GENERAL COUNSEL'S OFFICE IF ANY ISSUES ARISE; THE BOARD LEVEL DISCLOSURE STATEMENTS ARE REVIEWED BY THE OFFICE OF GENERAL COUNSEL AND THE BOARD GOVERNANCE COMMITTEE.

THE BOARD MEMBER, OFFICER AND KEY EMPLOYEE CONFLICTS OF INTEREST POLICY CAN BE FOUND AT:

[HTTP://WWW.ICANN.ORG/EN/GROUPS/BOARD/GOVERNANCE/COI](http://www.icann.org/en/groups/board/governance/coi). THIS POLICY DESCRIBES THE DUTY TO DISCLOSE, THE PROCEDURES FOR ADDRESSING CONFLICTS OF INTEREST, THE DUTY TO ABSTAIN, HOW VIOLATIONS OF THE CONFLICTS OF INTEREST POLICY WILL BE HANDLED, HOW TO HANDLE A BOARD MEMBER WHO

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

RECEIVES COMPENSATION, THE ANNUAL STATEMENT PROCESS BY WHICH ALL COVERED PERSONS SIGN ANNUALLY THEIR AFFIRMATION OF THE POLICY AND DISCLOSE THEIR ACTUAL OR POTENTIAL CONFLICTS, AND THE REQUIREMENT AND NATURE OF PERIODIC REVIEWS. A SUMMARY OF BOARD MEMBER AND OFFICER DISCLOSURE STATEMENTS ARE POSTED ON THE WEBSITE AT:

[HTTP://WWW.ICANN.ORG/EN/GROUPS/BOARD/DOCUMENTS/SOIS](http://www.icann.org/en/groups/board/documents/sois)

RETENTION AND DESTRUCTION POLICY

FORM 990, PART VI, LINE 14

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

PROCESS FOR DETERMINING COMPENSATION

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

ICANN FOLLOWS PRINCIPLES OF ACCOUNTABILITY AND TRANSPARENCY AND DESCRIBES ITS REMUNERATION PLANS AND PRACTICES, WHICH ARE CONTINUALLY UPDATED. THE MOST CURRENT VERSION OF ICANN'S COMPENSATION PRACTICES REPORT IS POSTED AT:

[HTTP://WWW.ICANN.ORG/EN/ABOUT/FINANCIALS/REMUNERATION-PRACTICES-FY14-01JUL13-EN.PDF](http://www.icann.org/en/about/financials/remuneration-practices-fy14-01jul13-en.pdf)

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

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

RESPONSE TO RECOMMENDATIONS BY THE BOARD COMPENSATION COMMITTEE. MINUTES OF THESE MEETINGS ARE MAINTAINED BY THE BOARD SECRETARY AS PART OF THE CORPORATE SECRETARIAT FUNCTION. EACH YEAR THE APPOINTMENT FOR EACH OFFICER IS CONFIRMED BY THE BOARD OF DIRECTORS AT THE ANNUAL GENERAL MEETING. DATA RELATED TO OFFICER COMPENSATION WAS LAST COMPILED DURING 2013.

AVAILABILITY OF 990

FORM 990, PART VI, LINE 18

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

[HTTP://WWW.ICANN.ORG/EN/ABOUT/FINANCIALS/TAX/US/FY-2012-FORM-990-EN.PDF](http://www.icann.org/en/about/financials/tax/us/fy-2012-form-990-en.pdf)

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

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

REQUESTS SHOULD BE SUBMITTED TO ICANN'S CFO BY EMAIL TO

XAVIER.CALVEZ@ICANN.ORG, OR BY PHONE AT +1.310.301.5838.

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

ITS WEBSITE. THE ORIGINAL FORM 1023 POST IS LOCATED AT:

[HTTP://ARCHIVE.ICANN.ORG/EN/FINANCIALS/TAX/US/FORM1023-1.HTM](http://archive.icann.org/en/financials/tax/us/form1023-1.htm)

AVAILABILITY OF GOVERNING DOCS, CONFLICTS OF INTEREST, AND FINANCIAL STMTS

FORM 990, PART VI, LINE 19

IN ACCORDANCE WITH ITS CORPORATE BYLAWS (SEE:

[HTTP://WWW.ICANN.ORG/EN/ABOUT/GOVERNANCE/BYLAWS](http://www.icann.org/en/about/governance/bylaws)) AND THE AFFIRMATION OF

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

COMMITMENTS WITH THE UNITED STATES DEPARTMENT OF COMMERCE, ICANN IS COMMITTED TO ACCOUNTABILITY AND TRANSPARENCY PRINCIPLES. THIS INCLUDES PROVIDING EXTENSIVE ACCESS TO THE PUBLIC THROUGH THE ICANN WEBSITE OF ITS GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS. SEE: [HTTP://WWW.ICANN.ORG/EN/ABOUT/GOVERNANCE](http://www.icann.org/en/about/governance)

OFFICER/DIRECTOR SERVICE DATES

FORM 990, PART VII

IN PART VII, A DATE FOLLOWING AN OFFICER/DIRECTOR'S NAME INDICATES THE DATE ON WHICH THE OFFICER/DIRECTOR'S SERVICES ENDED. IF NO DATE IS INDICATED, THAT OFFICER/DIRECTOR WAS ACTIVE AS OF JUNE 30, 2013.

REGARDING ROD BECKSTROM, HIS COMPENSATION IS BASED ON THE TAX YEAR 2012. HIS AVERAGE HOURS PER WEEK IS ZERO (0) DUE TO THE CONCLUSION OF HIS CONTRACT TERM PRIOR TO THE FISCAL YEAR ENDING JUNE 30, 2013.

FEES FOR SERVICES - OTHER

PART IX, LINE 11G

NEW GTLD BACKGROUND SCREENING	2,011,855
NEW GTLD DNS STABILITY EVALUATION	1,328,285
NEW GTLD FINANCIAL AND TECHNICAL EVALUATION	43,743,726
NEW GTLD GEOGRAPHIC TLD EVALUATION	2,352,896
NEW GTLD OBJECTION EVALUATIONS	3,331,875
NEW GTLD PRE-DELEGATION TESTING	650,329
NEW GTLD PROGRAM ADMINISTRATION	1,485,199
NEW GTLD QUALITY CONTROL	9,665,285

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

NEW GTLD REGISTRY SERVICES EVALUATION	1,154,607
NEW GTLD STRING SIMILARITY EVALUATION	6,005,231
RECRUITING SERVICES	878,365
TEMPORARY PERSONNEL	1,310,125
TRANSLATION SERVICES	902,163
CONSULTING SERVICES	7,438,743
INTERPRETATION	771,203
COMMUNICATIONS	615,295
STRATEGY VISUALIZATION SERVICES	512,983

GRAND TOTAL	84,158,165
	=====

RISK COSTS - GTLD

PART IX, LINE 24A

RISK COSTS ARE EXPENSES THAT RELATE TO ANY CONTINGENCIES THAT MAY BE INCURRED BY ICANN AT ANY TIME THROUGHOUT OR AFTER THE NEW GTLD APPLICATION PROCESS. APPROXIMATELY ONE THIRD OF TOTAL FEES CHARGED TO APPLICANTS IN RELATION TO THE NEW GTLD PROGRAM ARE IN ANTICIPATION OF THESE COSTS.

OTHER CHANGES IN NET ASSETS

FORM 990, PART XI, LINE 9

FX GAIN/(LOSS)	\$26,916
ROUNDING	\$ 2

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

TOTAL \$26,918

ATTACHMENT 1

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

AUSTRALIA

BELGIUM

ATTACHMENT 2

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

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
ERNST & YOUNG U.S. LLP 200 PLAZA DRIVE SECAUCUS, NJ 07094	NEW GTLD PRGM ADMIN	8,577,586.
KPMG LLP 3 CHESTNUT RIDGE ROAD MONTVALE, NJ 07645-0435	NEW GTLD PRGM ADMIN	6,244,534.
JAS GLOBAL ADVISORS LLC 150 N. MICHIGAN AVE., STE 2800 CHICAGO, IL 60601-7586	NEW GTLD PRGM ADMIN	4,011,689.
JONES DAY 555 S. FLOWER ST, 50TH FLOOR LOS ANGELES, CA 90071	LEGAL SERVICES	2,664,554.
INTERISLE CONSULTING GROUP, LL 4 TIFFANY TRAIL HOPKINTON, MA 01748	NEW GTLD PRGM ADMIN	1,502,140.