Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public

Department of the Treasury

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

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

Inter	nal Revenue	e Service	► Information ab	out Form 990 and its inst	tructions is at	www.irs.ge	ov/form990).	Inspect	ion	
Α	For the 2	2015 cale <u>r</u>	ndar year, or tax year beginn	ing 01/01	, 2015, ar	nd ending	12	/31	, 20 15		
В	Check if a	pplicable:	C Name of organization Python	Software Foundation				D Employe	er identification n	ımber	
	Address c	hange	Doing business as						04-3594598		
	Name cha	inge	Number and street (or P.O. box	if mail is not delivered to stree	et address)	Room/suite		E Telephor	ne number		
	Initial retu	rn	9450 SW Gemini Dr ECM 907	72					603-569-0493		
	Final return	/terminated	City or town, state or province,	country, and ZIP or foreign po	stal code						
	Amended	return	Beaverton, OR, 97008					G Gross re	ceipts \$ 2	,384,889	
		_	F Name and address of principal of	fficer: Van Lindberg			H(a) Is this a q	oup return for s	subordinates? Yes		
	1.1.	1	24302 Vinca Reef, San Antoi	_			1		s included? Tes		
ī	Tax-exem		✓ 501(c)(3)		4947(a)(1) or	527	+ · ·		ee instructions)		
J	Website:		v.python.org/psf/	(-) () (= (=)() =.		H(c) Group	exemption	number ▶		
K	Form of or	_		ociation	L Year	of formation			of legal domicile:	DE	
_	art I	Summa		-	l .						
			scribe the organization's m	ission or most significa	ant activities:	To devel	op and co	ntrol the F	Python program	mina	
ě			intellectual property, and ac						.9	y	
auc	-										
Governance	2 (Check this	s box ▶ ☐ if the organizati	on discontinued its ope	erations or dis	posed of	more than	25% of	its net assets.		
Š			f voting members of the g	-				3		11	
<u>ھ</u>	1		f independent voting mem					4		0	
es			ber of individuals employe		• ,	,		5		3	
ΞĒ			ber of volunteers (estimate	-	•	-		6		500	
Activities &	1		elated business revenue fro	- ·				7a		0	
•			ated business taxable inco	, , ,	•			7b		0	
		tot arriolo	tiod bacilloco taxable illoc	Prior Ye		Current Ye					
Revenue	8 (Contributi		215,701		308,105					
				and grants (Part VIII, line 1h)						2,075,947	
Ver	1		nt income (Part VIII, column					,741,543 396		263	
æ			enue (Part VIII, column (A),					413		574	
			nue—add lines 8 through 1		-		1	,958,053		,384,889	
			d similar amounts paid (Pa				<u>'</u>	214,038		273,095	
			aid to or for members (Pa					0	273,075		
"	1		ther compensation, employ			_		227,437		276,913	
Expenses			nal fundraising fees (Part I)	·				0		270,713	
Sen			raising expenses (Part IX,					U			
Ä			enses (Part IX, column (A),				1	,332,377	1	215.062	
	1	-	enses (r art ix, column (x), enses. Add lines 13–17 (m)		•	–		,773,852		,315,963	
	1		ess expenses. Subtract lin		III (A), IIIIe 23)	. –		184,201		,865,971 F10,010	
		ievenue i	ess expenses. Subtract iii	e io iioiii iiile iz		 Ber	ginning of Cu		End of Ye	518,918 ar	
Net Assets or Fund Balances	20 7	Fotal acce	ets (Part X, line 16)			30,		,017,619		,082,438	
Asse	21		lities (Part X, line 26)			⊢		910,558		456,460	
Net of	22 1		s or fund balances. Subtra			· ·	1		1		
	art II		ure Block	ot line 21 horn line 20	<u> </u>			,107,061	<u> </u>	,625,978	
_			y, I declare that I have examined t	his roturn, including accompa	anvina schodulos	and stateme	nte and to t	no bost of n	ny knowlodgo, and	holiof it is	
			te. Declare that I have examined the other in the state of the state o						ny knowieuge and	beller, it is	
		<u> </u>		·							
Sig	ın İ	Signa	ture of officer				l Da	te			
He							Du				
			Kaiser, Treasurer or print name and title								
_		<u>,</u>	e preparer's name	Preparer's signature		Date		T	PTIN		
Pa		"	- It stands a service					Check self-emp	if		
	eparer		mo N				F:		,		
Us	e Only							n's EIN ►			
		Firm's ac	iuress 🖊				Pho	ne no.			

May the IRS discuss this return with the preparer shown above? (see instructions)

Form 990 (2015) Page **2**

Part	II .	Statement of Program Service Accomplishments
		Check if Schedule O contains a response or note to any line in this Part III
1	-	y describe the organization's mission:
		velop and control the Python programming language and associated intellectual property, and to advance and promote the
	use o	f Python.
2	Did th	ne organization undertake any significant program services during the year which were not listed on the
		Form 990 or 990-EZ?
		s," describe these new services on Schedule O.
3		he organization cease conducting, or make significant changes in how it conducts, any program
		res?
		s," describe these changes on Schedule O.
4		ribe the organization's program service accomplishments for each of its three largest program services, as measured by uses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
		rtal expenses, and revenue, if any, for each program service reported.
4a	(Code	e:) (Expenses \$ 1,278,606 including grants of \$ 52,274) (Revenue \$ 2,040,947)
		n 2015 was held April 8 - April 16 in Montreal, QC, Canada at the Montreal Convention Center. Two days of Python tutorials
		Python Language Summit preceded the three day core conference, and four days of programming sprints followed. This
		rence draws Python developers world-wide, providing them opportunities to learn about significant advances in the Python
		nunity and to meet and network with fellow developers. Education sessions are presented on multiple tracks to address
	topic	s of interest at all levels, from object-oriented programming to sophisticated web development and scientific computation.
4b	(Code	e:) (Expenses \$ 104,273 including grants of \$ 104,273) (Revenue \$ 0)
UF	`	sored Python conferences world-wide. Provided grants to assist with the funding of local Python conferences, including the
		ving major conferences: PyCon Philippines, PyCon Australia, PythonBrasil, EuroPython, PyData London, DjangoCon Europe,
		r, PyCon UK, PyOhio, PyCon Italia, PyCon ES, and Linux Conference New Zealand. The Foundation also sponsored many
	small	Python programming workshops worldwide. Sponsorship is granted based on the number of conference or workshop
	atten	dees.
4c	(Code	
		oundation provides fiscal sponsorship for local Python user groups in the United States. Sponsored groups in 2015: Boston on, IndyPy, PhillyPUG, PyArkansas, PyCarolinas, PyLadies, PyMNtos, PyTennessee, PyTexas, and Python San Diego.
		on, indyPy, PhiliyPUG, PyArkansas, PyCarolinas, PyLadies, PyMixtos, PyTennessee, PyTexas, and Python San Diego. e groups hold regular education and networking meetings and/or present small regional Python conferences. The Foundation
		ed a reimbursement of meetup.com expense for many local Python user groups.
	-9	
4d	Other	program services (Describe in Schedule O.) See Schedule O, Statement 2
		nses \$ 116,548 including grants of \$ 116,548) (Revenue \$ 0)
4e	Total	program service expenses ► 1,591,526

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

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

Form 990 (20	15)
Part V	Statements Regarding Other IRS Filings and Tax Compliance
	Obselvit Cabadula O acataina a vacanana avanta ta anulina in thia Dart V

The Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a 36 b Enter the number of Forms W-2G included in line 1s. Enter -0- if not applicable 1 b Enter the number of Forms W-2G included in line 1s. Enter -0- if not applicable 2 b Do Did the organization comply with backup, withholding rules for reportable payments to vendors and perpetable gaming (gambling) with pass withholding rules for reportable payments to vendors and perpetable gaming (gambling) with pass withholding rules for reportable payments to vendors and state of the calendar year ending with or within the year covered by this ratum? 2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this ratum? 3 b If at least one is reported on line 2a, did the organization flar repuised federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 b If at least one is reported on line 2a, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. 4 a Army time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. 5 b If Yes, "enter the name of the foreign country. 5 b If Yes," enter the name of the foreign country. 5 b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 c If Yes, "to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5 c If Yes," include the payment of the payment		Check if Schedule O contains a response or note to any line in this Part V			
b Enter the number of Forms W-2G included in line 1st. Enter C- If not applicable. □ Did the organization comply with backup withholding nules for reportable payments to vendors and reportable garning (garnbling) winnings to prize winners? □ Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return □ Statements, filed for the calendar year, did the organization file all required federal employment tax returns? □ Note. If the sum of lines 1s and 2s is greater than 250, you may be required federal employment tax returns? □ Note in the sum of lines 1s and 2s is greater than 250, you may be required federal employment tax returns? □ Note in the sum of lines 1s and 2s is greater than 250, you may be required federal employment tax returns? □ Note in the sum of lines 1s and 2s is greater than 250, you may be required federal employment tax returns? □ If *Yes,* is filled a Form 990-IT for this year? If *N'n'o You file 5s, provide an explanation in Schedule 0. □ If *Yes,* anter the name of the foreign country: ▶ Sale instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). □ If *Yes,* anter the name of the foreign country: ▶ Sale instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). □ If *Yes,* anter the name of the foreign country: ▶ Sale instructions of filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). □ If *Yes,* anter the name of the foreign country: ▶ Sale instructions of filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). □ If *Yes,* anter the name of the foreign country: ▶ Sale instructions of filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). □ If *Yes,* in the function of part of the filing filing filing filing filing filing filing fili				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 36			
The protrable gaming (gambling) winnings to prize winners? 2 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 3 I at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2a is greated than 250, you may be required to e-file (see instructions) 3 I bid the organization have unrelated business gross income of \$1,000 or more during the year? 4 If 1'Yes, has filled a Form 990-IT for this year? If 1'W-7' to file 95, provide an explanation in Schedule 0. 4 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country: ▶ 5 See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FEAR). 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization file Form 8868-77 5 Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions? 5 Organizations that may receive deductible contributions and party for goods and services provided to the payor? 7 Organizations that may receive deductible contributions and party for which it was required to file Form 8282? 8 Organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 9 If 1'Yes," did the organization neally exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 10 I the organization received a contribution of qualified intellectual property,	b				
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year enditing with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Ab Under. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 5b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O. 4b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country; level as a bank account, securities account, or other financial accounts (PaRA). 5c At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accounts (PaRA). 5c Bussing the provided of the organization that organization are provided an explanation in Schedule O. 5c If "Yes," enter the name of the foreign country: level and the provided and the organization and party to a prohibited tax sheller transaction at any time during the tax year? 5d Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5d Did any taxable party notify the organization that was or is a party to a prohibited tax sheller transaction? 6d Does the organization solicit any contributions that were not tax deductible as charitable contributions or diffusion solicit any contributions that were not tax deductible as charitable contributions or diffusion solicit any contribution shed were not tax deductible? 6d Organization shed that precive deductible contributions under section 170(c). 6d If "Yes," indicate the number of the payor? 6d Organizations that may receive deductible on the payor of the property of the organization and party for your discount	С				
Statements, filed for the calendar year ending with or within the year covered by this return 2 3 3 b b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions). 3a b lot the organization have unrelated business gross income of \$1,000 or more during the year? 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country; such as a bank account, securities account, or other financial accounts (FBAR). 5b If "Yes," enter the name of the foreign country: 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b If "Yes," did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions file Fibra 886-17. 6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions file Fibra 886-17. 6c Does the organization share account ground the very solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions and partly for goods and services provided to the payor? 7c Organizations that may receive deductible contributions under section 170(c). 8d If "Yes," did the organization notify the donor of the value of the goods or services provided? 7c V 7d If "Yes," did the organization may premium, directly or indirectly, to pay premiums on a personal benefit contract? 9d If "Yes," indicat			1c	•	
b If at least one is reported on line 2a, did the organization file all required federal employment tax ratures? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 0. 4a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5b If "Yes," enter the name of the foreign country: Image:	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
Note. If the sum of lines 1a and 2a is greater than 250, your may be required to e-rife (see instructions) 3a		Statements, filed for the calendar year ending with or within the year covered by this return 2a 3			
3a V 1f **Yes," has it filled a Form 980-T for this year? ** 1f **Not ** 1f **Not **N	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
3a V 1f **Yes," has it filled a Form 980-T for this year? ** 1f **Not ** 1f **Not **N		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account). b If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR). b If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). b If any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? b If "Yes," of line 5a of 5b, did the organization life Form 8886-17. c If "Yes" oil ine 5a of 5b, did the organization life Form 8886-17. c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? c Tyres," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 Did the organization receive any funds, directly or indirectly, or largible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did he organization file Form 8298.2 If the organization feeding a contribution of qualified intellectual property, did he organization file Form 8298.2 Sponsoring organization have excess business holdings at any time during the year? 3 Sponsoring organization have ex	3a		3a		~
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	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	655	

Form 990 (2015) Page **6**

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Nο 1a Enter the number of voting members of the governing body at the end of the tax year . . . 11 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent . 0 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 5 6 6 ~ Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a ~ 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Nο 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 14 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a ~ b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ 17 None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website ✓ Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: > Kurt B Kaiser, (603)569-0493

Part VI

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

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

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

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 no	or any relate	d org	aniz	atic	n c	ompe	ensa	ated any currer	t officer, director	r, or trustee.
				((C)					
(A)	(B)	(-1	4		ition	. 41		(D)	(E)	(F)
Name and Title	Average		check more than one less person is both an				Reportable	Reportable	Estimated	
	hours per week (list any	office				or/trus	tee)	compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Inst	Officer Institut		emp	Former	the	organizations	compensation
	related organizations	vidu	Institutional trustee	cer	Key employee	nest	ner	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	al tr	onal		ploy	com		(** 27 1000 141100)		and related
	line)	uste	trus		ee	pen				organizations
		Ф	tee			Highest compensated employee				
-										
Naomi Ceder	2									
Director	0	~						0	0	0
Diana Clarke	2									
Director	0	~						0	0	0
Nick Coughlan	2									
Director	0	~						0	0	0
Alex Gaynor	2									
Director	0	~						0	0	0
Marc-Andre Lemburg	2									
Director	0	~						0	0	0
Van Lindberg	4									
Director, Chairman	0	~		~				0	0	0
Ashwini Oruganti	2									
Director	0	~						0	0	0
Anna Ossowski	2									
Director	0	~						0	0	0
Carrie Anne Philbin	2									
Director	0	~						0	0	0
Lynn Root	2									
Director	0	~						0	0	0
Carol Willing	2									
Director	0	~						0	0	0
Guido van Rossum	1									
President	0			~				0	0	0
Ewa Jodlowska	40									
Corporate Secretary and Event Coordinator	0			~	~			89,827	0	0
Kurt B Kaiser	25									
Treasurer	0			~				56,731	0	0

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees			lighe	st C	ompensated E	mployees (continue	ed)		
	(A) Name and title	(B) Average hours per	box,	unles	Pos neck ss pe	rson	e than of is both or/trus	n an	(D) Reportable compensation from	(E) Reportab compensatior related		Esti amo	(F) imated ount of	
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatic (W-2/1099-N		comp fro orga and	ensatio m the nizatior related nizations	1
1b c	Sub-total							>	146,558		0			0
d	Total (add lines 1b and 1c)		to th				above	e) w	ho received me	ore than \$1	00,000	of		0
3	Did the organization list any former or			or tr	ueta	20	kov (mr	Novee or high	est compe	neated		Yes	No
3	employee on line 1a? If "Yes," complete	Schedule J	for s	uch	indi	ividu	ıal					3		~
4	For any individual listed on line 1a, is the organization and related organizations													
5	individual									ation or inc	 dividual			V
Section	for services rendered to the organization on B. Independent Contractors	? If "Yes," c	compi	ete	Scr	neau	ile J 1	or s	sucn person	· · · ·	• •	5		'
1	Complete this table for your five highest compensation from the organization. Repear.													ax
	(A) Name and business add	dress							(B) Description of s	ervices	((C) Compens	ation	
None														
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who				

0

Part VIII Statement of Revenue

		Check if Schedule O contain	s a res	ponse or note to	any line in this	Part VIII		🗌
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns	1a	0				
ìrar oun	b	Membership dues	1b	184,000				
s, G Am	С	Fundraising events	1c	0				
iift ar /	d	Related organizations	1d	0				
s, C mil	е	Government grants (contributions		0				
ion r Si	f	All other contributions, gifts, grant	3,					
but the		and similar amounts not included above	e 1 f	124,105				
ntri d O	g	Noncash contributions included in lines	1a-1f: \$	0				
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f		•	308,105			
ıue				Business Code				
Program Service Revenue	2a	PyCon Conference		813920	2,040,947	2,040,947	0	0
) Re	b	Sponsor Python Conferences		813920	0	0	0	0
Vi Cé	С	Support Python User Groups		813920	0	0	0	0
Ser	d	Python Software Development		813920	35,000	35,000	0	0
am	е	Python Education/Workshops		813920	0	0	0	0
ogr	f	All other program service reve			0	0	0	0
<u>-</u>	<u>g</u>	Total. Add lines 2a-2f			2,075,947			
	3	Investment income (includin	_					
	_	and other similar amounts)			263	0	0	263
	4	Income from investment of tax-e		•	0	0	0	0
	5	Royalties		(ii) Personal	574	574	0	0
	•		eai ————	(II) Personal				
	6a	Gross rents						
	b	Less: rental expenses						
	C	Rental income or (loss)	0					
	d 70	Net rental income or (loss) Gross amount from sales of (i) Sec	ritios	(ii) Other				
	7a	assets other than inventory	111100	(ii) Otrici				
	b	Less: cost or other basis and sales expenses .						
	_							
	C	Gain or (loss)	0	0				
ne	d	Net gain or (loss)						
venu	ва	Gross income from fundraisin events (not including \$	0					
Other Revenu		of contributions reported on line See Part IV, line 18	· a	0				
ğ		Less: direct expenses						
		Net income or (loss) from fund		events . >	0		0	0
	9a	Gross income from gaming ac See Part IV, line 19						
	b	Less: direct expenses	. b					
		Net income or (loss) from gan		ivities ►				
	10a	Gross sales of inventory, returns and allowances .						
	b	Less: cost of goods sold .	. b					
		Net income or (loss) from sale		entory ►				
		Miscellaneous Revenue		Business Code				
	11a							
	b							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d .			0			
	12	Total revenue. See instructio	าร	▶	2,384,889	2,076,521	0	263

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, 7b, (A) Total expenses (B) Program service **(D)** Fundraising Management and general expenses 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV. line 21 . . . 48,705 48,705 2 Grants and other assistance to domestic individuals. See Part IV, line 22 0 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . 224,390 224,390 Benefits paid to or for members 0 5 Compensation of current officers, directors, trustees, and key employees 146,558 73,279 73,279 0 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 0 0 0 0 7 Other salaries and wages 98,419 10,919 109,338 0 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 0 0 0 0 Other employee benefits 9 7.664 3.832 3.832 0 10 Payroll taxes 13,353 6,676 6,677 0 11 Fees for services (non-employees): Management 0 0 0 0 Legal O 0 11,667 11,667 32,909 29,500 3,409 0 Lobbying 0 0 0 0 Professional fundraising services. See Part IV, line 17 0 0 Investment management fees f 0 0 0 0 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 0 0 0 0 12 Advertising and promotion 0 0 0 0 13 Office expenses 0 9,774 9,774 0 14 Information technology 241,547 235,938 5,609 0 15 0 0 0 0 16 0 0 0 0 17 3,228 1,439 1,789 0 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 0 0 0 19 Conferences, conventions, and meetings . 894,049 800,915 93,134 0 20 0 0 0 0 21 Payments to affiliates 0 0 0 0 22 Depreciation, depletion, and amortization . 32,100 0 32,100 0 23 11,406 8,600 2,806 0 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.) Bank Service Charges 51,225 5,950 а 57,175 0 Bad Debt Expense 13,500 13,500 0 0 Community Awards C 8,000 8,000 0 0 d All other expenses е 608 608 0 0 **Total functional expenses.** Add lines 1 through 24e 25 1.865.971 1,591,526 274,445 0 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 \blacktriangleright \square if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	rt X		. 🗆
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1,347,658	1	864,422
	2	Savings and temporary cash investments	261,616	2	961,879
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	283,419	4	157,240
	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
ts	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
Assets	7	Notes and loans receivable, net	0	7	0
As	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	78,210	9	84,281
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 93,952			
	b	Less: accumulated depreciation 10b 79,336	46,716		14,616
	11	Investments—publicly traded securities	0	11	0
	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	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,017,619		2,082,438
	17	Accounts payable and accrued expenses	44,913		51,180
	18	Grants payable	0	18	0
	19	Deferred revenue	865,645	19 20	405,280
	20 21	Tax-exempt bond liabilities	0	21	0
"		Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors,	0	21	0
Liabilities	22	trustees, key employees, highest compensated employees, and			
iab		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		25	
	26	Total liabilities. Add lines 17 through 25	910,558	26	456,460
ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets		27	
Bal	28	Temporarily restricted net assets		28	
pu	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.			
ts (30	Capital stock or trust principal, or current funds	0	30	0
sse	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
Ϋ́	32	Retained earnings, endowment, accumulated income, or other funds .	1,107,061	32	1,625,978
Ne	33	Total net assets or fund balances	1,107,061	33	1,625,978
	34	Total liabilities and net assets/fund balances	2,017,619	34	2,082,438

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Part	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				~
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,38	4,889
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,86	5,971
3	Revenue less expenses. Subtract line 2 from line 1	3		51	8,918
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,10	7,061
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			-1
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		1,62	5,978
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				<u></u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		. I		
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	pıaın	in		
•					
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 com reviewed on a separate basis, consolidated basis, or both:	Siled	Of		
	·				
L	Separate basis Consolidated basis Both consolidated and separate basis		. 2b		~
D	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 audit	 .d on			
	separate basis, consolidated basis, or both:	a on	a		
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	/ersia	ht		
C	of the audit, review, or compilation of its financial statements and selection of an independent account				
	If the organization changed either its oversight process or selection process during the tax year, ex				
	Schedule O.	Piairi			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in		
ou	the Single Audit Act and OMB Circular A-133?		3a		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	rgo th		+-	<u> </u>
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
				QQA	(0045)

Form **990** (2015)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

| 2015

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Name	of the organization					Employer identification	n number	
	on Software Foundation						94598	
Par					.		ons.	
1	organization is not a private foundary A church, convention of church	ches, or associati	on of churches descr	ibed in se	ection 17	0(b)(1)(A)(i).		
2 3								
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 7	 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). ✓ 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 receipts from activities relate support from gross investme acquired by the organization a	d to its exempt ent income and	functions—subject to unrelated business	certain taxable i	exception	ns, and (2) no more ess section 511 ta	than 331/3% of its	
10 11	 ☐ An organization organized and ☐ An organization organized and one or more publicly supporte the box in lines 11a through 11 	operated exclusi d organizations d	ively for the benefit of, lescribed in section 5	to perfor 09(a)(1) o	m the fun r section	ctions of, or to carry 509(a)(2). See sect	i on 509(a)(3). Check	
а	☐ Type I . A supporting organization(sorganization. You must con	zation operated, so) the power to re	supervised, or control egularly appoint or ele	lled by its	supporte	ed organization(s), ty	pically by giving	
b	☐ Type II. A supporting organic control or management of the organization(s). You must c	ne supporting org	ganization vested in th			• •	, , , ,	
С	□ Type III functionally integrated its supported organization(s)						y integrated with,	
d	☐ Type III non-functionally in that is not functionally integring requirement (see instruction	rated. The organi	zation generally must	satisfy a	distributi	on requirement and		
е	Check this box if the organize functionally integrated, or Ty					• • • • • •	I, Type III	
f g	Enter the number of supported Provide the following information	•						
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
				Yes	No			
(A)								
(B)								
(C)								
(D)								
(E)								
Total								

18

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 Calendar year (or fiscal year beginning in) ▶ (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 **(e)** 2015 (f) Total contributions, 1 grants, membership fees received. (Do not include any "unusual grants.") . . . 157,615 159,056 235,650 258,605 343,105 1,154,031 2 revenues levied organization's benefit and either paid to or expended on its behalf . . . 0 0 0 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge 0 0 Total. Add lines 1 through 3. . . . 4 157,615 159,056 235,650 258,605 343,105 1,154,031 5 The portion of total contributions by each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 33,394 **Public support.** Subtract line 5 from line 4. 1,120,637 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total 7 Amounts from line 4 157,615 343,105 159,056 235,650 258,605 1,154,031 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 727 396 263 1,249 1,288 3,923 Net income from unrelated business 9 activities, whether or not the business is regularly carried on 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 2,310 2,335 574 1.562 413 7,194 **Total support.** Add lines 7 through 10 11 1,165,148 Gross receipts from related activities, etc. (see instructions) 12 7.899.264 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) 13 Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f) 14 96.18 % Public support percentage from 2014 Schedule A, Part II, line 14 15 331/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this ~ 331/3% support test-2014. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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.)

	if the organization fails to qualify	under the te	sts listed bei	ow, piease co	mpiete Part	11.)	
	on A. Public Support						
	dar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees						
^	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
•	organization's benefit and either paid						
	to or expended on its behalf						
-	·						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
_							
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year		<u></u>				
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6	(-,-		(1)	(2)	(2)	()
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
D	section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	· ·						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	J					. , , ,
	organization, check this box and stop he	re					▶ 🗆
Secti	on C. Computation of Public Suppor	t Percentag	е				_
15	Public support percentage for 2015 (line 8	3, column (f) di	ivided by line 1	3, column (f))		15	%
16	Public support percentage from 2014 Sch					16	%
Secti	on D. Computation of Investment In-	come Perce	ntage				
17	Investment income percentage for 2015 (line 10c, colun	nn (f) divided b	y line 13, colur	mn (f))	17	%
18	Investment income percentage from 2014	Schedule A,	Part III, line 17			18	%
19a	331/3% support tests-2015. If the organ						%, and line
	17 is not more than 331/3%, check this box						
b	331/3% support tests—2014. If the organiz	_	-	-		_	_
~	line 18 is not more than 33 ¹ / ₃ %, check this l						
20	Private foundation. If the organization di		-	-			_

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

,,,,	on 7 a 7 an Cupper and Cigarine according			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).			
		5a		
D	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	100		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	10a		
~	determine whether the expensional policy had expensed by increase had in the tax year: (050 00 neutring 0, 1 0 m 4/20, 10	406		

Part	V Supporting Organizations (continued)					
			Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)					
	below, the governing body of a supported organization?	11a		<u> </u>		
	A family member of a person described in (a) above?	11b		<u> </u>		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c				
Section	on B. Type I Supporting Organizations					
_			Yes	No		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the					
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or					
	controlled the organization's activities. If the organization had more than one supported organization,					
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported					
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.					
2	Did the organization operate for the benefit of any supported organization other than the supported	1				
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part					
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,					
	supervised, or controlled the supporting organization.	2				
Section	on C. Type II Supporting Organizations					
	<i>y</i> 11 0 0		Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors					
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control					
	or management of the supporting organization was vested in the same persons that controlled or managed					
	the supported organization(s).	1				
Section	on D. All Type III Supporting Organizations					
			Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the					
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax					
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?					
_		1				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported					
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).					
3	By reason of the relationship described in (2), did the organization's supported organizations have a	2				
3	significant voice in the organization's investment policies and in directing the use of the organization's					
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's					
	supported organizations played in this regard.	3				
Section	on E. Type III Functionally-Integrated Supporting Organizations					
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	netru	ction	e).		
		iisti u	CHOIR	3).		
a	☐ The organization satisfied the Activities Test. <i>Complete line 2 below.</i> ☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>					
b c	The organization is the parent of each of its supported organizations. <i>Complete line's below.</i> The organization supported a governmental entity. <i>Describe in Part VI how you supported a government entity (see the organization is the parent of each of its supported organizations.</i>	oo ins	tructi	one)		
U		1118				
2	Activities Test. Answer (a) and (b) below.		Yes	No		
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of					
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify					
	those supported organizations and explain how these activities directly furthered their exempt purposes,					
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.					
L	·	2a				
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the					
	reasons for the organization's position that its supported organization(s) would have engaged in these					
	activities but for the organization's involvement.	2b				
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>	20				
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or					
a	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a				
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ju				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b				

instructions).

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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Secti	on D - Distributions			Current Year				
1	Amounts paid to supported organizations to accomplish e	exempt purposes						
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted					
	organizations, in excess of income from activity							
3_	Administrative expenses paid to accomplish exempt purp							
	Amounts paid to acquire exempt-use assets							
5	Qualified set-aside amounts (prior IRS approval required)							
<u>6</u>	Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6.							
		h tha avancination is was						
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	n the organization is res	porisive					
9	Distributable amount for 2015 from Section C, line 6							
10	Line 8 amount divided by Line 9 amount							
	and a different different specific and a specific a	<i>(</i> 2)	(ii)	(iii)				
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2015	Distributable Amount for 2015				
1	Distributable amount for 2015 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2015							
	(reasonable cause required-see instructions)							
	Excess distributions carryover, if any, to 2015:							
a								
<u>b</u>								
d	From 2013							
e	From 2013							
f	Total of lines 3a through e							
g	Applied to underdistributions of prior years							
— b	Applied to 2015 distributable amount							
i	Carryover from 2010 not applied (see instructions)							
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.							
4	Distributions for 2015 from Section							
	D, line 7: \$							
a	Applied to underdistributions of prior years							
b	Applied to 2015 distributable amount							
C	Remainder. Subtract lines 4a and 4b from 4.							
5	Remaining underdistributions for years prior to 2015, if							
	any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).							
6	Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see							
	instructions).							
7	Excess distributions carryover to 2016. Add lines 3j							
•	and 4c.							
8	Breakdown of line 7:							
a								
b								
С	Excess from 2013							
d	Excess from 2014							
е	Excess from 2015							

Part VI

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Pythor	Software Foundation			04-3594598
Par				ccounts.
	Complete if the organization answered			
		(a) Donor advised funds	(1	b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year) .			
4	Aggregate value at end of year		1	
5	Did the organization inform all donors and donor			
_	funds are the organization's property, subject to the	=		
6	Did the organization inform all grantees, donors, a			
	only for charitable purposes and not for the bene conferring impermissible private benefit?			
Dar	Conservation Easements.			· · · · U Yes U No
rait	Complete if the organization answered	"Ves" on Form 990 Part IV line 7		
1	Purpose(s) of conservation easements held by the			
•	Preservation of land for public use (e.g., recrea		f a histori	cally important land area
	Protection of natural habitat			ed historic structure
	Preservation of open space	_ Treservation o	i a oci tilic	d motorio di dotare
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution	on in the f	form of a conservation
	easement on the last day of the tax year.	•		Held at the End of the Tax Year
а	Total number of conservation easements		2	ea l
b	Total acreage restricted by conservation easement	ts	2	2b
С	Number of conservation easements on a certified I			2c
d	Number of conservation easements included in	(c) acquired after 8/17/06, and not	on a	
	historic structure listed in the National Register .		2	2d
3	Number of conservation easements modified, trans	sferred, released, extinguished, or terr	ninated b	y the organization during the
	tax year ►			
4	Number of states where property subject to conse			
5	Does the organization have a written policy re			=
	violations, and enforcement of the conservation ea			
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservati	on easements during the year
_	>			
7	Amount of expenses incurred in monitoring, inspectir ►\$	ng, handling of violations, and enforcing	conservat	tion easements during the year
8	Does each conservation easement reported on line	2(d) above estisfy the requirements of	continu	170/b)/4\/D\/i\
0	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports			· · · · L Yes L No
9	balance sheet, and include, if applicable, the text of		-	
	organization's accounting for conservation easeme	•	iai ioiai ote	atomonto that docomboo the
Part			Other S	Similar Assets.
	Complete if the organization answered	•		
1a	If the organization elected, as permitted under SF			statement and balance sheet
	works of art, historical treasures, or other similar			
	public service, provide, in Part XIII, the text of the f	ootnote to its financial statements tha	t describe	es these items.
b	If the organization elected, as permitted under S	FAS 116 (ASC 958), to report in its	revenue	statement and balance sheet
	works of art, historical treasures, or other similar	•	ducation,	or research in furtherance of
	public service, provide the following amounts relat			
	(i) Revenue included on Form 990, Part VIII, line 1(ii) Assets included in Form 990, Part X			. • \$
	(ii) Assets included in Form 990, Part X			. • \$
2	If the organization received or held works of art	, historical treasures, or other similar	assets f	or financial gain, provide the
	following amounts required to be reported under S			
а	Revenue included on Form 990, Part VIII, line 1 . Assets included in Form 990, Part X			. • \$
b	Assets included in Form 990, Part X			. ▶ \$

Schedu	le D (Form 990) 2015				Page 2
Par	Organizations Maintaining Co	llections of Art, His	torical Treasures	s, or Other Similar <i>I</i>	Assets (continued)
3	Using the organization's acquisition, according to the collection items (check all that apply):	ession, and other reco	rds, check any of th	ne following that are a	a significant use of its
а	☐ Public exhibition	d	☐ Loan or exchange	ge programs	
b	Scholarly research				
c	☐ Preservation for future generations	· ·			
4	Provide a description of the organization'	e collections and eval	ain how they further	the organization's ev	empt nurnose in Par
7	XIII.	s collections and expi	ani now they further	the organization's ex	empt purpose in r ar
5	During the year, did the organization soli assets to be sold to raise funds rather that				
Part	IV Escrow and Custodial Arrange	ements.			
	Complete if the organization and 990, Part X, line 21.			·	
1a	Is the organization an agent, trustee, cu				
	included on Form 990, Part X?				. ☐ Yes ☐ No
b	If "Yes," explain the arrangement in Part X	(III and complete the fo	ollowing table:		
-	ii roo, oxpiaii iio arrangementiii atti	an and complete the n	onowing table.		Amount
_	Deginning belongs			10	, anount
c	Beginning balance			1c	
d	Additions during the year			1d	
е	Distributions during the year			1e	
f	Ending balance			1f	
2a	Did the organization include an amount or	n Form 990, Part X, line	e 21, for escrow or c	ustodial account liabil	ity? 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Part >	(III. Check here if the e	xplanation has been	provided on Part XIII	\square
Par	t V Endowment Funds.				
	Complete if the organization ans	swered "Yes" on Fo	m 990, Part IV, lin	e 10.	
			ior year (c) Two yea		ack (e) Four years back
10	Beginning of year balance	, , , , , ,	(4, 1, 1)	(,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,
-					
b	Contributions				
С	Net investment earnings, gains, and				
	losses				
d	Grants or scholarships				
е	Other expenditures for facilities and				
	programs				
f	Administrative expenses				
g	End of year balance				
9	Provide the estimated percentage of the control of	versent veer and belen	o (line 1g. column (g	a)) hold go:	
2		=	ce (line 1g, column (a	a)) neid as:	
a	Board designated or quasi-endowment				
b		%			
С	Temporarily restricted endowment ▶	<u>~~~~</u> %			
	The percentages on lines 2a, 2b, and 2c s	should equal 100%.			
3a	Are there endowment funds not in the po	ssession of the organ	ization that are held	and administered for	the
	organization by:				Yes No
	(i) unrelated organizations				. 3a(i)
	(ii) related organizations				
	• •				. 3a(ii)
b	If "Yes" on line 3a(ii), are the related organ			'	. 3b
4	Describe in Part XIII the intended uses of		owment funds.		
Part	, , ,				
	Complete if the organization and	swered "Yes" on Fo	m 990, Part IV, lin	e 11a. See Form 99	0, Part X, line 10.
	Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book value
	,	(investment)	(other)	depreciation	
12	Land	0	0		0
	Buildings	0			
b	Leasehold improvements	0			0
C	reasenoid iniofovements	1 11	n n	1 (1)	ı (1

93,952

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .

0

14,616

14,616

0

79,336

. ▶

0

0

	Complete if the organization answered "Yes" on For (a) Description of security or category	(b) Book value		thod of valuation:
	(a) Description of security or category (including name of security)	(D) BOOK value		thod of valuation: d-of-year market value
1) Financial	derivatives			
2) Closely-ł	neld equity interests			
Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII	Investments—Program Related.			
art viii	Complete if the organization answered "Yes" on For	m 990 Part IV lin	e 11c. See Forn	n 990 Part X line 1:
	(a) Description of investment	(b) Book value	1	ethod of valuation:
	(a) Description of investment	(b) Book value		d-of-year market value
1)				
2)				
3)				
4)				
5)				
6)				
7)				
8)				
•				
9)				
(9) otal. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
(9)	Other Assets.			
9) otal. (Column (Other Assets. Complete if the organization answered "Yes" on For	n 990, Part IV, lin	e 11d. See Forn	
9) otal. (Column (Other Assets.	n 990, Part IV, lin	e 11d. See Form	n 990, Part X, line 15
9) otal. (Column (Part IX	Other Assets. Complete if the organization answered "Yes" on For	n 990, Part IV, lin	e 11d. See Forn	
9) otal. (Column (Part IX	Other Assets. Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11d. See Forn	
(9) otal. (Column (Other Assets. Complete if the organization answered "Yes" on For	n 990, Part IV, lin	e 11d. See Forn	
(9) Otal. (Column (Part IX (1) (2)	Other Assets. Complete if the organization answered "Yes" on For	n 990, Part IV, lin	e 11d. See Forn	
9) otal. (Column (Part IX 1) 2) 3)	Other Assets. Complete if the organization answered "Yes" on For	n 990, Part IV, lin	e 11d. See Forn	
9) htal. (Column (Part IX 1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered "Yes" on For	n 990, Part IV, lin	e 11d. See Forn	
9) htal. (Column (Part IX 1) 2) 3) 44) 55)	Other Assets. Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11d. See Forn	
9) tal. (Column (Part IX 1) 2) 33 44) 55) 66)	Other Assets. Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11d. See Forn	
9) tal. (Column (Part IX 1) 2) 3) 4) 5) 6) 7)	Other Assets. Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11d. See Forn	
9) otal. (Column (Part IX 1) 2) 3) 4) 5) 6) 7) 8)	Other Assets. Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11d. See Form	
9) otal. (Column (Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered "Yes" on Formula (a) Description			
9) otal. (Column (Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Colu	Other Assets. Complete if the organization answered "Yes" on Form (a) Description (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.			(b) Book value
9) otal. (Column (Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Colu	Other Assets. Complete if the organization answered "Yes" on Form (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.)			(b) Book value
9) otal. (Column (Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Colu Part X	Other Assets. Complete if the organization answered "Yes" on Form (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form			(b) Book value
9) tal. (Column (Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Colu	Other Assets. Complete if the organization answered "Yes" on Form (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value			(b) Book value
9) tal. (Column (Part IX 1) 2) 3) 4) 5) 6) 77) 8) 9) otal. (Colu Part X 1) Federal ir	Other Assets. Complete if the organization answered "Yes" on Form (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25.			(b) Book value
p) tal. (Column (Part IX 1) 2) 3) 4) 5) 6) 77 B) part X 1) Federal in 2)	Other Assets. Complete if the organization answered "Yes" on Form (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value			(b) Book value
9) tal. (Column (Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Colu Part X 1) Federal in 2) 3)	Other Assets. Complete if the organization answered "Yes" on Form (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value			(b) Book value
9) otal. (Column (Part IX 1) 2) 3) 4) 5) 6) 77 8) 9) otal. (Colu Part X 1) Federal in 2) 3) 4)	Other Assets. Complete if the organization answered "Yes" on Form (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value			(b) Book value
9) otal. (Column (Part IX 1) 2) 3) 4) 5) 6) 77) 8) 9) otal. (Colu Part X 1) Federal in 2) 3) 4) 5)	Other Assets. Complete if the organization answered "Yes" on Form (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value			(b) Book value
9) tal. (Column (Part IX 1) 2) 3) 4) 5) 6) Part X 1) Federal in 2) 3) 4) 55) 6)	Other Assets. Complete if the organization answered "Yes" on Form (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value			(b) Book value
9) tal. (Column (Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Colu Part X 1) Federal in 2) 3) 4) 5) 6) 77 77 88 77 89 99 77 89 78 78	Other Assets. Complete if the organization answered "Yes" on Form (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value			(b) Book value
9) otal. (Column (Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Colu Part X 1) Federal in 2) 3) 4) 5) 6) 77 88	Other Assets. Complete if the organization answered "Yes" on Form (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value			(b) Book value
9) otal. (Column (Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Colu Part X 1) Federal in 2) 3) 4) 5) 6) 77 88 99	Other Assets. Complete if the organization answered "Yes" on Form (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value			(b) Book value

Schedule D (Form 990) 2015 Page **4**

Part			Return.
	Complete if the organization answered "Yes" on Form 990, F		T
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	-	
a	Net unrealized gains (losses) on investments	2a	_
b	Donated services and use of facilities	2b	_
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part	Reconciliation of Expenses per Audited Financial Statem		er Return.
	Complete if the organization answered "Yes" on Form 990, F		
1	· ·		1
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.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4-	
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)		-
b	Add lines 4a and 4b		4c
с 5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line		5
-	XIII Supplemental Information.	, , , , , , , , , , , , , , , , , , , 	<u> </u>
2; Par	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additional ir	nformation.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

Pyth	on Software Foundation						-3594598	
Par	General Information Form 990, Part IV, line		es Outside	the United States. Com	olete if the organiz	zation ansv	vered "Ye	s" on
1	For grantmakers. Does the assistance, the grantees' eli							
	grants or assistance?						✓ Yes	□No
2	For grantmakers. Describe assistance outside the Unite		the organizati	on's procedures for moni	toring the use of	f its grants	s and oth	ier
3	Activities per Region. (The fo	llowing Part	l, line 3 table o	can be duplicated if addition	nal space is neede	ed.)		
	(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 a program ser describe specific service(s) in re	vice, type of	(f) To expenditu and invest in regi	res for tments
(1)	Central America and the Caribb	0	0	Grantmaking				4,200
(2)	East Asia and the Pacific	0	0	Grantmaking				28,289
(3)	Europe (including Iceland and C	0	0	Grantmaking				76,249
(4)	North America (including Canad	0	0	Grantmaking				5,000
(5)	North America (including Canad	0	0	Program Services	Conducted the an	nual PyCo	1,	267,391
(6)	Russia and the newly independ	0	0	Grantmaking				1,500
(7)	South America	0	0	Grantmaking				19,600
(8)	South Asia	0	0	Grantmaking				3,820
(9)	Sub-Saharan Africa	0	0	Grantmaking				33,458
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
3a								
b	sheets to Part I							
c	Totals (add lines 3a and 3b)	0	0				1,	439,507

Par								nization answered "Ye	es" on Form 990,
		line 15, for a	ny recipient who re	eceived more than \$	5,000. Part II ca	n be duplicated if a	dditional 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)			Sub-Saharan Africa	Grant to provide Pytho	17,780	Wire	0		
(2)			Europe (including lo	Sponsor EuroPython 2	10,324	wire	0		
(3)			Europe (including lo	Sponsor PyCon UK an	8,500	wires	0		
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
2			•	ed above that are reconas provided a section	•		•	ax-exempt ►	0
3	-		organizations or enti	·				•	3

Schedule F (Form 990) 2015

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Grant to support free training in	South America	1	9,000	wires	0		
(2) PyCon conference travel expen	North America (including	160	52,274	checks, PayPal, wire	0		
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2015 Page 4

Part IV **Foreign Forms** 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 ✓ No ☐ Yes Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990) . . . Yes ✓ No 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 ✓ No Yes 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 ☐ Yes ✓ No 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 Did the organization have any operations in or related to any boycotting countries during the tax year? If

Schedule F (Form 990) 2015

✓ No

Yes

Schedule F (Form 990) 2015 Page **5**

Part V Supplemental Information

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

Schedule F, Part I, Line 2 - Grants were made to partially sponsor international conferences and workshops related to the establishment
and promotion of the free and open source programming language Python and related applications and libraries. Grants were also made to
support Python education workshops worldwide. Travel to PyCon may be partially reimbursed for individuals who could not otherwise
attend. These reimbursements are determined by a PyCon volunteer committee based on financial need. These grants were fixed amounts
approved by a majority vote of the Python Software Foundation board members. These expenditures are accounted/reported by
aggregating the amounts of funds transferred by wire, PayPal, and bank checks. There were no non-cash expenditures.
aggregating the amounts of funds transferred by wife, rayrar, and bank checks. There were no non-cash experimitures.

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

thon Software Foundation							04-3594598
art I General Information of							
Does the organization maintain			-			_	
the selection criteria used to aw	•						· · V Yes No
Describe in Part IV the organiza	<u> </u>						
rt II Grants and Other Assi 990, Part IV, line 21, for							ered "Yes" on Form
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Sch I, Stmt 1							
Enter total number of section 50 Enter total number of other organization							. • 0

Schedule I (Form 990) (2015) Page 2 Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of (e) Method of valuation (book, (f) Description of non-cash assistance recipients cash grant non-cash assistance FMV, appraisal, other) 3 5 6 Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Schedule I, Part I, Line 2 - Grants are made to partially sponsor US regional conferences related to the establishment and promotion of the free and open source programming language Python. Grants are also made to support the development of key features for the Python language and associated FOSS applications/libraries. These grants were fixed dollar amounts approved by a majority vote of the Python Software Foundation board members. These funds are accounted/reported by aggregating the amounts of the funds transferred by wire, PayPal, and bank checks. There were no non-cash expenditures.

Schedule I, Part IV, Statement 1

Form: Schedule I

04-3594598

Python Software Foundation

Page: 1

Line Number: Part II

Description of Grants and Other Assistance to Governments and Organizations in the United States

		Recipient EIN	Amt. of cash grant	Amt. of non- cash asst.
Name and address	Read the Docs Inc	47-1657609	8,000	0
	1227 NW Davis St			
	Portland, OR 97209			
IRC code section				
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Support Read the Docs by funding User Support Development. Funds will			
	be use to compensate software engineers to fix a number of long-standing			
	bugs in the Read the Docs project.			

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization **Employer identification number**

Python Software Foundation	04-3594598
Form 990, Part VI, Section A, Line 6 - The organization has individual members and sponsor members	S.
X	
Form 990, Part VI, Section A, Line 7a - The organization has nominated, associate, and sponsor mem	hers. The nominated members are the
Python language software core developers and other volunteers who play a key role in the Python co	
for them. The associate members pay yearly dues. The sponsoring members are corporate members	
and sponsoring members can vote to elect nominated and sponsoring members, and also the board	of directors.
Form 990, Part VI, Section B, Line 11b - The Form 990 and associated schedules are prepared by the	
the Chairman for review. Copies of the return are sent to the Board and posted on the Foundation we	bsite.
Form 990, Part VI, Section C, Line 19 - The organization makes its records publicly available on its we	bsite at python.org/psf/records
Form 990, Part XI, Line 9 - To balance return	

Schedule O, Statement 1 Python Software Foundation
Form: 990 04-3594598

Page: 1 Line Number:

Reasonable Cause Explanations

Explanation

Return was timely filed in accordance with extensions granted by the IRS

Page: 1

Form: 990 Page: 2

Line Number: Part III Line 4d

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	Python development: The foundation sponsors programming efforts to advance the core Python language, its associated libraries, and significant allied projects central to the Python community.	12,100	12,100	0
	Other service expense: The foundation made a number of grants in 2015 to support education in Python technology. Many of these objectives involved education directed to women and teenage children. The Foundation made nearly one hundred small grants to support workshops and outreach efforts worldwide. All grants are voted on by the Board of Directors.	104,448	104,448	0
Total:		116,548	116,548	0