Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

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

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

2 **Open to Public** Inspection

A	For the	e 2023 calen	dar year, or tax year beginning 01/01/2023 and ending	12/31/2	023			
в	Check if	f applicable:	C Name of organization SEATTLE INTERNET EXCHANGE		D Empl	oyer identification number		
	Address	change	Doing business as			91-2148657		
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address) Roo	m/suite	E Telephone number			
	Initial re	turn	1700 7th Ave Ste 116 PMB 400		206-367-4320			
	Final retu	urn/terminated						
	Amende	ed return		G Gross	receipts \$ 330,303			
	Applicat	tion pending	F Name and address of principal officer: Nikos Mouat	H(a) Is this a gro	up return fo	or subordinates? 🗌 Yes 🗹 No		
			1700 7th Ave Ste 116 PMB 400, Seattle, WA 98101	H(b) Are all su	bordinat	es included? 🗌 Yes 🗌 No		
I	Tax-exe	mpt status:	501(c)(3) 🖌 501(c) ( 6 ) (insert no.) 4947(a)(1) or 527	If "No," attach	a list. S	ee instructions.		
J	Website	e: https://w	ww.seattleix.net/	H(c) Group ex	emption	number		
к	Form of	organization:	Corporation Trust Association 🖌 Other Nonprofit Corpo	in: <b>2001</b>	M State	of legal domicile: WA		
Ρ	art I	Summa	ry					
	1	Briefly des	cribe the organization's mission or most significant activities: Operation	n of the Seatt	e Inter	net Exchange.		
S								
Activities & Governance								
/eri	2	Check this	box 🗌 if the organization discontinued its operations or disposed of r	nore than 25	% of it	s net assets.		
Ő	3	Number of	voting members of the governing body (Part VI, line 1a)		3	5		
8	4	Number of	independent voting members of the governing body (Part VI, line 1b)		4	5		
ties	5	Total numb	per of individuals employed in calendar year 2023 (Part V, line 2a)		5	0		
tivi	6	Total numb	per of volunteers (estimate if necessary)		6	10		
Ac	7a	Total unrel	ated business revenue from Part VIII, column (C), line 12		7a	0		
	b	Net unrelat	ted business taxable income from Form 990-T, Part I, line 11		7b	0		
				Prior Year		Current Year		
Ð	8	Contributio	ons and grants (Part VIII, line 1h)		45,950	34,900		
nué	9	Program se	ervice revenue (Part VIII, line 2g)	3	36,676	273,151		
Revenue	10	Investment	t income (Part VIII, column (A), lines 3, 4, and 7d)		1,106	22,252		
Œ	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	0		
	12	Total reven	ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3	83,732	330,303		
	13	Grants and	similar amounts paid (Part IX, column (A), lines 1–3)		0	0		
	14	Benefits pa	aid to or for members (Part IX, column (A), line 4)		0	0		
ŝ	15	Salaries, ot	her compensation, employee benefits (Part IX, column (A), lines 5–10)		0	0		
Expenses	16a	Profession	al fundraising fees (Part IX, column (A), line 11e)		0	0		
x be	b	Total fundr	aising expenses (Part IX, column (D), line 25) 0					
ш	17	Other expe	enses (Part IX, column (A), lines 11a–11d, 11f–24e)	6	14,909	302,302		
	18	Total expe	nses. Add lines 13–17 (must equal Part IX, column (A), line 25)	6	14,909	302,302		
	19	Revenue le	ess expenses. Subtract line 18 from line 12	-2	31,177	28,001		
o ses				ginning of Curre	ent Year	End of Year		
sets	20	Total asset	s (Part X, line 16)	1,1	29,885	1,157,886		
t As: d Bé	21	Total liabili	ties (Part X, line 26)		0	0		
Net Assets or Fund Balances	22	Net assets	or fund balances. Subtract line 21 from line 20	1,1	29,885	1,157,886		
	art II	Signatu	re Block					

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

	/e-filed/	May 12th	May 12th, 2024					
Sign	Signature of officer		Date					
Here	Chris Caputo, Secretary/Treasu Type or print name and title							
Paid Proportor	Print/Type preparer's name	Date	Checl self-e	k if PTIN				
Preparer Use Only	Firm's name	·	Firm's EIN					
	Firm's address		Phone no.					
May the IRS	discuss this return with the pr	eparer shown above? See instruct	tions		🗌 Y	res 🗌 No		
	ula Disala stila a Alat Matina a sa dha		O-+ N- 11000V			000 (0000		

For Paperwork Reduction Act Notice, see the separate instructions.

Form 99	0 (2023		Page <b>2</b>
Part	Ш	Statement of Program Service Accomplishments	
	Dire	Check if Schedule O contains a response or note to any line in this Part III	<u>   </u>
1		v describe the organization's mission: tion of the Seattle Internet Exchange.	
	Oper	nion of the Seattle Internet Exchange.	
2	Did t	e organization undertake any significant program services during the year which were not listed on the Form 990 or 990-EZ?	
	•		es 🗹 No
3		s," describe these new services on Schedule O. ne organization cease conducting, or make significant changes in how it conducts, any program	
•		_	es 🔽 No
	lf "Y€	s," describe these changes on Schedule O.	
4	expe	ibe the organization's program service accomplishments for each of its three largest program services, as n ses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation tal expenses, and revenue, if any, for each program service reported.	
4a	(Cod	$\cdot$ ) (Expanses  202.202 including grants of  0 ) (Povenue  202.202	3.051 )
48	•	:) (Expenses \$ 302,302 including grants of \$ 0 ) (Revenue \$ 308 et Exchange Point: We aid, support, and assist the efficient transmission of educational, scientific, medical and oth	· '
		nation and communications by creating and maintaining direct communications interconnections between members	
		······································	
	(0)		
4b	(Cod	:) (Expenses \$including grants of \$) (Revenue \$)	)
4	(0		
4c	(Cod	:) (Expenses \$including grants of \$) (Revenue \$)	)
4d		program services (Describe on Schedule O.)	
4e	<u>``</u>	nses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )   program service expenses 302,302	

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? If "Yes," complete Schedule C, Part 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? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? 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? If "Yes," complete Schedule D, Part II	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "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? If "Yes," complete Schedule D, Part IV	9		~
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			-
	or in quasi-endowments? If "Yes," complete Schedule D, Part V.	10		~
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			•
••	VII, VII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
-	complete Schedule D, Part VI	11a		~
b	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more			-
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		~
с	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			-
	of its total assets reported in Part X, line 16? 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		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		~
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		~
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	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? If "Yes," complete Schedule F, Parts II and IV	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? If "Yes," complete Schedule G, Part 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		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>			
		21	1	~

1c

Form 99	0 (2023)		F	Page 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return <b>2a</b>			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	If "Yes," enter the name of the foreign country	10		•
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		V
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		•
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	50		
Ua	organization solicit any contributions that were not tax deductible as charitable contributions?	6-		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a		~
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the			
-	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	-		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . <b>10b</b>			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
100	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	Tou		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		~
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Ves." complete Form 6069			

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			
Secti	on A. Governing Body and Management			
4.			Yes	No
18	Enter the number of voting members of the governing body at the end of the tax year <b>1a</b> 5 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	_		
ь 2	Enter the number of voting members included on line 1a, above, who are independent . <b>1b 5</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		~
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		~
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? . Did the organization have members or stockholders?	4 5 6	~	ン ン
b	one or more members of the governing body?	7a 7b	~ ~	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	~	
ь 9	Each committee with authority to act on behalf of the governing body?	8b	~	
9	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		~
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	iue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		~
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990.	11a	~	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	~	
b c	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b	~	
	describe on Schedule O how this was done	12c		~
13	Did the organization have a written whistleblower policy?	13		~
14 15	Did the organization have a written document retention and destruction policy? 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?	14		
а	The organization's CEO, Executive Director, or top management official	15a		~
b	Other officers or key employees of the organization	15b		~
16a	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		V
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	4.61		
Secti	on C. Disclosure	16b		
<u>Secu</u> 17	List the states with which a copy of this Form 990 is required to be filed None			
17	List the states with which a copy of this form soons required to be filed None			

**18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

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

Form 990 (202	3) Page <b>1</b>								
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	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

(0)

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

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

(A) Name and title (B) Average hours Position (do not hear kmore than one hours Position (do not hear kmore than one hours (P) Reportable compensation organizations (W-27 1099-NEC) Estimate anount of an anount organizations (W-27 1099-NEC)   Nikos Mouat 2.00 v v 0 0 0   President and Director v v 0 0 0   President and Director 1.00 v v 0 0 0   President and Director 1.00 v v 0 0 0   President and Director 1.00 v v 0 0 0   Director 1.00 v v 0 0 0   Director 1.00 v v 0 0 0   Steve Perry 1.00 v v 0 0 0   Director 1.00 v v 0 0 0   Secretary/Treasurer 1.00 v 1 0 0 0   Director 1.00 v 1 1 0 0 0   Secretary/Treasurer 1.00 v 1 1 1 0 0   Director 1 1 </th <th></th> <th></th> <th></th> <th></th> <th>(0</th> <th>C)</th> <th></th> <th></th> <th></th> <th></th> <th></th>					(0	C)					
Name and title   Average how, unless person is both an per weak (fits any other and a director/true and a director/true and a director/true and a director/true organization (M-2) 1994 MEC/   Reportable compensation granuzation (M-2) 1994 MEC/   Reportable compensation granuzation (M-2) 1994 MEC/   Image and a director/true organization and organization and organization and organization   Reportable compensation granuzation (M-2) 1994 MEC/   Image and a director/true organization and organization and organization and organization   Image and a director/true (main and bine to main and organization and organization and organization     Nikos Mouat   2.00   V   V   0   0   0     President and Director   V   V   0   0   0     President and Director   1.00   V   V   0   0   0     Director   1.00   V   V   0   0   0   0     Secretary/Treasurer   0   0   0   0   0   0   0	(A)	(B)							(D)	(E)	(F)
hows (fist arry hows to metabolised organizations)   officer and a director/trustee) (fist arry hows to resisted organizations)   officer and a director/trustee) (fist arry hows to resisted organizations)   compensation from the organizations (W-2) (1989-MEC)   compensation from the organizations (M-2) (1989-MEC)   of other compensation from the organizations (M-2) (1989-MEC)     Nikos Mouat   2.00   v   v   v   0   0   0     President and Director   v   v   v   0   0   0   0     President and Director   v   v   v   0   0   0   0     Vice President and Director   v   v   v   0   0   0   0     Director   v   v   v   v   0   0   0   0     Director   1.00   v   v   v   0   0   0   0     Director   1.00   v   v   v   0   0   0   0     Director   1.00   v   v   v   0   0   0   0     Secretary/Treasurer   0   0   0   0   0	Name and title										
(itstary)   4 gi											
Nikos Mouat     2.00     ✓     ✓     0			or o	Ins	Qff	Ke	em Hig	For			
Nikos Mouat     2.00     ✓     ✓     0			ividi	litut	icer	/ en	hes	mer			
Nikos Mouat     2.00     ✓     ✓     0			tor u	iona		oldt	ee of		1099-NEC)	1099-NEC)	related organizations
Nikos Mouat     2.00     ✓     ✓     0		below	rust	f		yee	npe				
Nikos Mouat     2.00     ✓     ✓     0		dotted line)	ee	stee			nsat				
President and Director   v   v   0   0   0   0     Lrica Hughes Ehnert   1.00   v   v   0   0   0   0     Vice President and Director   v   v   0   0   0   0   0     Director   v   0   0   0   0   0   0   0     Director   v   0   0   0   0   0   0   0     Director   v   0							ed				
Trice Huges Ehnert   1.00   1   1   0   0   0   0     Vice President and Director   1.00   1   1   0   0   0   0     Director   1.00   1   0   0   0   0   0     Director   1.00   1   0   0   0   0   0     Director   1.00   1   0   0   0   0   0     Director   0   0   0   0   0   0   0     Director   40.00   1   0   0   0   0   0   0     Secretary/Treasurer   40.00   1		2.00									
Vice President and Director   v   v   0   0   0   0     Patrick Gilmore   1.00   v   0   0   0   0   0     Director   v   0   0   0   0   0   0     Steve Perry   1.00   v   0   0   0   0   0     Director   v   0   0   0   0   0   0   0     Director   v   0   0   0   0   0   0   0     Director   v   0   0   0   0   0   0   0     Secretary/Treasurer   40.00   v   0   0   0   0   0        0   0   0   0   0			~		~				0	0	0
Introduction of the second		1.00									
Director   ✓   0   0   0   0     Steve Perry   1.00   ✓   0   0   0   0     Director   ✓   0   0   0   0   0   0     Michael Smith   1.00   ✓   0   0   0   0   0     Director   ✓   0   0   0   0   0   0   0     Secretary/Treasurer   ✓   0   0   0   0   0   0			~		~				0	0	0
Steve Pery   1.00   ✓   0   0   0     Director   ✓   0   0   0   0     Director   ✓   0   0   0   0     Chris Caputo   40.00   ✓   0   0   0     Secretary/Treasurer   ✓   0   0   0   0		1.00									
Director   ✓   0   0   0   0     Michael Smith   1.00   ✓   0   0   0   0     Director   ✓   0   0   0   0   0   0   0     Chris Caputo   40.00   ✓   0   0   0   0   0   0   0   0     Secretary/Treasurer   ✓   0			~						0	0	0
Michael Smith   1.00   0   0   0   0     Director   40.00   1   0   0   0   0     Secretary/Treasurer   1   1   0   0   0   0		1.00									
Director   ✓   0   0   0   0     Chris Caputo   40.00   ✓   0   0   0   0     Secretary/Treasurer   ✓   0   0   0   0   0          0   0   0           0   0   0   0            0 <td></td> <td></td> <td>~</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0</td> <td>0</td> <td>0</td>			~						0	0	0
Direction 40.00 40.00 1 0 0 0   Secretary/Treasurer 1 1 1 1 1	Michael Smith	1.00									
Secretary/Treasurer   ✓   0			~						0	0	0
	Chris Caputo	40.00									
	Secretary/Treasurer				~				0	0	0
		<b>_</b>									
		<b>.</b>									

Part	VII Section A. Officers, Directors,	l rustees,	Key	Eml	ploy	yee	s, an	d F	lighest Compe	ensated I	Emplo	yees (continued)
	<b>(A)</b> Name and title	<b>(B)</b> Average hours	box,	unles	Pos neck ss pe	rson	e than c is both	n an	<b>(D)</b> Reportable compensation	<b>(E)</b> Report	able	<b>(F)</b> Estimated amount of other
		per week (list any hours for related organizations below dotted line)	Individua or directo	and Institutional trustee	d a d Officer	-	or/trus Highest compensated employee	ee) Former	organization (W-2/ 1099-MISC/ 1099-NEC)	from rel	lated ns (W-2/ IISC/	compensation from the organization and related organizations
		+	-									
			-									
			-									
			-									
			-									
			-									
1b	Subtotal					L			0		0	0
С	Total from continuation sheets to Part						•	•				
d 2	Total number of individuals (including							ted	above) who re	eceived r	0 nore t	<b>0</b> han \$100,000 of
	reportable compensation from the organi								0			Yes No
3	Did the organization list any <b>former</b> of employee on line 1a? If "Yes," complete s							mpl	oyee, or highes	•	nsated	
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$	150,	000	)? li	f "Yes	s,"				
5	Did any person listed on line 1a receive of for services rendered to the organization?	or accrue co	ompe	nsat	tion	froi	m any	' un	-	tion or inc		4 V 5 V
Secti	on B. Independent Contractors											<b>J</b>
1	Complete this table for your five high compensation from the organization. Rep											
	(A) Name and business add	lress							(B) Description of serv	/ices		(C) Compensation
Altop	a Corporation, 1700 7th Ave Ste 116 PMB 30	0, Seattle, W	/A 98 <sup>.</sup>	101				Co	nsulting services			217,400
2	Total number of independent contractor received more than \$100,000 of compens						ed to	b th	ose listed abov	e) who		

1

Part VIII Statement of Revenue

		Check if Schedule	O con	tains a re	spor	se or note to an	y line in this Pa	urt VIII....		🗆
							(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
is, is	1a	Federated campaig	ns .		1a	0				
ant	b	Membership dues			1b	0				
ng B	с	Fundraising events			1c	0				
fts, ( r Am	d	Related organization			1d	0				
ilai	е	Government grants			1e	0				
Contributions, Gifts, Grants, and Other Similar Amounts	f									
		and similar amounts not included above <b>1f</b> <b>9</b> Noncash contributions included in			34,900					
ib F	g									
ntri d O		lines 1a-1f			1g	\$0				
ar Co	h	Total. Add lines 1a-	-1f.				34,900			
						Business Code				
ce	2a	Internet Exchange P	oint			517110	273,151	273,151	0	0
Program Service Revenue	b									
jram Ser Revenue	с									
am ev€	d									
ng a	е									
Pr	f	All other program se					0	0	0	0
	g	Total. Add lines 2a-	-2f.				273,151			
	3	Investment income								
		other similar amounts)					22,252	22,252	0	0
	4	Income from investr	nent of	tax-exen	npt bo	ond proceeds	0	0	0	0
	5	Royalties	<u></u>				0	0	0	0
				(i) Rea	1	(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	c	Rental income or (loss)	6c		0	0				
	d	Net rental income o	<u> </u>							
	7a	Gross amount from		(i) Securi	ties	(ii) Other				
		sales of assets								
		other than inventory	7a							
ne	b	Less: cost or other basis								
Revenue		and sales expenses .	7b							
Je.	c	Gain or (loss)	7c		0	0				
P	d	Net gain or (loss)	• • •							
Oth	8a	Gross income from		0						
0		events (not including		0	-					
		of contributions rep 1c). See Part IV, line			0					
					8a					
		Less: direct expens			8b					
	с 9а	Net income or (loss) Gross income f			g eve	nts				
	9a	activities. See Part I			9a					
	<b>"</b>	Less: direct expens			9a 9b					
	b	Net income or (loss)								
		Gross sales of ir								
		returns and allowan		y, 1033	10a					
	b	Less: cost of goods			10a					
	C D	Net income or (loss)				Drv .				
			,			Business Code				
Miscellaneous Revenue	11a									
scellaneo Revenue	b									
ella ver	c b									
Be	d	All other revenue								
Ë	e u	Total. Add lines 11a					0			
	12	Total revenue. See					330,303	295,403	0	0
					• •		000,000	233,703	U U	U

Sectio	on 501(c)(3) and 501(c)(4) organizations must comple				
	Check if Schedule O contains a response	-			
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 10	Other employee benefits				
11	Fees for services (nonemployees):				
а	Management	217,400			
b	Legal	130			
С	Accounting	41			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses				
		00.044			
14	Information technology	69,641			
15	Royalties				
16	Occupancy				
17 18	Travel				
19	Conferences, conventions, and meetings				
20					
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23		5,870			
23 24		5,670			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	Address Space	500			
b	Bank Service Charges, Licenses, Permits, Sales Ta	7,976			
c d	Postage, Misc, Rounding	744			
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	302,302	0	0	
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash-non-interest-bearing	76,683	1	66,994
2	Savings and temporary cash investments	1,053,202	2	1,090,892
3	Pledges and grants receivable, net		3	· · ·
4	Accounts receivable, net		4	
5	Loans and other receivables from any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons		5	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D <b>10a</b>		_	
b	Less: accumulated depreciation <b>10b</b>		10c	
11	Investments—publicly traded securities		11	
12	Investments—other securities. See Part IV, line 11		12	
13	Investments – program-related. See Part IV, line 11		13	
14			14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 33)	1,129,885	16	1,157,886
17	Accounts payable and accrued expenses	1,123,003	17	1,157,000
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
22	Loans and other payables to any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	0	26	(
	Organizations that follow FASB ASC 958, check here v and complete lines 27, 28, 32, and 33.			
27	Net assets without donor restrictions	1,129,885	27	1,157,886
28	Net assets with donor restrictions	0	28	,,
	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds		29	
30	Paid-in or capital surplus, or land, building, or equipment fund		30	
31	Retained earnings, endowment, accumulated income, or other funds .		31	
32	Total net assets or fund balances	1,129,885	32	1,157,886
33	Total liabilities and net assets/fund balances	1,129,885	33	1,157,886

Form 9	90 (2023)			Pa	age <b>12</b>
Par	t XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI				
1		1			0,303
2		2			2,302
3		3			8,001
4		4		1,12	9,885
5		5			0
6		6			0
7		7			0
8		8			0
9 10		9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))   1				
Dord	XII Financial Statements and Reporting	0		1,15	7,886
Pari	Check if Schedule O contains a response or note to any line in this Part XII				
			• •	Yes	
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," expl Schedule O.	lain on		105	
2a	If "Yes," check a box below to indicate whether the financial statements for the year were comp reviewed on a separate basis, consolidated basis, or both.		2a		~
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		~
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	d on a			
	separate basis, consolidated basis, or both.				
	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 overs				
	the audit, review, or compilation of its financial statements and selection of an independent accountant		2c		
	If the organization changed either its oversight process or selection process during the tax year, exp Schedule O.	lain on			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth	n in the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audit or audits.		3b		

SCHEDU	JLE I
(Form 99	90)

Department of the Treasury

Internal Revenue Service

Name of the organization

## **Transactions With Interested Persons**

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

Attach to Form 990 or Form 990-EZ.

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

Employer identification number				
ation.	Open to Public Inspection			
a, 25b, 26, 27,	2023			
5	OMB No. 1545-0047			

91-2148657

\$

\$

### SEATTLE INTERNET EXCHANGE

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

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

2 Enter the amount of tax incurred by the organization managers or disgualified persons during the year 

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

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

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of Ioan	<b>(d)</b> Loan to or from the organization?	Ioan from the	<b>(e)</b> Original principal amount	principal amount	<b>(f)</b> Balance due	<b>(g)</b> In c	lefault?	(h) App by bo comm	ard or	(i) Wr agreer	
			То	From			Yes	No	Yes	No	Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
Total						\$							
Part III Grants or As	sistance Benet	iting Interest	ed Pers	sons									

### Grants or Assistance Benefiting Interested Persons

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

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

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

Schedule L (Form 990) 2023

Cat. No. 50056A

Part	Part IV Business Transactions Involving Interested Persons Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.					
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	aring of zation's nues? <b>No</b>
(1)	Altopia Corporation	Chris Caputo, Secretary/T	217 400	Consulting services		V
(2)			211,400			<u> </u>
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10) Pari	V Supplemental Information					

Schedule L (Form 990) 2023

Page 2

## SCHEDULE O (Form 990)

Department of the Treasury

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

Internal Revenue Service	Go to www.irs.gov/Form990 for the latest information.	Inspection
Name of the organization		Employer identification number
SEATTLE INTERNET		91-2148657
Form 990, Part VI, Sec	ction A, Line 6 - The Members elect the Board of Directors and are also able to amen	d the Bylaws.
Form 990, Part VI, Sec	ction A, Line 7a - The Members elect the Board of Directors and are also able to ame	nd the Bylaws.
	ction A, Line 7b - The Members elect the Board of Directors and are also able to ame	end the Bylaws. Only the
Members may amend	Articles 6 and 7 of the Bylaws.	
Form 990, Part VI, Sec	ction B, Line 11b - A draft of the Form 990 is emailed to the Board of Directors for re	view and comment, prior to filing.
Form 000 Port VI So	tion C. Line 10. The governing decuments and financial statements are evaluable to	the public etc
	ction C, Line 19 - The governing documents and financial statements are available to net/docs/documents and https://www.seattleix.net/gov	o the public at:

OMB No. 1545-0047

**Open to Public** 

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