Form 990-EZ

Extended to August 15, 2016 Short Form

Return of Organization Exempt From Income Tax

OMB No. 1545-1150

Department of the Treasury Internal Revenue Service

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.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	For the	e 2015 calendar year, or tax year beginning	and en	ding		- 2				
В	Check it	C Name of organization			D Emple	oyer identi	ification numb	per		
	Addr	ress change	10 to		SOME DOMESTIC STATES					
	Nam	change Internet Commerce Association			20-5466377					
	Initia	Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E 1				E Telephone number				
	Final	dreturn/ 1155 F Street NW		1050	20	2-55	9-8597			
	Ame	City or town, state or province, country, and ZIP or foreign postal	F Group	p Exemptio	on					
	Applic	cation pending Washington, DC 20004			Numb	Number >				
G ,	Accou	inting Method: X Cash			H Check	k >	if the organiz	zation is		
1	Websi	ite: ▶internetcommerce.org		24	notre	equired to	attach Schedu	ile B		
J	Tax-ex	xempt status (check only one) — 501(c)(3) X 501(c) (6) ◀(in	sert no.) 4947(a)(1)	or 527	(Forn	1990, 990	-EZ, or 990-P	F).		
K	Form o	of organization: Corporation Trust X Association	Other							
L	Add lin	nes 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$	200,000 or more, or if tota	al assets (Part	ll,		20113664	000000000		
_3	columi	in (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ					143	,806.		
P	art I	Revenue, Expenses, and Changes in Net Assets	or Fund Balances	(see the instri	actions fo	or Part I)	3	VO-DATA		
3		Check if the organization used Schedule O to respond to any question in the	his Part I	*****************		**********		X		
	1	Contributions, gifts, grants, and similar amounts received				1	141	,313.		
	2	Program service revenue including government fees and contracts				2				
	3	Membership dues and assessments				3				
	4	Investment income				4				
	5a	Gross amount from sale of assets other than inventory	5a							
	ь	Less; cost or other basis and sales expenses								
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from	n line 5a)			5c				
	6	Gaming and fundraising events								
0	a	a Gross income from gaming (attach Schedule G if greater than								
an a		\$15,000)	6a							
Revenue	ь	Gross income from fundraising events (not including \$	of contribution	is						
ш		from fundraising events reported on line 1) (attach Schedule G if the sum of								
		gross income and contributions exceeds \$15,000)	6b							
	c	Less; direct expenses from gaming and fundraising events	6c							
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and	6b and subtract line 6c)			6d				
	7a	Gross sales of inventory, less returns and allowances								
	b	Less; cost of goods sold	7b		0.00					
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)				7c				
	8	Other revenue (describe in Schedule 0)	See Sched	lule O		8		,493.		
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			>	9	143	,806.		
	10	Grants and similar amounts paid (list in Schedule 0)				10				
	11	Benefits paid to or for members		*******		11				
88	12	Salaries, other compensation, and employee benefits		*****************		12				
Expenses	13	Professional fees and other payments to independent contractors				13	130	,600.		
xpe	14	Occupancy, rent, utilities, and maintenance				14	- /4/11/10/00			
ш	15	Printing, publications, postage, and shipping				15	.01.0	10-10-5		
	16	Other expenses (describe in Schedule 0)	See Sched	lule O		16	11	,764.		
	17	Total expenses. Add lines 10 through 16		***********	>	17	142	,364.		
40	18	나는 소리를 입어하다 하는 것이 하는 사람들이 모든 그들은 사람들이 하는 것이 살아 있다면 되었다. 그는 사람들이 하는 사람들이 가지 않는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없다면 하다 하다 하다.				18	1	,442.		
set	19	Net assets or fund balances at beginning of year (from line 27, column (A))			1		30020000			
Net Assets	1000				_	19	90	,433.		
Net	20	그렇게 하다 마다 없이 그리다 하나 사람이 다른 아이들이 어떻게 되었다면 하다 아이들이 얼마나 하나 나를 하는데				20		0.		
0.121	21				•	21		,875.		
LHA	A For	r Paperwork Reduction Act Notice, see the separate instructions.			. 0.	0.07	Form 990-E	Z (2015)		

P	art II	Check if the organization used Schedule O to resp	pond to any questio	n in this Part II	-12100		
				(A) Beginning of year	I	(B) E	nd of year
22	Cash.	savings, and investments		90,433.	. 22		91,875.
23	Land	and buildings			23		
24	Other	assets (describe in Schedule 0)			24		
25	Total	assets		90,433.	_	_	91,875.
26	Total	liabilities (describe in Schedule 0)		0.	26		0.
27	Net a	ssets or fund balances (line 27 of column (B) must agree with line 21)		90,433.	27	_	91,875.
Pa	art III	Statement of Program Service Accomplishmen			77		rpenses for section
140	A 10 MG	Check if the organization used Schedule O to respond to the companization of the companizatio	pond to any questio	n in this Part III	A	501(c)(3)	and 501(c)(4)
						organizati others.)	ons; optional for
		rganization's program service accomplishments for each of its three largest program ibe the services provided, the number of persons benefited, and other relevant inform		es. In a clear and concise		outdis.)	
28	See	Schedule O					
20	500	501104410			-		
	7				1,7		
	(Grants	s \$) If this amount includes foreign o	grants, check here	>		28a	
29							
			A		125		
			- M				
	(Grants	s \$) If this amount includes foreign o	grants, check here	>		29a	
30		10 10 CONTROL OF CONTROL CONTR					
		NE. EZEN NOR DE POLICIO DE POLICI			_	S comment	
2.5	(Grants				Ш	30a	
31		program services (describe in Schedule O)		2000		04-	
22	(Grants				-	31a 32	
P	art IV	program service expenses (add lines 28a through 31a) List of Officers, Directors, Trustees, and Key E	mployees /list each one	even if not compensated - s	ee the		for Part IV
	41616	Check if the organization used Schedule O to resp				700000000000000	
-		oricon il trio organization acca correctate o to rec	(b) Average hours		(d) He	ealth benefits,	(e) Estimated
		(a) Name and title	per week devoted to	compensation (Forms	cont	ributions to loyee benefit	amount of other
			position	(if not paid, enter -0-)		and deferred npensation	compensation
Je	rem	iah Johnston	W 2-900			181	
_		dent, Chairman	4.00	0.		0.	0.
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5321	72 12-02	-15				Form	990-EZ (2015

	other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V) Check if the organization used Sch. O to respond to any question in this			X
90:17			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule 0	33		x
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended			
05.	documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34	8 7	X
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		x
ь	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	N/	_
	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax		100	
	requirements during the year? If "Yes," complete Schedule C, Part III	35c	Х	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"	l		- T
27.	complete applicable parts of Schedule N Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0	36		Х
	Did the organization file Form 1120-POL for this year?	37b		х
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made	0.0	9 9	
	in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	Section 501(c)(7) organizations. Enter:	150		
	Initiation fees and capital contributions included on line 9 39a N/A			
	Gross receipts, included on line 9, for public use of club facilities N/A	-		
408	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A			
Ь	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit			
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any			
	of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	N/	A
C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on	-	-	
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed			
	by the organization N/A All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
•	transaction? If "Yes," complete Form 8886-T	40e		х
41	List the states with which a copy of this return is filed None			
42 a	The organization's books are in care of ► ESCROW. COM Telephone no. ► 949-63	5-3	899	
	Located at ▶ 30318 Esperanza, Rancho Santa Margarita, CA ZIP+4 ▶ 5	268	8	
b	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		Yes	No
	account)? If "Yes," enter the name of the foreign country:	42b	0 9	_
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		х
	If "Yes," enter the name of the foreign country:		Orași	On 20
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A		
			Vac	No
44.0	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of		Yes	NO
174	Form 990-EZ	44a		х
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead	5 7	0 0	
	of Form 990-EZ	44b		Х
c	Did the organization receive any payments for indoor tanning services during the year?	44c		Х
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation		î î	
	in Schedule O	44d		**
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		Х
D	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		
	A MARIA DATA DE LA LA LA LA DELLA DE	1 400	1	

Part VI Sec All s Che 47 Did the organize 48 Is the organize 49a Did the organi b If "Yes," was the second of the organize Complete this	ization engage, directly or indirectly, in po- lete Schedule C, Part I ction 501(c)(3) organizations section 501(c)(3) organizations must a seck if the organization used Schedule ization engage in lobbying activities or har ation a school as described in section 170 ization make any transfers to an exempt m	s only answer questions 47- o O to respond to any we a section 501(h) elect	49b and 52, and	d complete the t	tables for line	es 50 and 51.	46	х
All s Che All s Che To Did the organize So Did the organize The orga	ction 501(c)(3) organizations section 501(c)(3) organizations must seck if the organization used Schedule ization engage in lobbying activities or har ation a school as described in section 170	s only answer questions 47- O to respond to any ve a section 501(h) elect	49b and 52, and	d complete the t	tables for line	es 50 and 51.		1 22
All s Che To Did the organi Selection of the organi All s the organi All s Did the organi Bell "Yes," was the organi Complete this	section 501(c)(3) organizations must a sck if the organization used Schedule ization engage in lobbying activities or har ation a school as described in section 170	answer questions 47- o O to respond to any we a section 501(h) elect						
Che To Did the organi	ck if the organization used Schedule ization engage in lobbying activities or ha ation a school as described in section 170	O to respond to any						
47 Did the organi 48 Is the organi 49a Did the organi b If "Yes," was the 50 Complete this	ization engage in lobbying activities or ha ation a school as described in section 170	ve a section 501(h) elect	î.				*************	
48 Is the organiza 49a Did the organi b If "Yes," was the 50 Complete this	ation a school as described in section 170					740000000000000000000000000000000000000		s No
49a Did the organi b If "Yes," was the 50 Complete this	ation a school as described in section 170 zation make any transfers to an exempt of						47	
b If "Yes," was theComplete this	zation make any transfers to an exempt of	0(b)(1)(A)(ii)? If "Yes," co	implete Schedule	E			48	
50 Complete this	and a minoral of an anadilpt in	non-charitable related org	janization?				49a	1
	he related organization a section 527 orga	anization?				L	49b	\perp
than \$100,000	table for the organization's five highest c			rs, directors, trust	ees and key er	nployees) who ea	ch received	more
	0 of compensation from the organization.		Control of the Contro	hours /	1-	(d) Health benefits.	I (a) Eatin	matad
	(a) Name and title of each employee		(b) Average per week dev	nted to comp	Reportable ensation (Forms	contributions to employee benefit	(e) Estir	
	N/A	Δ	positio	W+2	2/1099-MISC)	plans, and deferred compensation		
	14/1	*		- 0		Compensation		
		-						
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		Ţ					N to	
				-				
				~				
		9						
	of other employees paid over \$100,000			- 4			1	
(a) Name	and business address of each independe	ent contractor		(b) Type o	of service	(6)0	ompensatio	on
						-		
d Total number	of other independent contractors each re	ceiving over \$100,000						
52 Did the organi	ization complete Schedule A? Note; All se	ection 501(c)(3) organiza	tions must attach	а				
completed Sci	hedule A					> [Yes	N
Under penalties of p	perjury, I declare that I have examined this	s return, including accon	panying schedule	as and statements	, and to the be	st of my knowledg	je and belie	of, it is
rue, correct, and co	omplete. Declaration of preparer (other th	an officer) is based on al	information of w	hich preparer has	any knowledg	je.		
	gnature of officer					Date		
oign		D				Date		
_	Jeremiah Johnston,	President						
	int/Type preparer's name	Dranarar'e eignatura		Data	Check	if PTIN		
	me type brobarat a traine	Preparer's signature		Date	self- emplo			
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Paid Preparer	m's name ▶ Taksey Neff	Feinberg L	LC		Firm's EIN	▶ 56-236	0192	0
Paid Preparer		Feinberg Li Place Suit	LC		_	ı ► 56-236	0192	00

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2015

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of organization

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

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

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

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

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

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

DAIAI		et Commerce Assoc		\ iti F07	20-5466377
Part I-A	Complete if the or	ganization is exempt und	er section 501(c	or is a section 527 o	rganization.
2 Political	expenditures	ization's direct and indirect politic		▶ \$	
Part I-B	Complete if the or	ganization is exempt und	ler section 501(c	:)(3).	
1 Enter th	e amount of any excise ta	x incurred by the organization und	der section 4955	▶\$	<u>e</u>
2 Enter th	e amount of any excise ta	x incurred by organization manage	ers under section 495	55▶\$	
		on 4955 tax, did it file Form 4720			
					Yes No
Part I-C	describe in Part IV. Complete if the or	ganization is exempt und	er section 501(c), except section 501(c)(3).
The second second		ed by the filing organization for se			-,,,,,
	이 경기에 되어 하다면서 있는데 되어 되어 있는데 얼마를 하면 되었다.	nization's funds contributed to ot			9:
	[18] [18] [18] [18] [18] [18] [18] [18]		있다. 1일 200 1000 1000 1000 1000 1000 1000 10		
3 Total ex	empt function expenditure	es. Add lines 1 and 2. Enter here a	ind on Form 1120-PO	DL,	
line 17b)			▶\$	
		n 1120-POL for this year?			
made p	ayments. For each organiz utions received that were p	employer identification number (El cation listed, enter the amount pai promptly and directly delivered to f additional space is needed, prov	d from the filing organ a separate political or	nization's funds. Also enter th rganization, such as a separa	e amount of political
-	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0.
-					
				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

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

Schedule C (Form 990 or 990-EZ) 2015

LHA 532041 10-05-15

Schedule C (Form 990 or 990-EZ) 2015

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2015 Internet Commerce Association 20-546637 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ich "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description			(b)	
	o lobbying activity.	Yes No Ar			unt
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		-		
c	Media advertisements?				
	Mailings to members, legislators, or the public?				
	1일보다 다른 100kg 전 100kg 전 100kg 전 100kg 전 100kg 전 100kg 전 100kg 보다 100kg 전 100kg 전 100kg 전 100kg 전 100kg 전 100kg				
f	Grants to other organizations for lobbying purposes?				
q	52): 0				-
-	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
1	Total, Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				_
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501/a	(E) or co	otion	-
Par	501(c)(6).	11 50 1(0)	(5), or see	Stion	
_	30 1(c)(o).		- 1	Yes	No
	Were substantially all (90% or more) dues received nondeductible by members?		1	100	X
1	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			-	X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?		2	-	X
· ui	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				e 3, is
1	Dues, assessments and similar amounts from members		1	141	,313.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic		23.0		
	expenses for which the section 527(f) tax was paid).				
a	Current year		2a	18	,000.
	Carryover from last year		4256121213		
c	Total			18	,000.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	21	,197.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	ess			2
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5	-3	,197.
Par	t IV Supplemental Information				
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group actions); and Part II-B, line 1. Also, complete this part for any additional information.	list); Part I	I-A, lines 1 a	nd 2 (see	
		Schedu	ile C (Form	990 or 990	-EZ) 201

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Internet Commerce Association

Employer identification number 20-5466377

Internet Commerce Association	20-5400377
Form 990-EZ, Part I, Line 8, Other Revenue:	
Description of Other Revenue:	Amount:
ICA Events	2,493.
Form 990-EZ, Part I, Line 16, Other Expenses:	
Description of Other Expenses:	Amount:
Association membership	1,748.
Bank fees	135.
PayPal fees	703.
Franchise taxes	500.
Corporate representation	474.
Domain renewals	23.
Promotional and Design	7,226.
Insurance	687.
Bookkeeping	268.
Total to Form 990-EZ, line 16	11,764.
Form 990-EZ, Part III, Primary Exempt Purpose - ICA's mis advocate for the rights and interests of domain name owner.	
service providers.	
Form 990-EZ, Part III, Line 28, Program Service Accomplis	hments:
Advocacy, engagement and participation in ICANN's policy	
making process through the Business Constituency. Advocac	У
and engagement with the legislative process. Education and	đ
advocacy through online publications and in-person partic LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. School 13	ipation at dule O (Form 990 or 990-EZ) (2015)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Internet Commerce Association

Employer identification number 20-5466377

industry events. The ICA believes that its work benefits all those in
the domain industry - those who own or monetize domain names as a
business asset or provide domain name related services or tools.
Form 990-EZ, Part V, Information Regarding Personal Benefit Contracts:
The organization did not, during the year, receive any funds, directly,
or indirectly, to pay premiums on a personal benefit contract.
The organization, did not, during the year, pay any premiums, directly,
or indirectly, on a personal benefit contract.
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Form 8868 (Rev. January 2014)

Department of the Treasury

Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

X If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or print Internet Commerce Association 20-5466377 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date fo filing your 1155 F Street NW, No. 1050 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions Washington, DC 20004 0 1 Enter the Return code for the return that this application is for (file a separate application for each return) Application Return Application Return Is For Code Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Escrow.com The books are in the care of > 30318 Esperanza - Rancho Santa Margarita, CA 92688 Telephone No. ► 949-635-3899 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until August 15, 2016 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 2015 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Form 8868 (Rev. 1-2014)

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For Privacy Act and Paperwork Reduction Act Notice, see instructions.