## Extended to November 15, 2019

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

A For the 2018 calendar year, or tax year beginning

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

and ending

Open to Public Inspection

В	Check if applicable	C Name of organization		D Employer identif	fication number
	Addres	Internet Commerce Association			
Ļ	change	C/O Taksey Nett & Associates LLC		0.0	- 466000
Ļ	change	9			5466377
F	return	,		E Telephone numb	
	Final return/ termin-	2 Research Place 310	_		-559-8597
	ated Amend	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	205,806.
F	return	ROCKVIIIE, MD 20050		H(a) Is this a group	
L	Applica tion pendin			for subordinate	
_		same as C above		<b>H(b)</b> Are all subordinates	
		empt status: $\square$ 501(c)(3) $\boxed{\mathbf{X}}$ 501(c) ( 6 ) $\blacktriangleleft$ (insert no.) $\square$ 4947(a)(1) or $\square$ e: $\blacktriangleright$ internetcommerce.org	527		a list. (see instructions)
_		<u> </u>		H(c) Group exempti	on number ► M State of legal domicile: DC
		organization: Corporation Trust _X Association Other ►   Summary	L Year o	i iorination. 2000	M State of legal doffliche. DC
		Briefly describe the organization's mission or most significant activities: The Int	terne	et Commerce	
Activities & Governance	''	Association (ICA) is a non-profit advocatir	na fa	or the righ	rts and
nar		Check this box if the organization discontinued its operations or disposed of			
Ver	1			1 -	1
ဗိ		Number of voting members of the governing body (Part VI, line 1a)  Number of independent voting members of the governing body (Part VI, line 1b)			<u> </u>
დ თ		Total number of individuals employed in calendar year 2018 (Part V, line 2a)			
iţie		Total number of volunteers (estimate if necessary)			<del> </del>
ċį		Total unrelated business revenue from Part VIII, column (C), line 12			_
A		Net unrelated business taxable income from Form 990-T, line 38			
		, , , , , , , , , , , , , , , , , , , ,		Prior Year	Current Year
Φ	8	Contributions and grants (Part VIII, line 1h)		163,841	
'n		Program service revenue (Part VIII, line 2g)		0 .	. 0.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		18	
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		10,190	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		174,049	205,806.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0 .	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0 .	_
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0 .	. , .
Expenses	16a I	Professional fundraising fees (Part IX, column (A), line 11e)		0 .	0.
ď	b.	Total fundraising expenses (Part IX, column (D), line 25)	<u>•</u>		10-00-
ш	1/ (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		179,764	187,305.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		179,764	
. 0	19	Revenue less expenses. Subtract line 18 from line 12		-5,715	
Net Assets or			Beg	inning of Current Year	
SSE	20	Total assets (Part X, line 16)		118,501	
let A	21	Total liabilities (Part X, line 26)		118,501	99,550.
	22   art II	Net assets or fund balances. Subtract line 21 from line 20		110,501	99,550.
_		Ities of perjury, I declare that I have examined this return, including accompanying schedules and	d etateme	nte and to the heet of r	ny knowledge and helief it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of which p			ily kilowicago alla bollol, it is
- u	, 001100	t, and complete. Bookington of property (other than omost) to become on an information of which p	propuror	lao any knowleage.	
Sig	ın	Signature of officer		Date	
He		Nat Cohen, Treasurer			
	.	Type or print name and title			
_		Print/Type preparer's name Preparer's signature	Da	ate Check	PTIN
Pai		Edward Neff Edward Neff	1:	1/13/19 if self-emplo	P00359218
Pre		Firm's name Taksey Neff & Associates, LLC		Firm's EIN	56-2360192
		Firm's address 2 Research Place Suite 310			
		Rockville, MD 20850		Phone no. (	301)294-1100
Ма	y the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

	1110	ernet commerc					
		Taksey Neff				20-5466377	Page <b>2</b>
Pa	t III Statement of Progr	am Service Accomp	olishments	;			
	Check if Schedule O cont	ains a response or note to	any line in th	is Part III			X
1	Briefly describe the organization		/		<b>61.</b>		
	Internet Commerc	<u>e Association</u>	i (ICA)	ıs a non-	profit tra	de organizat	lon
	representing dom	aln name inve	stors,	website de	evelopers	and related	
	companies. The I	CA is made up	of res	sponsible i	ousinesses	and	
	individuals who					confidence i	.11
2	Did the organization undertake		_	•		□v <sub>a</sub> ,	X No
	prior Form 990 or 990-EZ?  If "Yes," describe these new set	nices on Cohodule O				Yes	IA NO
3	Did the organization cease cond		nt changes in l	how it conducts an	, program sonjece?	Vos	X No
3	If "Yes," describe these change		it changes in i	now it conducts, any	/ program services :	L 1es	121 NO
4	Describe the organization's prog		nents for each	of its three largest r	orogram services as	s measured by expense	9
7	Section 501(c)(3) and 501(c)(4)						
	revenue, if any, for each program	-	to report the	amount of grants an	a anocations to our	oro, the total expenses,	unu
4a			including grants of	of \$	) (Rever	ue \$	,
	(Code: ) (Expenses \$	acy for impro	oving do	omain name	registran	t rights und	ler
	the UDRP, succes	sful public e	engageme	ent on the	.org regi	stry agreeme	ent
	renewal, highlig	hting the lac	k of ju	ustificatio	on for rai	sing prices	on
	.com domain name	S.					
4b	(Code: ) (Expenses \$		including grants of	of \$	) (Rever	ue\$	
				•			
4c	(Code: ) (Expenses \$		including grants of	of \$	) (Rever	ue\$	
4d	Other program services (Describ	ne in Schedule () )					

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Total program service expenses

Form **990** (2018)

Part IV 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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		Х
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8		Х
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		х
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		х
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		х
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		Х
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		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		Х
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		Х
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		Х
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	17		X
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		X
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		X
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
_	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

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I al	Officerist of Required Scriedules (continued)			1
	Dill		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	00		X
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	-	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," <i>complete</i>			
		23		X
24 2	Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
244	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		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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? If "Yes," complete Schedule L, Part I	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? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			١,,
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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):	00		Х
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		A
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? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		1
00	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	_	<del>                                     </del>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	-	├
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			х
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	$\vdash$	<u> </u>
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	x	
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance	30		
. 4	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1		1.00	<del>  ```</del>
b				
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
			000	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
				Yes	No
<b>2</b> a	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	2a 1	-		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	rns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule	0	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		X
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 A	ccounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				l
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribute				
	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 set				<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w				
	to file Form 8282?	I I	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti		7f		<del></del>
g	If the organization received a contribution of qualified intellectual property, did the organization file Formula (1997).		7g		<del></del>
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, airplanes,		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
0			8		
9	Sponsoring organizations maintaining donor advised funds.		9a		
a	Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		$\vdash$
10	Section 501(c)(7) organizations. Enter:		90		
	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1		
	Section 501(c)(12) organizations. Enter:	100	1		
	Gross income from members or shareholders	11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against	110	1		
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		1		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
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	13b			
С	Enter the amount of reserves on hand	13c			
			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	eration or			
	excess parachute payment(s) during the year?		15		X
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	nt income?	16		X
	If "Yes," complete Form 4720, Schedule O.			255	
			Form	990	(2018)

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Form 990 (2018) C/O Taksey Neff & Associates LLC 20-5466377 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1		
	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.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	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		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
	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	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	116		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	123		
·	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
.0	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
	Other officers or key employees of the organization	15b		X
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	100		
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
104		16a		Х
h	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	104		
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is 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	le only	lavail	hle
10	for public inspection. Indicate how you made these available. Check all that apply.	, o or ny	availe	שוטוע
	Own website Another's website X Upon request Other (explain in Schedule O)			
10	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial	
19	statements available to the public during the tax year.	u IIIIdíl	ual	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
20	Taksey Neff & Associates LLC - 301-294-1100			
	2 Research Place, Suite 310, Rockville, MD 20850			
	T Research Flace, Suice Sio, Mockville, MD 20030			

# Form 990 (2018) C/O Taksey Neff & Associates LLC 20-54 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.

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

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

(A)	(B)			((	C)			(D)	(E)	(F)
Name and Title	Average hours per week	box	Positio (do not check mor box, unless persor officer and a direc			is bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Daniel law	2.00							0	0	0
Director	2 00	Х						0.	0.	0.
(2) Jay Chapman	2.00	X						0.	0.	0
Director (3) Bob Mountain	2.00	^	_	<u> </u>	_			0.	0.	0.
Director	2.00	X						0.	0.	0.
(4) Tessa Holcomb	2.00	^						0.	0.	0.
Director	2.00	Х						0.	0.	0.
(5) Jerimiah Johnston	2.00	22	_	$\vdash$				0.	0.	
President, Chairman	2,00			x				0.	0.	0.
(6) Nat Cohen	4.00	$\vdash$		<del></del>						
Treasurer				х				0.	0.	0.

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Part VII   Section A. Officers, Directors, Trus	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)	(C)						(D)	(E)		(	(F)
Name and title	Average	(do		Pos heck		<b>)</b> than	one	Reportable	Reportable		Esti	mated
	hours per week					is bot or/trus		compensation from	compensation from related		l .	unt of ther
	(list any	tor						the	organization		1	ensation
	hours for	r director				pa		organization	(W-2/1099-MIS			n the
	related	stee or	rustee			ensat		(W-2/1099-MISC)				nization
	organizations below	Jal tru	onal t		oloyee	comp					l	related
	line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				organ	izations
			=	0	호	Ξ 0	ч					
						_						
				$\vdash$		$\vdash$						
							L	0.		0		0
1b Sub-total								0.		0.		0.
c Total from continuation sheets to Part VI								0.		0.		0.
d Total (add lines 1b and 1c)  2 Total number of individuals (including but n							10 r		L 0.000 of reportab			<u> </u>
compensation from the organization	ot illilited to th	1030	iioto	Ju ai	00 V	C) WI	10 11	cocived more than \$100	,,ooo or reportab			0
											Y	es No
3 Did the organization list any former officer,	director, or tru	ıste	e, ke	y er	nplo	oyee	or	highest compensated e	mployee on			
line 1a? If "Yes," complete Schedule J for s	uch individual										3	X
4 For any individual listed on line 1a, is the su		le co	omp	ensa	atior	n and	d otl	her compensation from	the organization			
and related organizations greater than \$150											4	X
5 Did any person listed on line 1a receive or a	-				-			-				
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedule	e J f	or si	uch ,	pers	son .					5	X
Complete this table for your five highest co	mnensated inc	dene	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of con	nnens	ation fro	m
the organization. Report compensation for	-									ропс	ation inc	,,,,
(A)								(B)			(C)	
Name and business								Description of s	ervices	С	compens	ation
Muskovitch Law PC, 446 Eq								- 1			1 2 0	100
West, Toronto, Ontario, (	CANADA I	151	N _	LA			-	Legal			139	,102.
							$\dashv$					
2 Total number of independent contractors (i	ncluding but n	ot lii	mite	d to	tho	se li	stec	d above) who received m	nore than			

Form **990** (2018)

\$100,000 of compensation from the organization

		Check if Schodule O cent	aine a roenoneo	or note to any lin	o in this Dart VIII			
		Check if Schedule O cont	ains a response	or note to any iii	(A)  Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns  Membership dues  Fundraising events  Related organizations  Government grants (contribut All other contributions, gifts, gran similar amounts not included abo'  Noncash contributions included in lines  Total. Add lines 1a-1f	1b 1c 1d 1d 1e 1s, and 1f 1s 1a-1f: \$	196,479.	196,479.			
		Totali Add lines ta 11		Business Code				
Program Service Revenue	2 a b c d							
ъ		All other program service reve						
	3 4 5	Investment income (including other similar amounts) Income from investment of ta: Royalties	dividends, interesections	est, and  proceeds	35.			35.
	6 a	Gross rents Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	С	Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)						
enne		Gross income from fundraisin including \$ contributions reported on line	g events (not of					
Other Revenu		Part IV, line 18  Less: direct expenses  Net income or (loss) from func	a					
		Gross income from gaming ac Part IV, line 19 Less: direct expenses	a					
	10 a	Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold Net income or (loss) from sale	returns a					
	11 a	Miscellaneous Revenu ICA Event		Business Code 518210	9,292.	9,292.		
		All other revenue  Total. Add lines 11a-11d  Total revenue. See instructions			9,292.	9,292.	0	. 35.

Form		mmerce Assoc Neff & Assoc		20-5	466377 Page <b>10</b>
	t IX Statement of Functional Expens				. ago
Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must c	complete column (A).	
	Check if Schedule O contains a respor	nse or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) 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	Benefits paid to or for members				
5	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)	22 810			
7	Other salaries and wages	33,718.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	2 724			
10	Payroll taxes	3,734.			
11	Fees for services (non-employees):				
a	Management	139,102.			
b	Legal	2,376.			
C	Accounting	2,370.			
d	Lobbying  Professional fundraising services. See Part IV, line 17				
e	Professional fundraising services. See Part IV, line 17 Investment management fees				
f a	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch 0.)	4,726.			
12	Advertising and promotion	3,363.			
13	Office expenses	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	7,545.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	4,677.			
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 0.)				
а	ICA event expenses	18,974.			

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25

3,000.

1,467.

1,133.

224,757.

942.

e All other expenses

Subcontractor

c Online services

d Reimbursed expense

Total functional expenses. Add lines 1 through 24e

 $\mbox{\sc Joint costs}.$  Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here 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 Part X (A) (B) End of year Beginning of year 59,950. 63,483. Cash - non-interest-bearing 1 55,018. 39,600. 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 **5** Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 instr). Complete Part II of Sch L Assets 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D \_\_\_\_\_\_ 10a b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities \_\_\_\_\_ 11 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 118,501. 99,550. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, \_iabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 25 Schedule D 0. 0. Total liabilities. Add lines 17 through 25 26 complete lines 27 through 29, and lines 33 and 34. **Net Assets or Fund Balances** 27 27 Unrestricted net assets Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 0. 0. Capital stock or trust principal, or current funds 30 0. 31 Paid-in or capital surplus, or land, building, or equipment fund 118,501. 99,550. Retained earnings, endowment, accumulated income, or other funds ...... 32 32

> 99,550. Form 990 (2018)

99,550.

Total net assets or fund balances

Total liabilities and net assets/fund balances \_\_\_\_\_\_

118,501.

118,501.

Form **990** (2018)

Pa	rt XI 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		5,8		
2	Total expenses (must equal Part IX, column (A), line 25)	2		4,7		
3	Revenue less expenses. Subtract line 2 from line 1	3		8,9		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11	8,5	01.	
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	9	9,5	50.	
Pa	rt XII Financial Statements and Reporting	•				
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990: X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			X	
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e 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 oversight of the	e 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, explain in Sch	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit				
	Act and OMB Circular A-133?		3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b			

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#### **SCHEDULE 0**

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

OMB No. 1545-0047

Inspection

Name of the organization

Internet Commerce Association C/O Taksey Neff & Associates LLC

**Employer identification number** 20-5466377