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PUBLIC DISCLOSURE COPY

### **TAX RETURN FILING INSTRUCTIONS**

\*\* FORM 990 PUBLIC DISCLOSURE COPY \*\*

#### FOR THE YEAR ENDING

DECEMBER 31, 2021

Prepared for	THE INT'L CENTER FOR JOURNALISTS, INC. 750 17TH STREET, NW 300 WASHINGTON, DC 20006
Prepared by	GELMAN, ROSENBERG & FREEDMAN 4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 20814-2930
Amount due or refund	NOT APPLICABLE
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED.

#### \*\* PUBLIC DISCLOSURE COPY \*\*

Form **991** 

# 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

Inspection

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public

Α	For th	e 2021 calendar year, or tax year beginning and en	nding		
В	Check it applicat	C Name of organization		D Employer identific	cation number
	Addr chan	THE INT'L CENTER FOR JOURNALISTS, INC.			
	Nam- chan			11-27249	05
	Initia returi Final returi	Number and street (of P.O. box if mail is not delivered to street address)	oom/suite 0 0	E Telephone numbe	
	termi		00	G Gross receipts \$	30,639,155.
	ated Amer	WASHINGTON, DC 20006		H(a) Is this a group re	
F	Appl	F Name and address of principal officer: SHARON MOSHAVI		for subordinates	
	pend	SAME AS C ABOVE		<b>H(b)</b> Are all subordinates in	
$\overline{\Gamma}$	Tax-e	empt status: X 501(c)(3) 501(c) ( ) ( insert no.) 4947(a)(1) or [	527		list. See instructions
J	Webs	te: ▶ WWW.ICFJ.ORG		H(c) Group exemptio	n number 🕨
		forganization: X Corporation Trust Association Other	<b>L</b> Year o	of formation: 1984 N	Natate of legal domicile: MA
P	art I				
ø	1	Briefly describe the organization's mission or most significant activities: SEE PA	ART I	II, LINE 1.	
and					
Governance	2	Check this box  if the organization discontinued its operations or disposed			
ဇ္ဗ	3	Number of voting members of the governing body (Part VI, line 1a)			31 30
∞ ∞	4	Number of independent voting members of the governing body (Part VI, line 1b)			71
ţį	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)			31
Activities &	6	Total number of volunteers (estimate if necessary)			5,949.
¥		Total unrelated business revenue from Part VIII, column (C), line 12  Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
	<del>  "</del>	Net unrelated business taxable income norm 990-1, Part I, line 11		Prior Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)		24,753,679.	26,381,095.
Revenue	9	Program service revenue (Part VIII, line 2g)	····· —	75,677.	134,335.
e e	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		594,041.	1,081,375.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-316,583.	-675,328.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		25,106,814.	26,921,477.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		8,090,606.	11,933,086.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Ş	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,897,491.	4,274,182.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		48,750.	0.
x be	b	Total fundraising expenses (Part IX, column (D), line 25)   852,978	8.		
Ŵ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		4,979,366.	4,437,886.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		17,016,213.	20,645,154.
	19	Revenue less expenses. Subtract line 18 from line 12		8,090,601.	6,276,323.
Net Assets or Fund Balances				ginning of Current Year	End of Year
sset	20	Total assets (Part X, line 16)		35,656,295.	46,320,077.
et A	21	Total liabilities (Part X, line 26)		825,783.	6,080,620.
	22 art II	Net assets or fund balances. Subtract line 21 from line 20		34,830,512.	40,239,457.
_		Signature Block alties of perjury, I declare that I have examined this return, including accompanying schedules ar	and atatam	anta and to the heat of m	v knowledge and balisf it is
		ct, and complete. Declaration of preparer (other than officer) is based on all information of which			y Kilowieuge allu Dellei, it is
	,, 00110	tigand complete. Declaration of preparet (other than officer) is based on an information of which	η ρισμαισι	ilas arīy Kriowicugo.	
Sig	ın	Signature of officer		Date	
He		MARIO SCHERHAUFER, VP, FINANCE & ADMINI	ISTRA	TION	
		Type or print name and title			
		Print/Type preparer's name Preparer's signature /		oate Check	PTIN
Pai	d	RICHARD J. LOCASTRO, CPA   Rubard J. Locas	tro	11/14/2022   if self-employe	P00288314
Pre	parer	Firm's name ▶ GELMAN, ROSENBERG & FREEDMAN			52-1392008
Use	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N			
		BETHESDA, MD 20814-2930		Phone no. (3	01) 951-9090
Ma	v the	RS discuss this return with the preparer shown above? See instructions		•	X Yes No

Pai	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:  WE EMPOWER AN UNPARALLELED GLOBAL NETWORK OF JOURNALISTS TO PRODUCE
	NEWS REPORTS THAT LEAD TO BETTER GOVERNMENTS, STRONGER ECONOMIES, MORE
	VIBRANT SOCIETIES AND HEALTHIER LIVES.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No  If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
40	revenue, if any, for each program service reported.  (Code: ) (Expenses \$ 15,822,675 • including grants of \$ 11,219,604 • ) (Revenue \$ 134,335 • )
4a	(Code: ) (Expenses \$ 15,822,675 including grants of \$ 11,219,604 ) (Revenue \$ 134,335 )   ICFJ CONDUCTED HIGH-IMPACT PROGRAMS TO ENABLE JOURNALISTS, MEDIA
	PROFESSIONALS, AND MEDIA ORGANIZATIONS AROUND THE WORLD TO PRODUCE
	TIMELY, ACCURATE INFORMATION ON KEY ISSUES THROUGH COMPELLING
	STORYTELLING. WE SERVE OUR UNPARALLELED GLOBAL NETWORK BY PROVIDING
	TRAINING, MENTORING, FELLOWSHIPS OR FINANCIAL SUPPORT IN THE FIVE KEY
	AREAS: MEDIA INNOVATION, INVESTIGATIVE JOURNALISM, CRITICAL-ISSUES
	REPORTING, FINANCIAL SUSTAINABILITY AND RESEARCH AND RESOURCES.
4b	(Code:) (Expenses \$1,003,884 • including grants of \$644,788 • ) (Revenue \$)
	ICFJ'S KNIGHT INTERNATIONAL JOURNALISM FELLOWSHIPS PROGRAM IS DESIGNED
	TO INSTILL A CULTURE OF NEWS INNOVATION AND EXPERIMENTATION WORLDWIDE.
	THE GOAL IS TO SEED NEW IDEAS AND SERVICES THAT DEEPEN COVERAGE, EXPAND
	NEWS DELIVERY AND ENGAGE CITIZENS IN THE EDITORIAL PROCESS. FUNDED BY
	THE JOHN S. AND JAMES L. KNIGHT FOUNDATION, FELLOWS BUILD ON PAST
	SUCCESSES IN THE KNIGHT PROGRAM, WHICH HAS A STRONG RECORD OF ACHIEVING IMPACT. THEY WORK IN COUNTRIES WHERE THERE IS A GOOD OPPORTUNITY TO
	CREATE THE NEWS MEDIA OF THE FUTURE. WITH ADDITIONAL SUPPORT FROM THE
	BILL & MELINDA GATES FOUNDATION, KNIGHT FELLOWS ARE EMPOWERING
	JOURNALISTS IN INDIA TO USE THE LATEST DIGITAL TOOLS TO TELL COMPELLING
	STORIES ON HEALTH AND DEVELOPMENT ISSUES.
	21011112 OII IIIIII IIID DD TODOLITIII I IDDOLIDI
4c	(Code: ) (Expenses \$ 666,246 • including grants of \$ 68,694 • ) (Revenue \$
	IJNET DELIVERS THE LATEST ON GLOBAL MEDIA INNOVATION, NEWS APPS AND
	TOOLS, TRAINING OPPORTUNITIES AND EXPERT ADVICE FOR PROFESSIONAL AND
	EMERGING JOURNALISTS WORLDWIDE. PRODUCED BY THE INTERNATIONAL CENTER
	FOR JOURNALISTS, IJNET FOLLOWS THE SHIFTING JOURNALISM SCENE FROM A
	GLOBAL PERSPECTIVE IN EIGHT LANGUAGES - ARABIC, CHINESE, ENGLISH,
	FRENCH, PERSIAN, PORTUGUESE, RUSSIAN AND SPANISH.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses ► 17,492,805.
<u>4e</u>	Total program service expenses ► 17, 492, 805.

#### 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? See instructions	2	X	
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		X
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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			3,7
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			<b>.</b>
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		<b>.</b>
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
•	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?			$ _{\mathbf{x}}$
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	Х	
44	or in quasi endowments? If "Yes," complete Schedule D, Part V  If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,	10	21	
11	as applicable.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	D 444	11a	Х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	Ha		
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
Ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b				
	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	X	
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	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		37	
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	ا ـــــا	v	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	ا مد ا	Х	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	Λ	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		x
20~	complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
20a	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<del>  ^`</del>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
	got of the contract of the con			

	1 990 (2021) THE INT'L CENTER FOR JOURNALISTS, INC. 11-2724 rt IV   Checklist of Required Schedules (continued)	905	Р	age 4
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		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		х
h	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			
		25b		х
06	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	250		
26				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			X
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		_^
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	l		37
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			l
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? 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			
	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		Х
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		Х
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		Х
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		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		
30	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
01	and the trick was taken as a contract to the fact and track as a contract of the state of the st	37		Х
20		31		<del>  ^``</del>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	20	Х	
Par	Note: All Form 990 filers are required to complete Schedule 0 rt V Statements Regarding Other IRS Filings and Tax Compliance	38		
· ai				
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
		4		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1		

(gambling) winnings to prize winners? 132004 12-09-21

Х Form **990** (2021)

 $\boldsymbol{c} \hspace{0.2cm} \text{Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming} \\$ 

### Part 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,		71			
	filed for the calendar year ending with or within the year covered by this return	2a	71		37	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	X	
0-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions			0-	Х	
				3a 3b	X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule At any time during the calendar year, did the organization have an interest in, or a signature or other a			SD	21	
44	financial account in a foreign country (such as a bank account, securities account, or other financial		•	4a		х
h	If "Yes," enter the name of the foreign country	accoun	9:	Tu Tu		
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccount	s (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5с		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th					
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or	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 ser			7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	•				\ <sub>3,7</sub>
	to file Form 8282?			7с		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d		7.		Х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution of qualified intellectual property, did the organization file Fo			7f		25
g h	If the organization received a contribution of qualified intellectual property, and the organization file of 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 file of the organization file			7g 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					
	sponsoring organization have excess business holdings at any time during the year?		NT / 7A	8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?		N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		N/A	9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а		11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
40-	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b		40-		
	37 / 3	12b		12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	IZU				
	Is the organization licensed to issue qualified health plans in more than one state?		N/A	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	Did the organization receive any payments for indoor tanning services during the tax year?			14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul	le O .		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					
	excess parachute payment(s) during the year?			15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.					v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t incon	ne?	16		X
47	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in		NT / Z	47		
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.			17		
	ii 100, complete i diffi dodo.					

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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI								
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 la								
	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.								
b	Enter the number of voting members included on line 1a, above, who are independent 1b 30								
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, 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?								
6	Did the organization have members or stockholders?	6		Х					
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		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	X						
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 on Schedule O	9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
			Yes	No					
	Did the organization have local chapters, branches, or affiliates?	10a		X					
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	77						
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 on Schedule O the process, if any, used by the organization to review this Form 990.		37						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		37						
	on Schedule O how this was done	12c	X						
13	Did the organization have a written whistleblower policy?	13	X						
14	Did the organization have a written document retention and destruction policy?	14	Λ						
15	Did the process for determining compensation of the following persons include a review and approval by independent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-	Х						
	The organization's CEO, Executive Director, or top management official	15a	- 1	Х					
D	Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	15b		22					
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
iva		16a		Х					
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	IUa							
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	and the same of th	16b							
Sec	exempt status with respect to such arrangements?	100							
17	List the states with which a copy of this Form 990 is required to be filed ►CA , MA , NJ , NY								
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	) avail:	able					
	for public inspection. Indicate how you made these available. Check all that apply.	_ = =y	,						
	Own website X Another's website X 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, an	d finar	ncial						
	statements available to the public during the tax year.		_ /1						
20	State the name, address, and telephone number of the person who possesses the organization's books and records								
	MARIO SCHERHAUFER - (202)737-3700								
	750 17TH ST., NW, STE 300, WASHINGTON, DC 20006								

132006 12-09-21

## 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 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, 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.

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

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

(A) Name and title	(B) Average hours per week	box	not c , unle	Pos heck ss pe	rson i	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) 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/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) JOYCE BARNATHAN PRESIDENT (UNTIL 9/7/2021)	35.00	x		х				263,739.	0.	33,407.
(2) SHARON MOSHAVI	35.00							203,733.	0.	33, 407 •
SVP_NEW INIT; THEN PRES (EFF 9/7/21)	33.00	x		х				222,045.	0.	31,918.
(3) PATRICK BUTLER	35.00							222,043.	0.	31,310.
VP, CONTENT AND COMMUNITY	33.00				х			191,096.	0.	19,015.
(4) VJOLLCA SHTYLLA	35.00									
VP, DEVELOPMENT					Х			172,519.	0.	27,435.
(5) MARIO SCHERHAUFER	35.00									
VP, FINANCE & ADMINISTRATION		1		Х				159,831.	0.	18,130.
(6) JOHANNA CARRILLO	35.00									
VP, PROGRAMS						Х		147,346.	0.	20,615.
(7) LUIS BOTELLO	35.00									
DEPUTY VP, GLOBAL IMPACT & STRATEGY						Х		137,965.	0.	26,784.
(8) ROBERT TINSLEY	35.00									
SENIOR DIRECTOR, INNOVATION						Х		127,079.	0.	21,190.
(9) ERIN STOCK	35.00								_	
DIRECTOR, COMMUNICATIONS						Х		104,846.	0.	16,542.
(10) EMILY SCHULT	35.00								_	
DEPUTY VP, EVENTS & PRODUCTION						Х		103,547.	0.	11,236.
(11) MICHAEL GOLDEN	4.00								_	
CHAIRMAN		Х		Х				0.	0.	0.
(12) JAMES F. HOGE, JR.	4.00	l								•
VICE CHAIR	4 00	Х		Х				0.	0.	0.
(13) PAMELA HOWARD	4.00	١							•	•
VICE CHAIR	4 00	Х		Х				0.	0.	0.
(14) MATTHEW WINKLER	4.00								0	0
VICE CHAIR	4 00	Х		Х				0.	0.	0.
(15) JOHN MAXWELL HAMILTON	4.00	٠,,		,,					0	0
TREASURER	4 00	Х		Х				0.	0.	0.
(16) JASON WRIGHT	4.00	X		\ <sub>V</sub>				ا م	^	0
DEVELOPMENT CHAIR	4 00	^		Х				0.	0.	0.
(17) MARCI MCGINNIS	4.00	X		х				0.	0.	0.
NOMINATING CHAIR		Λ		Λ	<u> </u>			<u> </u>	0.	Form <b>990</b> (2021)

132007 12-09-21

Part VII Section A. Officers, Directors, Tru	stees, Key Em	ploy	ees/	, an	d H	ighe	st C	ompensated Employe	es (continued)				
(A)	(B)			(0	C)			(D)	(E)			(F)	
Name and title	Average	(do		Pos		ገ e than	one	Reportable	Reportable		Es	timate	<del>:</del> d
	hours per	box	, unle	ss pe	erson	is bot or/trus	h an	compensation	compensatio			nount	of
	week (list any	Η-	CCI all		Inect	Oi/ ii us	100)	from	from related	- 1		other	
	hours for	irecto						the organization	organization: (W-2/1099-MIS			pensa om th	
	related	e or d	tee			sated		(W-2/1099-MISC/	1099-NEC)			anizat	
	organizations	truste	al trus		ee/	mpen		1099-NEC)	10001120)		•	d relat	
	below	Individual trustee or director	Institutional trustee	_	Key employee	Highest compensated employee	ь					anizati	
	line)	Indivi	Instit	Officer	Key e	Highe	Former						
(18) WENDELL REILLY	4.00												
HEAD AUDIT COMMITTEE		Х		Х				0.		0.			0.
(19) MARK BAILEN	4.00							_		_			_
DIRECTOR		Х						0.		0.			0.
(20) CARRIE BUDOFF BROWN	4.00							_		_			_
DIRECTOR		Х						0.		0.			0.
(21) LAURETTA J. BRUNO	4.00	↓											_
DIRECTOR (FROM 12/2021)	1 00	Х				<u> </u>		0.		0.			0.
(22) DAVID CALLAWAY	4.00	١											^
DIRECTOR	1 00	Х				_		0.		0.			0.
(23) AHMED CHARAI	4.00	١											^
DIRECTOR	1 00	Х				_		0.		0.			0.
(24) DAVID ELLIOT COHEN	4.00	١											^
DIRECTOR	1 00	X			_	_		0.		0.			0.
(25) JOHN DANISZEWSKI	4.00	١,,											^
DIRECTOR	4 00	Х			<u> </u>	-	_	0.		0.			0.
(26) CHRISTINE GLANCEY	4.00	X								_			0
DIRECTOR (UNTIL 1/2021)		Λ					Ļ	0. 1,630,013.		0.	2.2	6,2	<u>0.</u>
1b Subtotal								1,630,013.		0.		0,4	0.
c Total from continuation sheets to Part \								1,630,013.		0.	2.2	6,2	
d Total (add lines 1b and 1c)							<u> </u>			-	44	0,2	14.
2 Total number of individuals (including but	not limited to tr	nose	liste	ed a	bov	e) wi	no re	eceived more than \$100	0,000 of reportable	ie			11
compensation from the organization												Yes	No
3 Did the organization list any <b>former</b> office	director truct				love		, bia	haat aamnanaatad amr	alayaa an	ſ		163	140
3 Did the organization list any <b>former</b> office line 1a? If "Yes," complete Schedule J for											3		Х
4 For any individual listed on line 1a, is the s								or componentian from			_		
and related organizations greater than \$1											4	х	
5 Did any person listed on line 1a receive or										- 1	_		
rendered to the organization? If "Yes," col	•					•	Ciati	ca organization of marv	iddai for 3crviccs		5		Х
Section B. Independent Contractors		J 0 1	J. J.	. 011	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2011							
1 Complete this table for your five highest of	ompensated in	depe	ende	ent o	ont	racto	ors tl	hat received more than	\$100,000 of com	npens	ation f	rom	
the organization. Report compensation fo	-	-								٠٥			
(A)				<u> </u>			Ť	(B)	í I		10	<u>.,</u>	

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation
	FUNDRAISING	
527 MADISON AVE, 5TH FL, NEW YORK, NY 10022	CONSULTANS	336,000.
PSIPHON INC., 583 CHURCH ST, TORONTO,		
ONTARIO, CANADA M4Y 2E4	CONTENT PROMOTION	148,464.
JULIE NICOLE POSETTI-ANGER, 78 GREAT		
CLARENDON ST, OXFORD, UNITED KINGDOM OX 26	SUBCONTRACTOR	120,687.
PHILLIBER RESEARCH & EVALUATION	MONITORING AND	
16 MAIN STREET, ACCORD, NY 12404	EVALUATION CONSULTAN	107,975.

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

SEE PART VII, SECTION A CONTINUATION SHEETS

	I.P CENLER	<u> </u>	·OI	۲ ر	JOt	JRI	(A)	LISTS, INC.	11-272	4905
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A) (B) (C) (D) (E) (F)										
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(cl	neck	all t	that	app	ly)	compensation	compensation	amount of
	per					ao		from the	from related organizations	other
	week (list any	tor				ploye		organization	(W-2/1099-MISC)	compensation from the
	hours for	r director				ed em		(W-2/1099-MISC)	(** 27 1000 *********************************	organization
	related	stee o	nstee			ensat				and related
	organizations	al trus	onal tr		oloyee	comp				organizations
	below line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(OE) DIGWIDD GIVEDIG	4.00	드	드	Б	32	至	요			
(27) RICHARD GINGRAS	4.00	X						0.	0.	0.
DIRECTOR (28) MICHAEL GREENSPON	4.00	^						0.	0.	0.
DIRECTOR	4.00	X						0.	0.	0.
(29) JOHN HEILEMANN	4.00							•	0.	•
DIRECTOR	4.00	x						0.	0.	0.
(30) ALEX S. JONES	4.00		$\vdash$	$\vdash$	$\vdash$	$\vdash$			J.	•
DIRECTOR	4.00	x						0.	0.	0.
(31) BRENT JONES	4.00	<del> </del>							•	
DIRECTOR (FROM 3/2021)		Х						0.	0.	0.
(32) RIK KIRKLAND	4.00									<u> </u>
DIRECTOR		Х						0.	0.	0.
(33) ANNE KORNBLUT	4.00									
DIRECTOR		Х						0.	0.	0.
(34) ISAAC LEE	4.00									
DIRECTOR		Х						0.	0.	0.
(35) JOANNE LEEDOM-ACKERMAN	4.00									
DIRECTOR		Х						0.	0.	0.
(36) MARCI MCCUE	4.00							_	_	_
DIRECTOR		Х						0.	0.	0.
(37) RODMAN MOORHEAD	4.00	l								
DIRECTOR	4 00	Х						0.	0.	0.
(38) ROG REHG	4.00	,,								0
DIRECTOR	4 00	Х						0.	0.	0.
(39) SOPHIE SCHMIDT	4.00	x						0.		0
DIRECTOR (FROM 3/2021)	4.00	^						0.	0.	0.
(40) MARY ANN STERNBERG DIRECTOR	4.00	X						0.	0.	0.
(41) JOHN TOWRISS	4.00	Δ						•	0.	•
DIRECTOR	4.00	X						0.	0.	0.
<u> </u>										•
		1								
		1								
		1								
Total to Part VII, Section A, line 1c										

Pa	rt V	Ш	Statement of Revenue					-
			Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under sections 512 - 514
nts nts	1 :	a	Federated campaigns 1a					
ar oun			Membership dues 1b					
s, G			Fundraising events 1c	1,459,925.				
Contributions, Gifts, Grants and Other Similar Amounts			Related organizations 1d					
			Government grants (contributions) 1e	6,990,436.				
	1	f	All other contributions, gifts, grants, and					
ibe			similar amounts not included above 1f	17,930,734.				
dor	9	g	Noncash contributions included in lines 1a-1f 1g \$					
a C		h	Total. Add lines 1a-1f	▶	26,381,095.			
				Business Code				
<u>e</u>	2 8	а	INFORMATION FEES	900099	119,781.	119,781.		
Program Service Revenue	ı	b	MANAGEMENT FEES	900099	8,605.	8,605.		
n S en	(	С	ADVERTISING	900099	5,949.		5,949.	
Jrar Rev	(	d						
roc	(	е						
ъ			All other program service revenue					
$\overline{}$			Total. Add lines 2a-2f		134,335.			
	3		Investment income (including dividends, interest		101 756			101 756
			other similar amounts)		191,756.			191,756.
	4		Income from investment of tax-exempt bond p					
	5		Royalties	(ii) Personal				
	6	_	Q	(ii) i ersoriai				
			Gross rents 6a 6b					
			Less: rental expenses 6b  Rental income or (loss) 6c					
			Not rental income or (loss)					
			Gross amount from sales of (i) Securities	(ii) Other				
	, ,		assets other than inventory <b>7a</b> 3,931,969.	(1) 5 11 151				
			Less: cost or other basis					
ē			and sales expenses					
Revenue			Gain or (loss) 7c 889,619.					
Re			Net gain or (loss)	<b></b>	889,619.			889,619.
ЭĒ	8 8	а	Gross income from fundraising events (not					
Othe			including \$ 1,459,925. of					
			contributions reported on line 1c). See					
			Part IV, line 18	0.				
	ı		Less: direct expenses 8b	675,328.				
	(	С	Net income or (loss) from fundraising events		-675,328.			-675,328.
	9 ;	а	Gross income from gaming activities. See					
			Part IV, line 199a					
	١	b	Less: direct expenses9b					
	(	С	Net income or (loss) from gaming activities	<b>&gt;</b>				
	10		Gross sales of inventory, less returns					
			and allowances 10a					
			Less: cost of goods sold10b	<u> </u>				
_		С	Net income or (loss) from sales of inventory					
ns				Business Code				
Miscellaneous Revenue	11 :							
la Ven		b						
Re		۳ C	All other revenue					
Σ			All other revenue					
	12		Total Add lines 11a-11d		26,921,477.	128,386.	5,949.	406,047.
	14		Total revenue. See instructions		20,221,411.	120,300.	J, J=3.	_ =00,0=/.

132009 12-09-21

#### Part IX | Statement of Functional Expenses

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

	Check if Schedule O contains a respon		/=:		X
	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	3,651,880.	3,651,880.		
2	Grants and other assistance to domestic	42 455	42 455		
	individuals. See Part IV, line 22	43,477.	43,477.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	0 007 700	0 007 700		
	individuals. See Part IV, lines 15 and 16	8,237,729.	8,237,729.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1 120 125	120 (10	672 006	226 520
	trustees, and key employees	1,139,135.	138,619.	673,986.	326,530
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 050 453	1 400 040	200 776	250 020
7	Other salaries and wages	1,950,453.	1,409,849.	280,776.	259,828
8	Pension plan accruals and contributions (include	02 200	E7 60E	21 520	1/1157
_	section 401(k) and 403(b) employer contributions)	93,380. 795,887.	57,685. 441,095.	21,538.	14,157
9	Other employee benefits				140,923
10	Payroll taxes	295,327.	151,929.	88,144.	55,254
11	Fees for services (nonemployees):				
	Management	26 704	7 014	10 070	
b	Legal	26,784.	7,914.	18,870.	
	Accounting	69,158.	250.	68,908.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17	40 020		40.020	
f	Investment management fees	48,030.		48,030.	
g	Other. (If line 11g amount exceeds 10% of line 25,	2 045 002	2 070 201	24 061	40 651
	column (A), amount, list line 11g expenses on Sch O.)	3,045,903.	2,970,291.	34,961.	40,651.
12	Advertising and promotion	9,282.	3,820.	5,273.	189
13	Office expenses	175,843.	84,299.	79,693.	11,851
14	Information technology	289,628.	199,394.	90,190.	44.
15	Royalties	400 726		400 726	
16	Occupancy	490,736.	4 650	490,736.	2 440
17	Travel	15,260.	4,652.	8,160.	2,448.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	16 072	0 554	7 224	0.4
19	Conferences, conventions, and meetings	16,872.	9,554.	7,224.	94.
20	Interest				
21	Payments to affiliates	43,363.		43,363.	
22	Depreciation, depletion, and amortization	49,993.	2,978.	47,015.	
23	Other eveness Itamize eveness not severed	43,333.	4,310.	#1,U1J•	
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 0.) SUBSCRIPTIONS & DUES	63,977.	34,322.	28,648.	1,007.
a	PER DIEMS	42,377.	42,377.	20,040.	Ι,007
b	PAYROLL PROCESSING	15,938.	44,311.	15,938.	
C	MAINTENANCE & REPAIRS	2,682.		2,682.	
a	·	32,060.	691.	31,367.	2.
	All other expenses	20,645,154.	17,492,805.	2,299,371.	852,978
25	Total functional expenses. Add lines 1 through 24e	20,04J,1J4•	11, <del>1</del> 34,003•	4,499,311.	034,310
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Earm <b>990</b> (2021

#### Part X | Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to a	ny line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			3,630,538.	1	10,240,162
	2				7,060,060.	2	7,162,346
	3	Pledges and grants receivable, net			16,512,553.	3	15,784,729
	4	Accounts receivable, net			324,713.	4	157,965
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of these persons				5	
	6	Loans and other receivables from other disqu	ualified pe	ersons (as defined			
		under section 4958(f)(1)), and persons descri	bed in se	ction 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
₹	9	Prepaid expenses and deferred charges			133,998.	9	143,401
	10a	Land, buildings, and equipment: cost or other	er				
		basis. Complete Part VI of Schedule D	10a	540,223.			
	b	Less: accumulated depreciation	10b	212,156.	306,005.	10c	328,067
	11	Investments - publicly traded securities			7,688,428.	11	7,893,613
	12	Investments - other securities. See Part IV, lir	ne 11			12	
	13	Investments - program-related. See Part IV, li	ne 11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11	0.	15	4,609,794		
	16	Total assets. Add lines 1 through 15 (must e	qual line	33)	35,656,295.	16	46,320,077
	17	Accounts payable and accrued expenses			825,783.	17	974,148
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
ies	22	Loans and other payables to any current or f					
≝		trustee, key employee, creator or founder, su					
Liabilities		controlled entity or family member of any of t				22	
_	23	Secured mortgages and notes payable to un		F		23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on li	nes 17-24	i). Complete Part X	0.	25	5,106,472
	06	of Schedule D			825,783.	26	6,080,620
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, 6			025,705	20	0,000,020
es		and complete lines 27, 28, 32, and 33.	SHECK HE	ie 🖊 🔼			
auc	27				4,347,162.	27	4,195,717
Bali	28	Net assets with donor restrictions			30,483,350.	28	36,043,740
힏	20	Organizations that do not follow FASB AS			30, 200, 300		30,010,110
Ŀ		and complete lines 29 through 33.	000, 01				
ŏ	29	Capital stock or trust principal, or current fun	ıds	ľ		29	
sets	30	Paid-in or capital surplus, or land, building, or				30	
As	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances		F	34,830,512.	32	40,239,457
_	33	Total liabilities and net assets/fund balances			35,656,295.	33	46,320,077

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	26,9		
2	Total expenses (must equal Part IX, column (A), line 25)	2	20,6		
3	Revenue less expenses. Subtract line 2 from line 1	3			323.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	34,8	30,	<u>512.</u>
5	Net unrealized gains (losses) on investments	5	_	78,	568.
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 on Schedule O)	9	-7	88,	810.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	40,2	39,	457.
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: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.	_		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	а	X
	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?		2	b X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat				
	consolidated basis, or both:				
	X 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?		2	c X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
	Act and OMB Circular A-133?	-	3	a X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3	b X	
				rm <b>99</b> 0	(2021)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

#### **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization THE INT'L CENTER FOR JOURNALISTS, 11-2724905 TNC Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

#### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support	7.1		,			
	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and	, ,	,	. ,	,	,	( )
	membership fees received. (Do not						
	include any "unusual grants.")	6,810,837.	17,695,413.	21,495,185.	24,753,679.	26,381,095.	97,136,209.
2	Tax revenues levied for the organ-						_
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	6,810,837.	17,695,413.	21,495,185.	24,753,679.	26,381,095.	97,136,209.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						37,141,295.
	Public support. Subtract line 5 from line 4.						59,994,914.
	ction B. Total Support	1			·	1	
	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	6,810,837.	17,695,413.	21,495,185.	24,753,679.	26,381,095.	97,136,209.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	146,746.	168,699.	101 270	136,149.	191,756.	837,728.
_	and income from similar sources	140,740.	100,099.	134,370.	130,149.	191,750.	031,120.
9	Net income from unrelated business						
	activities, whether or not the					0.	
40	business is regularly carried on					0.	
10	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)	6,615.	12,373.	55,223.	-3,300.		70,911.
11	Total support. Add lines 7 through 10	0,0131	12/3/31	3372231	373001		98,044,848.
12		etc (see instructi	one)			12	484,788.
	First 5 years. If the Form 990 is for the			fourth or fifth tax			10177001
	organization, check this box and stor			•	•	. , . ,	▶□
Sec	etion C. Computation of Publ		rcentage				
	Public support percentage for 2021 (			column (f))		14	61.19 %
	Public support percentage from 2020					15	70.55 %
	33 1/3% support test - 2021. If the					nore, check this bo	
	stop here. The organization qualifies	•		•		•	
b	33 1/3% support test - 2020. If the						
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			<b></b> ▶□
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact	-					
	meets the facts-and-circumstances to						
b	10% -facts-and-circumstances tes	t - 2020. If the org	anization did not c	check a box on line			
	more, and if the organization meets the	he facts-and-circur	nstances test, che	ck this box and <b>st</b>	op here. Explain i	n Part VI how the	
	organization meets the facts-and-circ	umstances test. Tl	ne organization qu	alifies as a publicly	y supported organ	ization	▶□
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	ınd see instruction	s ▶□

Schedule A (Form 990) 2021

#### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support		,				
Cale	endar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	, ,	, ,	, ,			
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for the	ne organization's fi	rst. second. third.	fourth, or fifth tax	vear as a section	501(c)(3) organizat	ion.
	check this box and <b>stop here</b>	-			•		
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2021 (I			column (f))		15	%
16						16	%
	ction D. Computation of Inves					1 1	70
	Investment income percentage for 20			ne 13 column (f))		17	%
18	Investment income percentage from 2					18	<del>//</del>
	a 33 1/3% support tests - 2021. If the						
130	more than 33 1/3%, check this box a						
ı	33 1/3% support tests - 2020. If the						
,	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						
20	ato roundation. II the organizatio	ii aia noi oneon a	DOA OIT III IC 14, 19	u, or rob, crieck li	IN DOT ALIC SEE ILI		<u> </u>

#### Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in* **Part VI.**
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
За		
3b		
3с		
40		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
Ja		
9b		
9с		
10a		
10h		
10b		

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

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	emergency temporary reduction (see instructions).	6		
'	Check here if the current year is the organization's first as a non-functional	lly integ	rated Type III supporting orga	anization (see
	instructions).			

Schedule A (Form 990) 2021

2

3 4

5

Enter 0.85 of line 1.

Enter greater of line 2 or line 3.

Income tax imposed in prior year

Minimum asset amount for prior year (from Section B, line 8, column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

<u></u>	Line of amount divided by line 9 amount		. 10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2021			
а	From 2016			
b	From 2017			
С	From 2018			
d	From 2019			
е	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
i	Carryover from 2016 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2017			
b	Excess from 2018			
c	Excess from 2019			
d	Excess from 2020			
<u>e</u>	Excess from 2021			

Schedule A (Form 990) 2021

13311114 745960 09506

# Schedule B (Form 990)

#### **Schedule of Contributors**

► Attach to Form 990 or Form 990-PF.

OMB No. 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

**202**1

TH	HE INT'L CENTER FOR JOURNALISTS, INC.	11-2724905				
Organization type (check of	one):					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)( 3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
,	is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.				
General Rule						
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II. See instructions for determining a contributor's					
Special Rules						
sections 509(a)(1) contributor, during	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, an g the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) FZ, line 1. Complete Parts I and II.	d that received from any one				
contributor, during literary, or educati	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
year, contributions is checked, enter purpose. Don't co	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year   \$\bigs\\$					
answer "No" on Part IV, line	hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fe 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, and requirements of Schedule B (Form 990).	**				

 $\ \, \text{LHA} \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

Schedule B (Form 990) (2021)

Name of organization Employer identification number

#### THE INT'L CENTER FOR JOURNALISTS, INC.

11-2724905

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>15,694,699.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 3,545,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 1,042,856.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Name, audi ess, and Zir + 4	\$ 1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 740,741.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$661,839.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)

Name of organization Employer identification number

#### THE INT'L CENTER FOR JOURNALISTS, INC.

11-2724905

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Name of organization **Employer identification number** THE INT'L CENTER FOR JOURNALISTS, INC. 11-2724905 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. `fŕom Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE INT'L CENTER FOR JOURNALISTS, INC.

**Employer identification number** 11-2724905

Pai	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		Similar Funds	or Accounts. Complete if the
		(a) Donor advise	ed funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in		eld in donor advise	d funds
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for a	ny other purpose c	onferring
	impermissible private benefit?			Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Ye	s" on Form 990, Pa	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that ap <u>ply)</u>		
	Preservation of land for public use (for example, recrea	ation or education)	Preservation of a	historically important land area
	Protection of natural habitat		☐ Preservation of a	certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contrib	oution in the form of	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			
b	Total acreage restricted by conservation easements			T T T T T T T T T T T T T T T T T T T
	Number of conservation easements on a certified historic str			
d	Number of conservation easements included in (c) acquired			
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or	terminated by the	organization during the tax
_	year ▶			
4	Number of states where property subject to conservation ea			
5	Does the organization have a written policy regarding the per			□, □.,
	violations, and enforcement of the conservation easements i			
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, a	na enforcing conse	ervation easements during the year
7	Amount of avanages incurred in monitoring inspecting hard	dling of violations, and a	oforoing concentati	on accompate during the year
7	Amount of expenses incurred in monitoring, inspecting, hand > \$	aling of violations, and er	norcing conservation	on easements during the year
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requiremen	nts of section 170/h	)////R)/i)
Ü	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservati			
•	balance sheet, and include, if applicable, the text of the footi		· ·	
	organization's accounting for conservation easements.	Tota ta tha arganization		no triat describes trie
Pai	t III Organizations Maintaining Collections o	f Art, Historical Tr	easures, or Oth	her Similar Assets.
	Complete if the organization answered "Yes" on Form	•	•	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its rev	renue statement an	d balance sheet works
	of art, historical treasures, or other similar assets held for pul	•		
	service, provide in Part XIII the text of the footnote to its final	•	•	•
b	If the organization elected, as permitted under FASB ASC 95			
	art, historical treasures, or other similar assets held for public	· ·		
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			<b>&gt;</b> \$
				<b>L</b> 4
2	If the organization received or held works of art, historical tre			
	the following amounts required to be reported under FASB A			
а	Revenue included on Form 990, Part VIII, line 1	-		<b>&gt;</b> \$
b	Assets included in Form 990, Part X			

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

Schedule D (Form 990) 2021

#### Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value	
1a Land					
<b>b</b> Buildings					
c Leasehold improvements		343,708.	31,338.	312,370.	
<b>d</b> Equipment		108,226.	108,226.	0.	
e Other		88,289.	72,592.	15,697.	
Total. Add lines 1a through 1e. (Column (d) must equa	328,067.				

Schedule D (Form 990) 2021

	CENTER FOR JOU	RNALISTS, INC. 11	-2724905 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"		<u> </u>	d - <b>f</b>
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.	" F 000 B 1 B 1 B	44 O E 000 B 1 V II 40	
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes'		11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1) RIGHT OF USE ASSET			4,609,794
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lir	ne 15.)	·····	4,609,794
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	j.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) OPERATING LEASE LIABILITY	[		5,106,472
(3)			
(4)			
(5)			
(6)			

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

Schedule D (Form 990) 2021

5,106,472.

(7) (8)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

### 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information.

3 Subtract line 2e from line 1

a Investment expenses not included on Form 990, Part VIII, line 7b
 b Other (Describe in Part XIII.)

4 Amounts included on Form 990, Part IX, line 25, but not on line 1:

c Add lines 4a and 4b

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

#### PART V, LINE 4:

FUNDS RELEASED FROM THE ENDOWMENT FUND ARE USED FOR ICFJ'S OPERATIONS,
SUPPORT OF THE FANNING VISITOR CENTER, AND IJNET PROGRAMMING.

#### PART X, LINE 2:

FOR THE YEARS ENDED DECEMBER 31, 2021 AND 2020, ICFJ HAS DOCUMENTED ITS

CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR

REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO MATERIAL

UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN

THE FINANCIAL STATEMENTS.

#### PART XI, LINE 2D - OTHER ADJUSTMENTS:

20,597,124.

20,645,154.

48,030.

48,030.

#### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

#### **Statement of Activities Outside the United States**

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

Attach to Form 990.

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

2021
Open to Public Inspection

Name of the organization

**Employer identification number** 

				JOURNALISTS,		11-2724905
Part	I Gen	eral Inform	ation	on Activities Outside	e the United States. Complete if the organ	nization answered "Yes" on
	Form	990, Part IV, li	ne 14b.			

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? \_\_\_\_\_X Yes \_\_\_\_\_No

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

United States.					
			an be duplicated if additional space is i		1
(a) Region	(b) Number of	(c) Number of employees,	1	1 ''	(f) Total expenditures
	offices	agents, and	(by type) (such as, fundraising, pro-	is a program service,	for and
	in the region	independent contractors	gram services, investments, grants to recipients located in the region)	describe specific type of service(s) in the region	investments
		in the region	recipients located in the region)	or service(s) in the region	in the region
CENTRAL AMERICA AND				TRAINING AND NETWORK	
THE CARIBBEAN	0	54	PROGRAM SERVICES	BUILDING	120,489.
CENTRAL AMERICA AND			GRANTS TO RECIPIENTS		
THE CARIBBEAN	0	0	LOCATED IN THE REGION		345,819.
CENTRAL AMERICA AND					5 000
THE CARIBBEAN	0	0	MANAGEMENT AND R&D		6,999.
EAST ASIA AND THE				TRAINING AND NETWORK	
PACIFIC	0	33	PROGRAM SERVICES	BUILDING	124,686.
EAST ASIA AND THE			GRANTS TO RECIPIENTS		
PACIFIC	0	0	LOCATED IN THE REGION		773,642.
				TRAINING AND NETWORK	
EUROPE	0	58	PROGRAM SERVICES	BUILDING	474,894.
			GRANTS TO RECIPIENTS		
EUROPE	0	0	LOCATED IN THE REGION		4,289,014.
TUDODE			MANAGENERAL AND DOD		E4 242
EUROPE	0	_	MANAGEMENT AND R&D		71,342.
<b>3 a</b> Subtotal <b>b</b> Total from continuation		145			6,206,885.
sheets to Part I		258			4,678,933.
c Totals (add lines 3a					1
and 3b)	0	403			10,885,818.

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

Schedule F (Form 990) 2021

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3) (c) Number of (f) Total (a) Region (b) Number of (d) Activities conducted in region (e) If activity listed in (d) offices employees or (by type) (i.e., fundraising, is a program service, expenditures in the region describe specific type for region agents in program services, grants to of service(s) in region recipients located in the region) region EUROPE 0 FUNDRAISING 9,695. MIDDLE EAST AND TRAINING AND NETWORK NORTH AFRICA 22 PROGRAM SERVICES BUILDING 172,962. MIDDLE EAST AND GRANTS TO RECIPIENTS NORTH AFRICA 0 LOCATED IN THE REGION 118,533. MIDDLE EAST AND NORTH AFRICA MANAGEMENT AND R&D 91. 0 MIDDLE EAST AND FUNDRAISING NORTH AFRICA 0 14. TRAINING AND NETWORK BUILDING NORTH AMERICA 83 PROGRAM SERVICES 731,962. GRANTS TO RECIPIENTS NORTH AMERICA LOCATED IN THE REGION 503,137. NORTH AMERICA 0 MANAGEMENT AND R&D 2,053. RUSSIA AND TRAINING AND NETWORK PROGRAM SERVICES NEIGHBORING STATES BUILDING 3 71,959. RUSSIA AND GRANTS TO RECIPIENTS NEIGHBORING STATES LOCATED IN THE REGION 0 3,000. **Totals** 

(a) Region	(b) Number of	(c) Number of	n. (Schedule F (Form 990), Part I, line 3 (d) Activities conducted in region	(e) If activity listed in (d)	(f) Total
(a) Hogion	offices	employees or	(by type) (i.e., fundraising,	is a program service,	expenditures
	in the region	agents in	program services, grants to	describe specific type	for region
		region	recipients located in the region)	of service(s) in region	
				TRAINING AND NETWORK	
SOUTH AMERICA	0	94	PROGRAM SERVICES	BUILDING	599,443
			GRANTS TO RECIPIENTS		
SOUTH AMERICA	0	0	LOCATED IN THE REGION		1,479,941.
SOUTH AMERICA	0	0	MANAGEMENT AND R&D		168.
SOUTH AMERICA	0	0	FUNDRAISING		8,504.
SOUTH ASIA	0	6	PROGRAM SERVICES	TRAINING AND NETWORK BUILDING	76,052
BOOTH ASIA	, v		I KOGKAM BEKVICES	BUILDING	70,032.
			GRANTS TO RECIPIENTS		
SOUTH ASIA	0	0	LOCATED IN THE REGION		172,141.
				TRAINING AND NETWORK	
SUB-SAHARAN AFRICA	0	50	PROGRAM SERVICES	BUILDING	176,776.
			GRANTS TO RECIPIENTS		
SUB-SAHARAN AFRICA	0	0	LOCATED IN THE REGION		552,502
Totals	<b>&gt;</b>	258			4,678,933

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		CENTRAL AMERICA						
		AND THE CARIBBEAN	OPEN DATA	29,749.	WIRE TRANSFER	0.		
		CENTRAL AMERICA						
			CUBA MEDIA	48,147.	WIRE TRANSFER	0.		
				· ·				
		CENTRAL AMERICA	EEL LONGUED	22 565	MIDE MDANGEED	0.		
		AND THE CARIBBEAN	FELLOWSHIP	22,565.	WIRE TRANSFER	0.		
		CENTRAL AMERICA	GLOBAL NEWS					
		AND THE CARIBBEAN	ACCELERATORS	93,500.	WIRE TRANSFER	0.		
		CENTRAL AMERICA	GLOBAL NEWS					
			ACCELERATORS	16,600.	WIRE TRANSFER	0.		
				,				
		CENTRAL AMERICA		25.205				
		AND THE CARIBBEAN	NICARAGUA 2020	37,307.	WIRE TRANSFER	0.		
		CENTRAL AMERICA	INVESTIGATIVE					
		AND THE CARIBBEAN	JOURNALISM	17,554.	WIRE TRANSFER	0.		
		EAST ASIA AND THE	GLOBAL NEWS					
			ACCELERATORS	10 000	WIRE TRANSFER	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter \_\_\_\_\_\_\_\_

3 Enter total number of other organizations or entities

15 108

Schedule F (Form 990) 2021

	F (FOIII 990)			TON GOOMMALDID			24703		Page Z
Part II	Continuation of	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Nam	ne of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EAST ASIA AND THE						
			PACIFIC	ACCELERATORS	25,000.	WIRE TRANSFER	0.		
			EAST ASIA AND THE	GLOBAL NEWS					
			PACIFIC	ACCELERATORS	24.788.	WIRE TRANSFER	0.		
			EAST ASIA AND THE	GLOBAL NEWS					
			PACIFIC	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			EAST ASIA AND THE	GLODAL MEMG					
			PACIFIC	ACCELERATORS	10 000	WIRE TRANSFER	0.		
			FACIFIC	ACCEDERATORS	10,000.	WIRE TRANSFER	0.		
			EAST ASIA AND THE	GLOBAL NEWS					
			PACIFIC	ACCELERATORS	9,600.	WIRE TRANSFER	0.		
			EAST ASIA AND THE		10.000	l			
			PACIFIC	ACCELERATORS	10,000.	WIRE TRANSFER	0.		
			EAST ASIA AND THE	GLOBAL NEWS					
			PACIFIC	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
					<u> </u>				1
			EAST ASIA AND THE						
			PACIFIC	ACCELERATORS	15,000.	WIRE TRANSFER	0.		
			EAST ASIA AND THE	CIORAI NEWS					
			PACIFIC	ACCELERATORS	15 000	WIRE TRANSFER	0.		
			F	LICCHILITIONS	15,000.	LITTLE TRANSFER	٠.		

scriedule F (Form 990)			TON GOOMMALIDID			24703		Page A
Part II Continuation of	of Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FN
	(		grant	or easir grain	odori diobaroomoria	assistance	assistance	appraisal, other)
		EAST ASIA AND THE				_		
		PACIFIC	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
		EXCM ACTA AND MUE	CIODAI NEWS					
		EAST ASIA AND THE PACIFIC	ACCELERATORS	50 000	WIRE TRANSFER	0.		
		FACIFIC	ACCEDERATORS	30,000.	WIKE IKANSPEK	· ·		
		EAST ASIA AND THE	GLOBAL NEWS					
		PACIFIC	ACCELERATORS	15,000.	WIRE TRANSFER	0.		
				,				
		EAST ASIA AND THE						
		PACIFIC	INOVATION	25,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	INOVATION	25,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	ACCELERATORS	15,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE	CIODAI NEWS					
		PACIFIC	ACCELERATORS	50 000	WIRE TRANSFER	0.		
		FACIFIC	ACCEDERATORS	30,000.	WIKE IKANSPEK	· ·		
		EAST ASIA AND THE	GLOBAL NEWS					
		PACIFIC	ACCELERATORS	25.000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE	GLOBAL NEWS					
		PACIFIC	ACCELERATORS	15,000.	WIRE TRANSFER	0.		

Scriedule F (FOITH 990)			TON GOOMMALIBID			24703		Page A
Part II Continuation of	of Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash	(h) Description of non-cash	(i) Method of valuation (book, FM
	and Env (ii applicable)		grant	or casir grant	Casif disbursement	assistance	assistance	appraisal, other)
		EAST ASIA AND THE						
		PACIFIC	VIDIO ACCELERATOR	15,000.	WIRE TRANSFER	0.		
		L						
		EAST ASIA AND THE		F0 000	MIDE MDANGEED			
		PACIFIC	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE	GLOBAL NEWS					
		PACIFIC PACIFIC	ACCELERATORS	15 000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	VIDIO ACCELERATOR	15,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	VIDIO ACCELERATOR	15,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS	50.000				
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	25 000	WIRE TRANSFER	0.		
		Bottoria	I COLDENITORS	23,000.	WIND THUMBI DIC	· ·		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	60,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	60,000.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 99 (a) Name of organization)  (b) IRS code section and EIN (if applicable)  (c) Region grant  (d) Purpose of grant of cash grant  (e) Amount of cash grant cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash	(i) Method of
(a) Name of organization (b) IRS code section (c) Region (d) Purpose of (e) Amount (f) Manner of (f) Manner of (f)	non-cash		(i) Method of
		assistance	valuation (book, FM\ appraisal, other)
arony yeria			
GLOBAL NEWS EUROPE ACCELERATORS 60,000.WIRE TRANSFER	0.		
BORGE RECEMBRATORS 00,000, MIRE TRANSFER	٠.		
GLOBAL NEWS			
EUROPE ACCELERATORS 60,000.WIRE TRANSFER	0.		
GLOBAL NEWS			
EUROPE ACCELERATORS 60,000.WIRE TRANSFER	0.		
GLOBAL NEWS EUROPE ACCELERATORS 60,000.WIRE TRANSFER	0.		
EUROPE ACCELERATORS 00,000.WIRE TRANSFER	0.		
EUROPE DIGITAL INNOVATION 1,755,800.WIRE TRANSFER	0.		
GLOBAL NEWS			
EUROPE ACCELERATORS 50,000.WIRE TRANSFER	0.		
GLOBAL NEWS EUROPE ACCELERATORS 15,000.WIRE TRANSFER	0.		
EUROPE ACCELERATORS 15,000,WIRE TRANSFER	0.		
GLOBAL NEWS			
EUROPE ACCELERATORS 50,000.WIRE TRANSFER	0.		
GLOBAL NEWS			
EUROPE ACCELERATORS 25,000 WIRE TRANSFER	0.		

Scriedule F (Form 990)			TON COCKIMILIBIE			24703		Page 2
Part II Continuation of	of Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	(b) IRS code section	(c) Region	(d) Purpose of	(e) Amount	(f) Manner of	(g) Amount of non-cash	(h) Description of non-cash	(i) Method of valuation (book, FM
	and EIN (if applicable)		grant	of cash grant	cash disbursement	assistance	assistance	appraisal, other)
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50 000	WIRE TRANSFER	0.		
		BOROTE	песывынтокь	30,000.	WIRE INTRODUCTION	· ·		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS	F0 000	TITLE MEANGEER			
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50 000.	WIRE TRANSFER	0.		
				,				
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
		ELIDODE	GLOBAL NEWS	F0 000	WIDE MDANGERS			
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		

Part II Continuation of			ations or Entities Outside the			24903	1)	Page 2
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(a) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM\ appraisal, other)
			OLODAL MEMO					
		EUROPE	GLOBAL NEWS ACCELERATORS	50 000.	WIRE TRANSFER	0.		
		THE OPE	GLOBAL NEWS	F0 000	TITLE MEANGEER			
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		+
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
				,				
		EUROPE	GLOBAL NEWS ACCELERATORS	50 000	WIRE TRANSFER	0.		
		EURUFE	ACCEDERATORS	30,000.	WIKE IKANSPEK	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		

Scriedule F (FOITT 990)			TON GOOMMADIDID			24703		Page A
Part II   Continuation of	of Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	(b) IRS code section		(d) Purpose of	(e) Amount	(f) Manner of	(g) Amount of non-cash	(h) Description of non-cash	(i) Method of valuation (book, FM
-	and EIN (if applicable)		grant	of cash grant	cash disbursement	assistance	assistance	appraisal, other)
		EUROPE	DISINFORMATION	140,392.	WIRE TRANSFER	0.		
		EUROPE	URASIA DRL	40 924	WIRE TRANSFER	0.		
		EUROFE	ORASIA DEL	40,324.	WIRE TRANSFER	0.		
			GENDER BASED ONLINE					
		EUROPE	VIOLENCE	65,055.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	60 000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	60,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS	60.000				
		EUROPE	ACCELERATORS	60,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	60,000.	WIRE TRANSFER	0.		
				, ,				
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		

Part II Continuation of			ations or Entities Outside the			24903	1)	Page 2
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(a) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM\ appraisal, other)
			OLODAL MEMO					
		EUROPE	GLOBAL NEWS ACCELERATORS	50 000.	WIRE TRANSFER	0.		
		EUROPE	GLOBAL NEWS ACCELERATORS	E0 000	WIRE TRANSFER	0.		
		EURUPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	40,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	25,000.	WIRE TRANSFER	0.		
			GLODAL MUNG					
		EUROPE	GLOBAL NEWS ACCELERATORS	24 910.	WIRE TRANSFER	0.		
		EUROPE	GLOBAL NEWS	15 000	WIDE MDANGEED	_		
		FOROPE	ACCELERATORS	15,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		

	e F (Form 990)			FOR UCURNALISIS		11-27			Page 2
Part II	Continuation o	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	)	
1 (a) Nam	ne of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
				GLOBAL NEWS ACCELERATORS	50 000	WIRE TRANSFER	0.		
			EGROT E	ACCEDERATORS	30,000.	WIKE IKANSPEK	0.		
				GLOBAL NEWS					
			EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
				GLOBAL NEWS					
			EUROPE	ACCELERATORS	50,000.	WIRE TRANSFER	0.		
				GLOBAL NEWS					
				ACCELERATORS	50 000.	WIRE TRANSFER	0.		
				GLOBAL NEWS					
			NORTH AMERICA	ACCELERATORS	21,900.	WIRE TRANSFER	0.		
				GLOBAL NEWS					
			NORTH AMERICA	ACCELERATORS	25,000.	WIRE TRANSFER	0.		
			NORTH AMERICA -						
			CANADA AND	GLOBAL NEWS					
			l '	ACCELERATORS	25 000.	WIRE TRANSFER	0.		
				GLOBAL NEWS					
			NORTH AMERICA	ACCELERATORS	25,000.	WIRE TRANSFER	0.		
				GLOBAL NEWS					
			NORTH AMERICA	ACCELERATORS	17,000.	WIRE TRANSFER	0.		

Scriedule F (Form 990)		THE D CHITTER	TON GOOMMADIDID	, 1110.		24703		Page 2
Part II Continuation of	of Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM\ appraisal, other)
		NORTH AMERICA	GLOBAL NEWS ACCELERATORS	20 498.	WIRE TRANSFER	0.		
		NORTH AMERICA	GLOBAL NEWS ACCELERATORS	25 000	WIRE TRANSFER	0.		
		NORTH AMERICA	DATA LITERACY	16 600	WIRE TRANSFER	0.		
				20,000.				
		NORTH AMERICA	DATA LITERACY	16 600	WIRE TRANSFER	0.		
				10,000.	WIND THUMBER			
		NORTH AMERICA	DATA LITERACY	16 600	WIRE TRANSFER	0.		
		NORTH TENDRICH	Dilli Bilbinet	10,000.	WIRD TRUMBLER	٠.		
		NORTH AMERICA	DATA LITERACY	16 600	WIRE TRANSFER	0.		
		NORTH AMERICA	DATA BITBRACT	10,000.	WIRE TRANSPER	0.		
		NORTH AMERICA	BORDER REPORTING	00 050	WIRE TRANSFER	0.		
		NORTH AMERICA	BORDER REPORTING	00,059.	WIRE TRANSFER	0.		
		NODELL AMERICA	TIMENAME	16.000	WIDE MDANGERS			
		NORTH AMERICA	LUMINATE	16,000.	WIRE TRANSFER	0.		
						_		
		SOUTH AMERICA	LUMINATE	73,000.	WIRE TRANSFER	0.		

Scriedule F (Form 990)		2112 2 02111211	TOR GOORWANDIDID	, ==:0:				Page 2
Part II Continuation of	of Grants and Other	Assistance to Organization	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	(i) Method of valuation (book, FM) appraisal, other)
		SOUTH AMERICA	FB ACCELERATOR	10,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	ADEPA	10,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DATA LITERACY	16,600.	WIRE TRANSFER	0.		
		SOUTH AMERICA	ADEPA	8,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DATA LITERACY	16,600.	WIRE TRANSFER	0.		
		SOUTH AMERICA	ADEPA	20,000.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		SOUTH AMERICA	ACCELERATORS	16,600.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GLOBAL NEWS ACCELERATORS	25 000	WIRE TRANSFER	0.		
		South Implica	TO SEE THE PERSON OF THE PERSO	25,000.	TRANSFER	0.		
		SOUTH AMERICA	DATA LITERACY	16,600.	WIRE TRANSFER	0.		

	F (FOIIII 990)			TON GOOMMADIDID			24703		Page Z
Part II	Continuation of	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Nam	e of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
				GLOBAL NEWS					
				ACCELERATORS	20,000.	WIRE TRANSFER	0.		
					,				
				GLODAL MENG					
				GLOBAL NEWS ACCELERATORS	21,700.	WIRE TRANSFER	0.		
					, .				
				ar anns 11771					
				GLOBAL NEWS ACCELERATORS	72 000.	WIRE TRANSFER	0.		
					,				
				GLOBAL NEWS ACCELERATORS	10 000	WIRE TRANSFER	0.		
					20,000.				
				GLOBAL NEWS ACCELERATORS	73 400	WIRE TRANSFER	0.		
			BOOTH MADRIES	песынитоко	73,400.	WIRD TRINGFER			
			SOUTH AMERICA	PROSAFE	13 000	WIRE TRANSFER	0.		
			DOUTH AMERICA	RODAFE	13,500.	WIRE TRANSPER	0.		
			SOUTH AMERICA	PROSAFE	16 600	WIRE TRANSFER	0.		
			SOUTH AMERICA	PROSAFE	10,000.	WIRE TRANSFER	0.		
			COLUMN AMEDICA	DDOGAEE	240 645	WIDE MDANGERS			
			SOUTH AMERICA	PROSAFE	249,645.	WIRE TRANSFER	0.		
			COLUMN AMERICA	DIGITAL INNOVANIAN	120 164	WIDE MDANGERS			
			SOUTH AMERICA	DIGITAL INNOVATION	132,164.	WIRE TRANSFER	0.		

scriedule F (Form 990)			TON GOOMMADIDID			24703		Page 4
Part II Continuation of	f Grants and Other	Assistance to Organization	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		SOUTH AMERICA	PROSAFE	16,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DATA LITERACY	22,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DATA LITERACY	16,600.	WIRE TRANSFER	0.		
			GLOBAL NEWS					
		SOUTH AMERICA	ACCELERATORS	80,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	LUMINATE	44,800.	WIRE TRANSFER	0.		
			INVESTIGATIVE					
		SOUTH ASIA	JOURNALISM	15,611.	WIRE TRANSFER	0.		
			GLOBAL NEWS			_		
		SOUTH ASIA	ACCELERATORS	15,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GLOBAL NEWS ACCELERATORS	50 000	WIRE TRANSFER	0.		
		Poorin mora	TO CHE LINE TO THE COLUMN THE COLUMN TO THE	30,000.	TRANSFER	· ·		
		SUB-SAHARAN AFRICA	RELIGIOUS FREEDOM	160 697.	WIRE TRANSFER	0.		

Schedule	e F (Form 990)	THE I	NT L CENTER	FOR JOURNALISTS	, INC.	11-27	<u> </u>		Page 2
Part II	Continuation o	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Nan	me of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUB-SAHARAN						
				RELIGIOUS FREEDOM	99,342.	WIRE TRANSFER	0.		
			SUB-SAHARAN						
				DISINFORMATION	12,248.	WIRE TRANSFER	0.		
			SUB-SAHARAN						
				RELIGIOUS FREEDOM	32,591.	WIRE TRANSFER	0.		
			SUB-SAHARAN						
				DISINFORMATION	21,452.	WIRE TRANSFER	0.		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if	additional space is neede	d.					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
KNIGHT FELLOWSHIP (FEE AND							
EXPENSES)	EUROPE	1	12,813.	WIRE TRANSFER	0.		
KNIGHT FELLOWSHIP (FEE AND	MIDDLE EAST AND						
EXPENSES)	NORTH AFRICA	1	82,505.	WIRE TRANSFER	0.		
KNIGHT FELLOWSHIP (FEE AND							
EXPENSES)	SOUTH AMERICA	7	219,222.	WIRE TRANSFER	0.		
KNIGHT FELLOWSHIP (FEE AND							
EXPENSES)	SOUTH ASIA	2	151,333.	WIRE TRANSFER	0.		
KNIGHT FELLOWSHIP (FEE AND	SUB-SAHARAN						
EXPENSES)	AFRICA	4	139,359.	WIRE TRANSFER	0.		
	EAST ASIA AND THE						
GRANTS/AWARDS	PACIFIC	1	10,000.	WIRE TRANSFER	0.		
	CENTRAL AMERICA						
GRANTS/AWARDS	AND THE CARIBBEAN	1	10,000.	WIRE TRANSFER	0.		
	MIDDLE EAST AND						
GRANTS/AWARDS	NORTH AFRICA	1	6,000.	WIRE TRANSFER	0.		
GRANTS/AWARDS	NORTH AMERICA	6	39,105.	WIRE TRANSFER	0.		

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash	(g) Description of non-cash assistance	(h) Method of valuation
		recipients	Casii giaiit	Cash disbursement	assistance	Horreastr assistance	(h) Method of valuation (book, FMV, appraisal, other)
GRANTS/AWARDS	SOUTH AMERICA	6	89,535.	WIRE TRANSFER	0.		
	SUB-SAHARAN						
GRANTS/AWARDS	AFRICA	5	41,999.	WIRE TRANSFER	0.		

Page 4

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	X Yes	☐ No

Schedule F (Form 990) 2021

#### Schedule F (Form 990) 2021 Part V | Supplemental Information

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

PART	I,	${ t LINE}$	2 :
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FELLOWS GO THROUGH A RIGOROUS INTERVIEW PROCESS BEFORE BEING AWARDED A FELLOWSHIP. FELLOWS ARE REQUIRED TO SIGN AND ADHERE TO A FELLOWSHIP AGREEMENT THAT DETAILS THE REQUIRED PROGRAM ACTIVITES AND PROGRAM AND FINANCIAL REPORTS. FELLOWS ARE ASSIGNED TO A PROGRAM DIRECTOR WHO MANAGES THE OVERALL FELLOWSHIP. RECORDS ARE MAINTAINED ON EACH FELLOW.

ORGANIZATIONS RECEIVING GRANT AWARDS ARE SELECTED BY ICFJ PROGRAM

DIRECTORS IN CONSULTATION WITH SENIOR MANAGEMENT. ORGANIZATONS ARE SELECTED BASED ON THEIR ABILITY TO PERFORM THE PROGRAM ACTIVITIES, FINANCIAL STRUCTURE AND/OR PRIME DONOR'S RECOMMENDATION. THE GRANT RECIPIENTS ARE REQUIRED TO SIGN AND ADHERE TO A GRANT AGREEMENT AND SUBMIT AUDITED REPORTS WHEN AVAILABLE. GRANT AWARDS ARE MONITORED BY A PROGRAM DIRECTOR. RECORDS ARE MAINTAINED ON EACH GRANTEE.

Schedule F (Form 990) 2021

# SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

THE INT'L CENTER FOR JOURNALISTS, INC.

Employer identification number 11-2724905

☐ No

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundr have con or con contribu	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
REALLY USEFUL MEDIA CORP - 67	ONLINE AWARDS TRIBUTE	Yes	No			
35TH ST, STE C354, BROOKLYN,	EVENT		Х	1,040,453.	44,510.	995,943.
COMMUNITY COUNSELLING SERVICE	IT TAKES A JOURNALIST -					
CO LLC - 527 MADISON AVE, 5TH	CAMPAIGN IMPLEMENTATION		Х	419,472.	336,000.	83,472.
THE NEW MEDIA TECHNOLOGY	IT TAKES A JOURNALIST -					
GROUP CORP - 110 E. MAIN ST,	CASE MATERIALS PREPARATION		Х	0.	19,000.	-19,000.
Total			<b>•</b>	1,459,925.	399,510.	1,060,415.
3 List all states in which the organization or licensing. CA, DC, MA, NJ, NY	on is registered or licensed to solicit (	contrib	outions	s or has been notified	d it is exempt from re	egistration

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

Schedule G (Form 990) 2021

SEE PART IV FOR CONTINUATIONS

ochedule a (i orm 550) 202

Pa	rt I	Fundraising Events. Complete if the of fundraising event contributions and groups.				
Ф			(a) Event #1 ICFJ TRIBUTE	<b>(b)</b> Event #2	(c) Other events  NONE  (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	1,040,453.	419,472.		1,459,925.
_	2	Less: Contributions	1,040,453.	419,472.		1,459,925.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes		14,000.		14,000.
Se	5	Noncash prizes	570.			570.
pense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages		620.		620.
	8 9	EntertainmentOther direct expenses	255,286.	404,852.		660,138.
		Direct expense summary. Add lines 4 through				675,328. -675,328.
Pa		Net income summary. Subtract line 10 from li  Gaming. Complete if the organization a		n 990. Part IV. line 19. or		-6/5,320.
		\$15,000 on Form 990-EZ, line 6a.				
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		<b>&gt;</b>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<b>&gt;</b>	
а	ls t	ter the state(s) in which the organization conduine organization licensed to conduct gaming and No," explain:	ctivities in each of these	states?		Yes No
		ere any of the organization's gaming licenses re Yes," explain:	•	_	year?	Yes No

Schedule G (Form 990) 2021

132082 10-21-21

Schedule G (Form 990) 2021 THE INT L CENTER FOR JOURNALISTS, INC. II-2	1/24905	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
to administer charitable gaming?	Yes	☐ No
13 Indicate the percentage of gaming activity conducted in:		
a The organization's facility	13a	%
<b>b</b> An outside facility	13b	%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
Name		
Address		
Address 🕨		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. Yes	☐ No
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount		
of gaming revenue retained by the third party $\blacktriangleright$ \$		
c If "Yes," enter name and address of the third party:		
Cili res, entername and address of the third party.		
Nama 🏲		
Name		
Address >		
Address		
<b>16</b> Gaming manager information:		
danning manager information.		
Name		
Name		
Coming manager compandation		
Gaming manager compensation > \$		
Description of continue mustified .		
Description of services provided		
Director/officer Employee Independent contractor		
Director/officer Employee Independent contractor		
47 Manufatana distributiona		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
retain the state gaming license?	຺∟⊔ Yes	∟ No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
organization's own exempt activities during the tax year > \$		
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	rt III, lines 9,	9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
	_	
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISEF	<u>ls:</u>	
(T) MANUEL OF THE PROPERTY OF		
(I) NAME OF FUNDRAISER: REALLY USEFUL MEDIA CORP		
(I) ADDRESS OF FUNDRAISER: 67 35TH ST, STE C354, BROOKLYN, NY 1	.1232	
(I) NAME OF FUNDRAISER: COMMUNITY COUNSELLING SERVICE CO LLC		
(I) ADDRESS OF FUNDRAISER: 527 MADISON AVE, 5TH FL, NEW YORK, NY	1002	2
(I) NAME OF FUNDRAISER: THE NEW MEDIA TECHNOLOGY GROUP CORP		

#### **SCHEDULE I** (Form 990)

## **Grants and Other Assistance to Organizations,** Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

Name of the organization

Employer identification number 11-2724905 THE INT'L CENTER FOR JOURNALISTS, INC.

THE INT L	CENTER F	OR JOURNALI	STS, INC.				11-2/24905
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records t	o substantiate th	e amount of the grants	s or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selec	tion
criteria used to award the grants or assis	stance?						X Yes No
2 Describe in Part IV the organization's pro	cedures for moni	toring the use of grant	funds in the United	d States.			
Part II Grants and Other Assistance to	_				anization answered "\	Yes" on Form 990, Part	t IV, line 21, for any
recipient that received more than S	\$5,000. Part II car	be duplicated if addit	tional space is need	ded.			
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
8EYEMEDIA							
12 BROOKSTONE DR							
SICKLERVILLE, NJ 19127	46-3723070	OTHER	13,600.	0.			PROJECT GRANT
AL JAZEERA INTERNATIONAL (USA) LLC 1200 NEW HAMPSHIRE AVE							
WASHINGTON, DC 20036	20-3567003	OTHER	9,000.	0.			PROJECT GRANT
AMERICAN PUBLISHING DBA THE ST. LOUIS AMERICAN - 2315 PINE STREET - ST. LOUIS, MO 63103	43-1686282	501(C)(3)	100,000.	0.			PROJECT GRANT
BORDER CENTER FOR JOURNALISTS AND BLOGGERS - 3836 JUTLAND ST - EDINBURG, TX 78542-5360	81-2934497	501(C)(3)	345,428.	0.			PROGRAM ASSISTANCE (SUBAWARD)
BROWN IMPACT MEDIA GROUP 615 SAGIANW STREET, SUITE 5005							
FLINT, MI 48502	47-2276014	OTHER	200,000.	0.			PROJECT GRANT
CARIBE COMMUNICATIONS & PUBLICATIONS, INC 175 MCCLELLAN							
HWY SUITE 1A - EAST BOSTON, MA							
02128	04-2530767	OTHER	100,000.	0.			PROJECT GRANT
2 Enter total number of section 501(c)(3) a			,	-		<u> </u>	
							·········· <u> </u>
3 Enter total number of other organizations	s iisteu ii i tile iine	ı ıa∪ı <del>∪</del>					

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

Schedule I (Form 990) 2021

		OK OOOKNALI					.1-2/24905 Pag
Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Scho	edule I (Form 990), Pa	ırt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASA EDITORIAL EL TIEMPO S.A.							
AVENIDA CALLE 26 68B-70							
BOGOTA, COLOMBIA 5714444			12,000.	0.			PROJECT GRANT
•			<u> </u>				
CENTRO DE PERIODISMO							
INVESTIGATIVO, INC PO BOX. 6834							
- SAN JUAN, PR 00914-6834	66-0705065	501(C)(3)	100,000.	0.			PROJECT GRANT
CONTEMPORA INC DBA THE TENNESSEE							
TRIBUNE NEWSPAPER - 1501 JEFFERSON							
STREET - NASHVILLE, TN 37208	62-1436475	OTHER	100,000.	0.			PROJECT GRANT
,							
CULTURE GENESIS INC							
202 BICKNELL AVE							
SANTA MONICA, CA 90405	82-4388131	OTHER	13,600.	0.			PROJECT GRANT
DETOUR MEDIA LLC							
10474 KINGSTON AVE	83-2507589	OTHER	25,000.	0.			PROJECT GRANT
HUNTINGTON WOODS, MI 48070	03-2307309	OTHER	25,000.	0.			FROUECI GRANI
DIAMOND DIASPORA MEDIA							
1870 THE EXCHANGE SE, STE 200							
ATLANTA, GA 30339-2021	45-4844390	OTHER	13,600.	0.			PROJECT GRANT
EMPRESA FOLHA DA MANHA S.A.							
AL DE LIMEIRA, 425 - CAMPOS							
ELISEOS, SAO PAULO, BRAZIL				_			
01202-900			12,000.	0.			PROJECT GRANT
ENTRAVISION COMMUNICATIONS							
CORPORATION - 5700 WILSHIRE BLVD,							
STE 250 - LOS ANGELES, CA 90036	95-4783236	OTHER	9,000.	0.			PROJECT GRANT
, , , , , , , , , , , , , , , , , ,			1				
FUNDACION CONNECTAS							
CALLE 64A NO. 1F67 INT103							PROGRAM ASSISTANCE
BOGOTA, COLOMBIA 110231			23,950.	0.			(SUBAWARD)

(a) Name and address of	<b>(b)</b> EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(b) EIN	if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
ANNETT MEDIA CORP. F/K/A GANNETT							
CO. INC 13095 PUBLISHERS DR -							
FISHERS, IN 46038	47-2390983	OTHER	12,000.	0.			PROJECT GRANT
,			, .				
GISA INC							
445 E 77TH ST APT 1R							
NEW YORK, NY 10075			13,880.	0.			PROJECT GRANT
GRUPORPP S.A.C.							
PASEO DE LA REPUBLICA 3866							
LIMA, PERU 15046			12,000.	0.			PROJECT GRANT
WOLL GIROT TWI							
HOLA CAROLINA							
546 AVERYS CREEK RD			100 000	0			DDO TEGM OD AND
ARDEN, NC 28704			100,000.	0.			PROJECT GRANT
INDIAN COUNTRY TODAY, LLC							
P.O. BOX 929							
PHOENIX, AZ 85001	86-2229607	501(C)(3)	100,000.	0.			PROJECT GRANT
,				- •			
INTERNATIONAL NEWS MEDIA							
ASSOCIATION - PO BOX 740186 -							
DALLAS, TX 75374	54-1685955	501(C)(6)	100,000.	0.			PROJECT GRANT
L.A. NEWS PUBLISHING COMPANY							
701 E THIRD STREET, #130							
LOS ANGELES, CA 90013	95-0950320	OTHER	100,000.	0.			PROJECT GRANT
LA RAZA CHICAGO, INC							
605 N. MICHIGAN AVE 4TH FLOOR							
CHICAGO, IL 60611	36-3263478	OTHER	100,000.	0.			PROJECT GRANT
Magi Amauy ayann annu ana							
MCCLATCHY SHARED SERVICES, INC.							
3511 NW 91ST AVE	CF 0CF1101	0.000	22 500				DDO THOM OD AND
DORAL, FL 33172	65-0651121	OTHER	22,500.	0.			PROJECT GRANT

Page 1

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(b) Liv	if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
MDE CITY PAPER HOLDINGS, LLC							
1405 S FERN ST #538							
ARLINGTON, VA 22202	38-4056032	OTHER	16,594.	0.			PROJECT GRANT
,			, -	<u> </u>			
MEDIALAB.AI, INC.							
MEDIALAB.AI, INC.							
SANTA MONICA, CA 90401	83-0631411	OTHER	13,600.	0.			PROJECT GRANT
MIAMI TIMES INC							
900 NW 54TH STREET							
MIAMI, FL 33127-1818	59-1410854	OTHER	100,000.	0.			PROJECT GRANT
MULTINI AMEODM NEWS TNG							
MULTIPLATFORM NEWS INC							
10540 NW 26TH ST G302	84-2976537	OTHER	34 200	0			DDO TECH CDANIE
DORAL, FL 33172	84-29/033/	OTHER	34,200.	0.			PROJECT GRANT
N.E.S.H.A., LLC							
451 VERMONT ST.							
BROOKLYN, NY 11207	30-0474320	OTHER	13,600.	0.			PROJECT GRANT
				- •			
NEW HAMPSHIRE PUBLIC RADIO, INC.							
2 PILLSBURY ST SUITE 600							
CONCORD, NH 03301	02-0338667	501(C)(3)	25,000.	0.			PROJECT GRANT
NEXTSHARK INC.							
4590 MACARTHUR BLVD							
NEWPORT BEACH, CA 92660	46-3324513	OTHER	100,000.	0.			PROJECT GRANT
OUTLIER MEDIA, LLC							
411A HIGHLAND AVE							
SOMERVILLE, MA 02144	84-3225463	OTHER	100,000.	0.			PROJECT GRANT
PRISM REPORTS INC							
1423 BROADWAY #271	00 45	504 (5) (5)		_			L
OAKLAND, CA 94612	82-1772450	pu1(C)(3)	100,000.	0,			PROJECT GRANT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpos								
(a) Name and address of organization or government	(b) EIN	if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	(h) Purpose of grant or assistance	
PUBLICSOURCE, INC.								
1936 FIFTH AVE.								
PITTSBURGH, PA 15219	47-4309256	501(C)(3)	25,000.	0.			PROJECT GRANT	
PUSHBLACK								
712 H ST NE								
WASHINGTON, DC 20002	81-3834388	501(C)(3)	100,000.	0.			PROJECT GRANT	
ROCK THE BELLS INC								
6311 ROMAINE ST, SUITE 4330								
LOS ANGELES, CA 90038	84-2419554	OTHER	13,600.	0.			PROJECT GRANT	
SAHAN JOURNAL								
428 MINNESOTA STREET								
ST. PAUL, MN 55101	83-2745995	501(C)(3)	100,000.	0.			PROJECT GRANT	
SAN ANTONIO REPORT								
126 GONZALES ST								
SAN ANTONIO, TX 78209-2918	47-4820476	501(C)(3)	24,980.	0.			PROJECT GRANT	
SCALAWAG								
P.O. BOX 129	4- 004404-	504 (5) (2)	100 000					
DURHAM, NC 27702	47-2014247	501(C)(3)	100,000.	0.			PROJECT GRANT	
SEMBRAMEDIA								
1818 CLYDE AVE							PROGRAM ASSISTANCE	
LOS ANGELES, CA 90019	47-5124565	501(C)(3)	238,196.	0.			(SUBAWARD)	
SWISH CULTURES LLC								
6110 RAINBOW FALLS CT.								
RANCHO CUCAMONGA, CA 91737	84-2253426	OTHER	136,000.	0.			PROJECT GRANT	
TCFSTYLE MEDIA LLC								
903 NORTH CROSSING WAY								
DECATUR, GA 30033	81-5061555	OTHER	13,600.	0.			PROJECT GRANT	

Part II Continuation of Grants and Other		mestic Organization		overnments (Sch	edule I (Form 990) Pa		1 2/24505 P
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CCV PUBLISHING INC							
2918 E.DOUGLAS AVE							
WICHITA, KS 67214	45-0511989	OTHER	100,000.	0.			PROJECT GRANT
TEXAS TRIBUNE, INC. 919 CONGRESS AVENUE, SIXTH FLOOR							
AUSTIN, TX 78701	26-4527097	501(C)(3)	7,000.	0.			PROJECT GRANT
THE CENTER FOR MICHIGAN, INC.							
ANN ARBOR, MI 48105	32-0167398	501(C)(3)	25,000.	0.			PROJECT GRANT
THE CHARLOTTE POST PUBLISHING COMPANY, INC - 5118 PRINCESS							
STREET - CHARLOTTE, NC 28269	56-1072642	OTHER	100,000.	0.			PROJECT GRANT
THE COLORADO SUN 2101 ARAPAHOE STREET							
DENVER, CO 80205	83-0538245	OTHER	20,000.	0.			PROJECT GRANT
THE EURASIA FOUNDATION, INC							PROGRAM ASSISTANCE
WASHINGTON, DC 20006	52-1780162	501(C)(3)	45,666.	0.			(SUBAWARD)
THE PODCAST NETWORK LLC 16192 COASTAL HIGHWAY							
LEWES, DE 19958	85-3311992	OTHER	79,500.	0.			PROJECT GRANT
THE POST AND COURIER, INC							
CHARLESTON, SC 29403	30-0537922	OTHER	25,000.	0.			PROJECT GRANT
THE SALT LAKE TRIBUNE, INC.							
SLC, UT 84101	84-1878709	501(C)(3)	25,000.	0.			PROJECT GRANT

(a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUNDERBIRD MEDIA, INC							
РО ВОХ 386							
MARTIN, SD 57551	20-1645766	OTHER	100,000.	0.			PROJECT GRANT
TV E RADIO JORNAL DO COMMERCIO							
TTDA - AVENIDA JOSE MARQUES							
FONTES, 1265 - INDIANOPOLIS							
CARUARU - PE, BRAZIL			12,000.	0.			PROJECT GRANT
UNIVISION INTERACTIVE MEDIA, INC.							
PEANECK, NJ 07666	13-4078167	OTHER	5,500.	0.			PROJECT GRANT
VOICE NEWS NETWORK, LNC. DBA THE							
PRYOR ST, SW - ATLANTA, GA 30312	58-1285890	501(C)(3)	100,000.	0.			PROJECT GRANT
WILL PACKER MEDIA, LLC 16000 VENTURA BLVD., #900							
ENCINO, CA 91436	82-1387033	OTHER	27,200.	0.			PROJECT GRANT

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
	recipients	Casii giaiit	Casil assistance	(cook, rim, appraisal, other)	
REPORTING FELLOWSHIPS	10	26,062	. 0.		
KNIGHT FELLOWSHIP	1	17,415.	0.		
Part IV Supplemental Information. Provide the information	required in Part I, lin	ne 2; Part III, columr	n (b); and any other a	dditional information.	
PART I, LINE 2:					
FELLOWS GO THROUGH A RIGOROUS IN	TERVIEW PR	OCESS BEFO	RE BEING A	WARDED A	
FELLOWSHIP. FELLOWS ARE REQUIRED	TO SIGN A	ND ADHERE	TO A FELLO	WSHIP	
AGREEMENT THAT DETAILS THE REQUI	RED PROGRA	M ACTIVITE	ES AND PROG	RAM AND	
FINANCIAL REPORTS. FELLOWS ARE A					
				WHO MANAGES	
THE OVERALL FELLOWSHIP. RECORDS	ARE MAINTA	INED ON EA	ACH FELLOW.		
ORGANIZATIONS RECEIVING GRANT AW	ARDS ARE S	ELECTED BY	ICFJ PROG	RAM DIRECTORS	
IN CONSULTATION WITH SENIOR MANA	GEMENT. OR	GANIZATONS	S ARE SELEC	TED BASED ON	

### **SCHEDULE J** (Form 990)

**Compensation Information** 

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

Compensated Employees

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

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

THE INT'L CENTER FOR JOURNALISTS, INC. Employer identification number 11-2724905

Pa	art I Questions Regarding Compensation			
			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
_				
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ X Compensation survey or study			
	☐ Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations ☐ X Approval by the board or compensation committee			
	Approval by the board of compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		Х	
_	not described on lines 5 and 6? If "Yes," describe in Part III	7	Λ	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			Х
0	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		<u> </u>
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	9		
	Regulations section 53.4958-6(c)?	_ ອ		

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

Schedule J (Form 990) 2021

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

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

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) JOYCE BARNATHAN	(i)	238,739.	25,000.	0.	14,324.	19,083.	297,146.	0.
PRESIDENT (UNTIL 9/7/2021)	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SHARON MOSHAVI	(i)	212,045.	10,000.	0.	12,723.	19,195.	253,963.	0.
SVP, NEW INIT; THEN PRES (EFF 9/7/21)	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) PATRICK BUTLER	(i)	181,096.	10,000.	0.	9,192.	9,823.	210,111.	0.
VP, CONTENT AND COMMUNITY	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) VJOLLCA SHTYLLA	(i)	160,519.	12,000.	0.	9,631.	17,804.	199,954.	0.
VP, DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MARIO SCHERHAUFER	(i)	151,331.	8,500.	0.	9,080.	9,050.	177,961.	0.
VP, FINANCE & ADMINISTRATION	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JOHANNA CARRILLO	(i)	138,846.	8,500.	0.	2,777.	17,838.		0.
VP, PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) LUIS BOTELLO	(i)	137,965.	0.	0.	8,278.	18,506.		0.
DEPUTY VP, GLOBAL IMPACT & STRATEGY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
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	(i) (ii)							
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# Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. PART I, LINE 7: DURING 2021, THE FOLLOWING EMPLOYEES RECEIVED BONUSES: - JOYCE BARNATHAN \$25,000 \$10,000 SHARON MOSHAVI \$10,000 - PATRICK BUTLER \$12,000 - VJOLLCA SHTYLLA \$8,500 MARIO SCHERHAUFER \$8,500 JOHANNA CARRILLO \$2,500 EMILY SCHULT \$5,000 - ERIN STOCK

## SCHEDULE O (Form 990)

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

OMB No. 1545-0047 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE INT'L CENTER FOR JOURNALISTS, INC. **Employer identification number** 11-2724905

FORM 990, PART VI, SECTION B, LINE 11B:

THE RETURN WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY THE FINANCE AND AUDIT COMMITTEE. ICFJ SENT THE COMPLETED FORM 990 ELECTRONICALLY TO ALL BOARD MEMBERS FOR THEIR REVIEW AND APPROVAL BEFORE SUBMISSION TO THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

EACH ICFJ DIRECTOR AND EMPLOYEE UPDATES HIS/HER CONFLICT OF INTEREST POLICY STATEMENT ANNUALLY AND WHEN CHANGES ARISE.

WHEN A CONFLICT OF INTEREST EXISTS, THE EMPLOYEE OR BOARD MEMBER IS REQUIRED TO DISCLOSE SUCH CONFLICT AND ABSTAIN FROM THE DISCUSSION, VOTING, RESOLUTION OR ACTION(S) RELATED TO THE MATTER. A MAJORITY OF THE BOARD MEMBERS PRESENT AT ANY MEETING MAY ALSO DISQUALIFY A BOARD MEMBER FROM DISCUSSING AND/OR VOTING ON ANY MATTER UNTIL THEY DETERMINE IF A CONFLICT INTEREST EXISTS. AFTER FULL DISCLOSURE, AND WITH DUE DELIBERATION, A MAJORITY OF THE DISINTERESTED DIRECTORS MAY APPROVE OR RATIFY A TRANSACTION WHICH INVOLVES A CONFLICT OF INTEREST WITH A DIRECTOR, OFFICER, OR EMPLOYEE ICFJ PROVIDED THE TRANSACTION IS FAIR TO ICFJ.

FORM 990, PART VI, SECTION B, LINE 15A:

THE EXECUTIVE BOARD REQUIRES THAT TWO DIRECTORS PERFORM AN ANNUAL REVIEW OF THE PRESIDENT AND REPORT THEIR FINDINGS TO THE EXECUTIVE BOARD. EXECUTIVE BOARD DETERMINES THE COMPENSATION OF THE PRESIDENT. THE

COMPENSATION IS DETERMINED ON THE BUDGET SIZE, OVERALL PERFORMANCE AND

LOCATION OF THE ORGANIZATION. THE PROCESS INCLUDED COMPARABILITY DATA AND

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

Schedule O (Form 990) 2021

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Name of the organization **Employer identification number** THE INT'L CENTER FOR JOURNALISTS, INC. 11-2724905 DOCUMENTATION OF THE PROCESS. THE MOST RECENT REVIEW WAS CONDUCTED IN NOVEMBER 2021. THE PRESIDENT DETERMINES THE SALARY COMPENSATION OF THE STAFF BASED ON A PERCENTAGE THAT HAS BEEN APPROVED BY THE FINANCE COMMITTEE AND IN LINE WITH OTHER COMPARABLE POSITIONS IN THE WASHINGTON, DC AREA. ALL EMPLOYEES ARE REVIEWED ANNUALLY WITH A PERFORMANCE REVIEW BY THEIR SUPERVISOR AND THE PRESIDENT. FORM 990, PART VI, SECTION C, LINE 19: ICFJ'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART IX, LINE 11G, OTHER FEES: SUBCONTRACTORS: PROGRAM SERVICE EXPENSES 159,634. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. 159,634. TOTAL EXPENSES CONSULTANTS: PROGRAM SERVICE EXPENSES 2,131,194. MANAGEMENT AND GENERAL EXPENSES 33,899. FUNDRAISING EXPENSES 40,436. 2,205,529. TOTAL EXPENSES **EVALUATOR FEES:** PROGRAM SERVICE EXPENSES 152,450.

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Name of the organization  THE INT'L CENTER FOR JOURNALISTS, INC.	Employer identification number 11-2724905
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	152,450.
INTERPRETER/TRANSLATOR:	
PROGRAM SERVICE EXPENSES	247,883.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	215.
TOTAL EXPENSES	248,098.
TRAINER/SPEAKER FEES:	
PROGRAM SERVICE EXPENSES	279,130.
MANAGEMENT AND GENERAL EXPENSES	1,062.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	280,192.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	3,045,903.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
PRIOR YEAR GRANTS RESCINDED BY DONORS	-126,971.
PPP FUNDING RECOGNIZED AS A CONDITIONAL CONTRIBUTION	-661,839.
IN THE 2020 AUDIT, BUT NOT FORGIVEN BY THE SBA UNTIL	
2021. THEREFORE, RECOGNIZED AS REVENUE IN THE 2021	
FORM 990.	
TOTAL TO FORM 990, PART XI, LINE 9	-788,810.

132212 11-11-21 Schedule O (Form 990) 2021