F	990
Form	

Return of Organization Exempt From Income Tax

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

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



OMB No. 1545-0047

		nue Service	Information about Form 990 and its instructions is at www.irs.gu	ov/form99).	Inspection					
Α	For the	e 2016 cale	ndar year, or tax year beginning 01/01 , 2016, and ending	12	2/31	, 20 ₁₆					
В	Check if	if applicable:	C Name of organization FUND FOR INVESTIGATIVE JOURNALISM INC		D Employ	er identification number					
	Address	dress change Doing business as 52-0895081									
	Name c	change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite		E Telephor	ne number					
	Initial re	eturn	529 14th Street NW 13th Floor			202-662-7564					
	Final retu	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code								
	Amende	ed return	Washington, DC, 20045		G Gross re	eceipts \$ 440,393					
	Applicat	tion pending	F Name and address of principal officer: Ricardo Sandoval Palos	H(a) Is this a g	roup return for a	subordinates? 🗌 Yes 🗹 No					
			529 14th Street NW, 13th Floor, Washington, DC 20045	H(b) Are all	subordinates	s included? 🗌 Yes 🗌 No					
<u> </u>	Tax-exe	empt status:	✓ 501(c)(3) 501(c) () ◄ (insert no.) 4947(a)(1) or 527	If "No," atta	ach a list. (se	ee instructions)					
J	Website		/W.FIJ.ORG	H(c) Group	exemption	number 🕨					
К	Form of	organization:	✓ Corporation Trust Association Other ► L Year of formation	: 1969	M State	of legal domicile: DC					
Ρ	art I	Summ									
	1	Briefly de	scribe the organization's mission or most significant activities: The Organization	nization p	rovides c	ritical support to					
Ce		independ	lent journalists to investigate news stories regarding corruption, malfeasance	, exploitat	ion, misaj	ppropriation of funds					
nar			blic and private sectors								
ver	2		is box \blacktriangleright if the organization discontinued its operations or disposed of			its net assets.					
ŝ	3		of voting members of the governing body (Part VI, line 1a)			12					
യ് ഗ	4		of independent voting members of the governing body (Part VI, line 1b)			12					
itie	5				5	1					
Activities & Governance	6		nber of volunteers (estimate if necessary)		6	0					
Ă	7a		elated business revenue from Part VIII, column (C), line 12		7a	0					
	b	Net unrel	ated business taxable income from Form 990-T, line 34		7b	0					
				Prior Ye	ear	Current Year					
e	8		tions and grants (Part VIII, line 1h)		448,160	436,650					
Revenue	9	-	service revenue (Part VIII, line 2g)		0	0					
Rev	10		nt income (Part VIII, column (A), lines 3, 4, and 7d)		2,458	3,743					
_	11		renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	0					
	12		enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)		450,618	440,393					
	13		nd similar amounts paid (Part IX, column (A), lines 1–3)		222,318	241,261					
	14		paid to or for members (Part IX, column (A), line 4)		0	0					
ses	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)		63,089	75,010					
Expenses	16a		mal fundraising fees (Part IX, column (A), line 11e)		0	0					
ЦЩ	b										
	17	Other exp		41,452	109,792						
	18		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		326,859	426,063					
	19	Revenue	less expenses. Subtract line 18 from line 12	ainning of Cu	123,759	14,330 End of Year					
Net Assets or Fund Balances	00	Tatal are									
Asse: Bala	20		ets (Part X, line 16)		543,246	579,518					
let ⊿	21		ilities (Part X, line 26)		149,271	120,249					
24	22	Net asset	ts or fund balances. Subtract line 21 from line 20		393,975	459,269					

Signature Block Part II

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

Sign Here	Signature of officer Sandy Bergo, Secretary/Executive I Type or print name and title	Director		Date		
Paid Preparer	Print/Type preparer's name Beverly Orr	Preparer's signature	Date		Check 🖌 if self-employed	PTIN P27414441
Use Only	Firm's name Beverly Orr	Firm's EIN ►				
	Firm's address F P O Box 19367, Washi	Phone no. 202-361-2814				
May the IRS	discuss this return with the preparer s	shown above? (see instructions)				🖌 Yes 🗌 No
For Doportivo	rk Poduction Act Notico, see the separa	to instructions	+ No 11000V			Eorm 990 (2016)

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990	D (2016) Page 2
Part I	II 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:
	The Organization provides critical support to independent journalists to investigate news stories regarding corruption, malfeasance, exploitation or misappropriation of funds in the public and private sectors.
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
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 revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
- A el	Other program convisoo (Deparities in Schedule C.)
	Other program services (Describe in Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
4e	Total program service expenses ► 366,789

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

Form **990** (2016)

Part	0 (2016) V Checklist of Required Schedules (continued)			Page 4
arı	Checkinst of hequiled Schedules (continued)		Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
22	domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21	~	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	~	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .	23		~
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	23 24a		~
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		~
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .	27		~
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a 28b		~ ~
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		~
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		~ ~
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		~
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		~
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? <i>If "Yes," complete Schedule R, Part I</i> .	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		~
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R,</i>			
38	<i>Part VI</i>	37 38	~	~
			n 990) (20

Form 99	0 (2016)		I	Page 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 40			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	~	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
-	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) .	-		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
		4a		~
b	If "Yes," enter the name of the foreign country:	48		•
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions 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 services provided to the payor?	7a		~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b		
С	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	76 7f		V
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		~
ň	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		~
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
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:			
a b	Gross income from members or shareholders			
D	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	. <u>2</u> u		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Form 99	90 (2016)			Page 6
Part	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			. 🗸
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	2		
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		~
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		~
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? .	4 5		
6 7a	Did the organization have members or stockholders?	6 7a		~
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		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	~	
ь 9	Each committee with authority to act on behalf of the governing body?	8b 9		~
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reve	-	ode.))
	· · · · · ·		Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	V	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a 12b	マ マ	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	~	
13	Did the organization have a written whistleblower policy?	13	~	
14 15	Did the organization have a written document retention and destruction policy?	14		
а	The organization's CEO, Executive Director, or top management official	15a	V	
b	Other officers or key employees of the organization	15b		~
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taughte antity during the year?			
۲	with a taxable entity during the year?	16a		~
D	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
Secti	on C. Disclosure		L	L
17 18	List the states with which a copy of this Form 990 is required to be filed ► <u>None</u> Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Secti available for public inspection. Indicate how you made these available. Check all that apply.	on 501	(c)(3)s	only)
19	 ✓ Own website ✓ Another's website ✓ Upon request ○ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in financial statements available to the public during the tax year. 	nterest	policy	y, and

20	State the name, address, and telephone number of the person who possesses the organization's books and record	ls: 🕨
	Sandy Bergo, (202)662-7564	

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

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

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

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

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

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

					C) ition					
(A)	(B)	(do n				e than c	one	(D)	(E)	(F)
Name and Title	Average	box,	unles	s pe	rson	is both an		Reportable	Reportable	Estimated
	hours per week (list any hours for related organizations below dotted line)	Individua or directo			a director/trustee) Former Highest compensated Key employee		e) Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Devid Decederar	0.50					<u>u</u>				
David Boardman	0.50	~						0		_
Member Luis Botello	0.50	-			-			0	0	0
Member	0.50	~						0	0	0
Ron Nixon	0.50	•						0	0	0
Member	0.50	~						0	0	0
David Ottaway	0.50							0		0
Member	0.50	~						0	0	0
Cheryl W Thompson	0.5							Ŭ		
Member	0	~						0	0	0
Tisha Thompson	0.50									
Member	0	~						0	0	0
Doris Truong	0.50									
Member	0	~						0	0	0
Mark Greenblatt	0.50									
Member	0	~						0	0	0
Diana Schemo	0.50									
Member	0	~						0	0	0
Clarence Page	0.50									
Treasurer	0]		r				0	0	0
Ricardo Sandoval Palos	2.0									
President	0			~				0	0	0
Marcia Bullard	1.0									
Vice President	0			~				0	0	0
Sandy Bergo	24.00									
Secretary/Executive Director	0			V				60,000	0	10,067

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mploy	yees	s, ar	nd H	lighe	st C	ompensated E	mployees (contir	ued)				
					•	C)									
	(A)	(B)	(B) Position (do not check more than one				(D)	(E)		(F)					
	Name and title	Average					is both		Reportable	Reportable		Reportable		Estimated	ł
		hours per					or/trust		compensation	compensation from		amount o	f		
		week (list any hours for	с Г	ln,	ç	۲	en Hi	Fo	from the	related organizations		other ompensat	on		
		related	Individual trustee or director	Institutional trustee	Officer	Key employee	nplo	Former	organization	(W-2/1099-MISC)		from the			
		organizations	dual	tion		mp	st co	Ψ	(W-2/1099-MISC)			organizatio			
		below dotted line)	r tru	alti		oye	d mp					and relate rganizatio			
			stee	ust		l o	ens					iganizatio			
				ee			Highest compensated employee								
			-												
			-												
			-												
			1												
			-												
			ł												
			-												
			ł												
			-												
											<u> </u>				
			ł												
44	Cuch total								(0.000		<u> </u>				
1b				·	•	•	• •		60,000	0			10,067		
C	Total from continuation sheets to Part	-		·	·	•	• •		(0.000						
d		 						<u> </u>	60,000	0	L		10,067		
2	Total number of individuals (including but		to th	iose	e list	ted	above	e) w	no received me	ore than \$100,00	10 of				
	reportable compensation from the organ	Ization							0				1		
•		· · ·									. =	Yes	No		
3	Did the organization list any former of							-		•		-			
_	employee on line 1a? If "Yes," complete											3	~		
4	For any individual listed on line 1a, is the														
	organization and related organizations	greater the	an \$1	150,	,000)? [f "Ye	s,"	complete Sch	edule J for suc					
	individual		· ·	•	·	• •	• •	•				4	~		
5	Did any person listed on line 1a receive of														
	for services rendered to the organization	? It "Yes," c	compl	ete	Sch	nedu	ule J f	or s	such person			5	~		
Sectio	on B. Independent Contractors														
1	Complete this table for your five highest														
	compensation from the organization. Rep	port compe	nsatio	on fe	or th	ne c	alend	lar y	year ending wit	h or within the o	rganiz	ation's	tax		
	year.														
	(4)							1							

	(A) Name and business address	(B) Description of services	(C) Compensation
None			
2	Total number of independent contractors (including but not limited to	those listed above) who	
	received more than \$100,000 of compensation from the organization ►	0	

Form 990 (2016)

	990 (201					Page 9
Par	t VIII	Statement of Revenue				_
		Check if Schedule O contains a response or note to	(A) Total revenue	Part VIII (B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns1a0Membership dues1b0Fundraising events1c0Related organizations1d0Government grants (contributions)1e0All other contributions, gifts, grants, and similar amounts not included above1f436,650				
Sontrik and Ot	g h	Noncash contributions included in lines 1a-1f: \$ 0 Total. Add lines 1a-1f	436,650			
		Business Code	430,000			
Program Service Revenue	2a b c d					
lran	e f					
Proç	f g	All other program service revenue . Total. Add lines 2a–2f	0			
	3	Investment income (including dividends, interest, and other similar amounts)	3,743	0	0	3,743
	4	Income from investment of tax-exempt bond proceeds ►	0	0	0	0
	5	Royalties	0	0	0	0
	6a b c d 7a	Gross rents 0 0 Less: rental expenses 0 0 Rental income or (loss) 0 0 Net rental income or (loss) . . Gross amount from sales of (i) Securities (ii) Other	0	0	0	0
	b c d	assets other than inventory 0 0 Less: cost or other basis and sales expenses 0 0 Gain or (loss) 0 0 Net gain or (loss) . .	0	0	0	0
Other Revenue		Gross income from fundraising events (not including \$0 of contributions reported on line 1c). See Part IV, line 18 a0				
đ	b	Less: direct expenses b 0				
	с 9а	Net income or (loss) from fundraising events ▶ Gross income from gaming activities. ▶ See Part IV, line 19 ▶ 0 0	0		0	0
	b с 10а	Less: direct expenses . . b 0 Net income or (loss) from gaming activities . ▶ Gross sales of inventory, less . . ▲ returns and allowances . . a 0	0	0	0	0
	b c	Less: cost of goods sold b 0 Net income or (loss) from sales of inventory ▶ Miscellaneous Revenue Business Code	0	0	0	0
	11a					
	b					
	с					
	d	All other revenue				
	е	Total. Add lines 11a-11d	0			
	12	Total revenue. See instructions	440,393	0	0	3,743

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 respons t include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	59,650	59,650	5	- F
2	Grants and other assistance to domestic individuals. See Part IV, line 22	171,461	171,461		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .	10,150	10,150		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0 70,067	0 34,333	14,013	21,721
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		34,333	0	
7	Other salaries and wages	0	0	0	C
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	0	0	C
9	Other employee benefits	0	0	0	C
10	Payroll taxes	4,943	2,422	989	1,532
11 а	Fees for services (non-employees): Management	0	0	0	C
b		0	0	0	0
c	Accounting	2,185	2,185	0	(
d		0	0	0	(
e f	Professional fundraising services. See Part IV, line 17 Investment management fees	0	0	0	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	66,524	53,584	5,690	7,250
12	Advertising and promotion	35	0	3,090	
13	Office expenses	2,150	1,334	300	516
14	Information technology	1,894	928	379	587
15	Royalties	0	0	0	(
16	Occupancy	6,000	2,940	1,200	1,860
17	Travel	10,842	8,998	0	1,844
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
10		0	0	0	
19 20	Conferences, conventions, and meetings	18,860	<u>18,166</u> 0	694 0	(
20 21	Payments to affiliates	0	0	0	
22	Depreciation, depletion, and amortization	0	0	0	
23	Insurance	1,302	638	260	404
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				
а	(A) amount, list line 24e expenses on Schedule O.)				
b					
C					
d	All other expanses				
е 25	All other expenses Total functional expenses. Add lines 1 through 24e	0 426,063	0 366,789	0 23,560	0
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)	420,003	300,789	23,300	35,714

Form 990 (2016)

Pa	rt X	Balance Sheet			Page 11
		Check if Schedule O contains a response or note to any line in this Pa	t X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	30,846	1	43,248
	2	Savings and temporary cash investments	345,714	2	325,667
	3	Pledges and grants receivable, net	82,293	3	111,333
	4	Accounts receivable, net	15	4	0
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
5	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
₽S6	8		0	8	0
	9	Prepaid expenses and deferred charges	-	9	-
	9 10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a	1,756	9	869
	b	Less: accumulated depreciation 10b	0	10c	
	11	Investments-publicly traded securities	82,622	11	98,401
	12	Investments-other securities. See Part IV, line 11	0	12	0
	13	Investments-program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	543,246	16	579,518
	17	Accounts payable and accrued expenses	2,992		0
	18	Grants payable	146,279		120,249
	19	Deferred revenue	0	19	
	20	Tax-exempt bond liabilities	0	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
lab		disqualified persons. Complete Part II of Schedule L	0	22	
_	23	Secured mortgages and notes payable to unrelated third parties	0	23	
	24	Unsecured notes and loans payable to unrelated third parties	0	24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
				25	
	26	Total liabilities. Add lines 17 through 25	149,271	26	120,249
Juc	27	Unrestricted net assets	217,396	27	298,123
3alé	28	Temporarily restricted net assets	176,579	28	161,146
Β	29	Permanently restricted net assets	0	29	0
۳		Organizations that do not follow SFAS 117 (ASC 958), check here ► □ and complete lines 30 through 34.			
Net Assets or	30	Capital stock or trust principal, or current funds		30	
se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .		32	
let	33	Total net assets or fund balances	393,975	33	459,269
	34	Total liabilities and net assets/fund balances	543,246		579,518

Form **990** (2016)

orm 9	90 (2016)			Pa	age 1 2
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		44	10,39
2	Total expenses (must equal Part IX, column (A), line 25)	2		42	26,06
3	Revenue less expenses. Subtract line 2 from line 1	3		1	4,33
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		39	93,97
5	Net unrealized gains (losses) on investments	5			7,30
6	Donated services and use of facilities	6			(
7	Investment expenses	7			(
8	Prior period adjustments	8		4	3,65
9	Other changes in net assets or fund balances (explain in Schedule O)	9			(
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		45	59,269
Par	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 ☑ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	cplain in			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		~
	If "Yes," check a box below to indicate whether the financial statements for the year were com reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		~
-	If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both:	ed on a	ı		
	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 c of the audit, review, or compilation of its financial statements and selection of an independent accord		2c		
	If the organization changed either its oversight process or selection process during the tax year, e Schedule O.	kplain in	1		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?				~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	ergo the			-

=orm	990	(2016)
------	-----	--------

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service 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. ► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name	of the	organization
------	--------	--------------

Employer identification number

Name	or the	organization					Employer identification	Inumber
FUNI	D FOR	INVESTIGATIVE JOURNALISM	/ INC				52-08	95081
Par	tl	Reason for Public Cha	rity Status (All	organizations must	comple	te this p	art.) See instructio	ns.
The c	organi	zation is not a private founda	tion because it i	s: (For lines 1 through	12, chec	ck only or	ne box.)	
1	ΔA	church, convention of church	nes, or associati	on of churches descri	bed in se	ection 17	0(b)(1)(A)(i).	
2	ΠA	school described in section	170(b)(1)(A)(ii).	(Attach Schedule E (F	orm 990	or 990-E	Z).)	
3		hospital or a cooperative hos						
4	A []	medical research organizations of the second state of the second s	on operated in co	onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(A)	
5	ΔA	n organization operated for t ection 170(b)(1)(A)(iv). (Com	the benefit of a	college or university	owned o	r operate	ed by a government	al unit described in
6	ПА	federal, state, or local govern	nment or govern	mental unit described	in sectio	on 170(b)	(1)(A)(v).	
7	~ A	n organization that normally escribed in section 170(b)(1)	receives a subs	tantial part of its sup				the general public
8	ΔA	community trust described in	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
9	A 🗆 N	n agricultural research organi r university or a non-land-gra niversity:	zation described	d in section 170(b)(1)	(A)(ix) op			
10	re Sl	n organization that normally r ceipts from activities related upport from gross investment cquired by the organization a	to its exempt fun income and uni	nctions—subject to co related business taxal	ertain exc ole incom	ceptions, ne (less se	and (2) no more that ection 511 tax) from	n 331/3% of its
11	🗌 A	n organization organized and	operated exclus	sively to test for public	safety.	See sect i	ion 509(a)(4).	
12	ΔA	n organization organized and	operated exclus	ively for the benefit of	f, to perfo	orm the fu	unctions of, or to car	rry out the purposes
		f one or more publicly suppo heck the box in lines 12a thro						
а		Type I. A supporting organ the supported organization supporting organization. Ye	(s) the power to	regularly appoint or e	lect a ma	jority of t		
b		Type II. A supporting organ control or management of to organization(s). You must	the supporting o	rganization vested in	the same			
С		Type III functionally integ its supported organization(ally integrated with,
d		Type III non-functionally i that is not functionally integrequirement (see instruction	grated. The orga	nization generally mus	st satisfy	a distribu	ution requirement an	
е		Check this box if the organ functionally integrated, or 1						e II, Type III
f	Ent	er the number of supported of						
g		vide the following information		orted organization(s).				
		me of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the c listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)						-		
(B)								
(C)								
(D)								

(E) Total

0

0

1,791,653

1,254,491

1,791,653

10,694

0

0

0

1,802,347

(f) Total

537,162

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 gualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ► (a) 2012 **(b)** 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total Gifts, grants, contributions, 1 and membership fees received. (Do not include any "unusual grants.") . . . 279,819 273,884 353,140 448,160 436,650 1,791,653

0

0

353,140

(b) 2013

353,140

985

0

0

0

0

279,819

(c) 2014

279.819

2,703

0

0

0

0

448,160

(d) 2015

448,160

2,458

0

0

0

0

436,650

(e) 2016

436,650

3,743

0

0

0

273,884

(a) 2012

273,884

805

0

0

- 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .
- The value of services or facilities 3 furnished by a governmental unit to the organization without charge
- Total. Add lines 1 through 3. 4
- 5 The portion of total contributions by each person (other than а governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)

Public support. Subtract line 5 from line 4 6

Section B. Total Support

Calendar year (or fiscal year beginning in) ►

- 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources
- Net income from unrelated business 9 activities, whether or not the business is regularly carried on
- 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)
- **Total support.** Add lines 7 through 10 11

Gross receipts from related activities, etc. (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13

Section C. Computation of Public Support Percentage

	on of comparation of rubic cuppertrefoontage			
14	Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	29.8	%
15	Public support percentage from 2015 Schedule A, Part II, line 14	15	27.03	%
16a	331/3% support test-2016. If the organization did not check the box on line 13, and line 14 is 33	3 ¹ /3%	or more, check this	
	box and stop here. The organization qualifies as a publicly supported organization		🕨	
b	331/3% support test-2015. If the organization did not check a box on line 13 or 16a, and line 15	is 331	/3% or more, check	
	this box and stop here. The organization qualifies as a publicly supported organization		🕨	
. –		_		

- 17a 10%-facts-and-circumstances test-2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported
 - 10%-facts-and-circumstances test-2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line b 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18 ►

Schedule A (Form 990 or 990-EZ) 2016

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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
•	unrelated trade or business under section 513						
4	Tax revenues levied for the						
4	organization's benefit and either paid						
	to or expended on its behalf						
-	•						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						•
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources						
b	Unrelated business taxable income (less						
~	section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
	Net income from unrelated business						
11	activities not included in line 10b, whether						
	or not the business is regularly carried on						
40							
12	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
13	and 12.)						
				al the back for south	Calls to see		tiana 501(a)(0)
14	First five years. If the Form 990 is for the	•			· ·		
<u></u>	organization, check this box and stop he						🕨
	on C. Computation of Public Suppor						
15	Public support percentage for 2016 (line					15	%
16	Public support percentage from 2015 Sch					16	%
-	on D. Computation of Investment In		-				
17	Investment income percentage for 2016 (-		17	%
18	Investment income percentage from 2015					18	%
19a	331/3% support tests-2016. If the organ						
	17 is not more than $33^{1/3}$ %, check this box	-	-	-		-	
b	331/3% support tests-2015. If the organiz						
	line 18 is not more than 33 ¹ /3%, check this	box and stop h	nere. The organ	ization qualifies	as a publicly s	upported org	anization 🕨 🗌
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see inst	tructions 🕨 🗌

Schedule A (Form 990 or 990-EZ) 2016

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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 (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- **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 in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- **c** Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **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 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

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

10b

Schedu	ule A (Form 990 or 990-EZ) 2016		I	Page 5
Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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		

Section C. Type II Supporting Organizations

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).

Section 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization</i> (s).	2		
3	By reason of the relationship described in (2), 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.

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations, *Complete line 3 below*. b
- The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions). С
- 2 Activities Test. Answer (a) and (b) below.
- a 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.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a 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? Provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

1

3

2a

2b

3a

3b

Yes No

Yes No

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

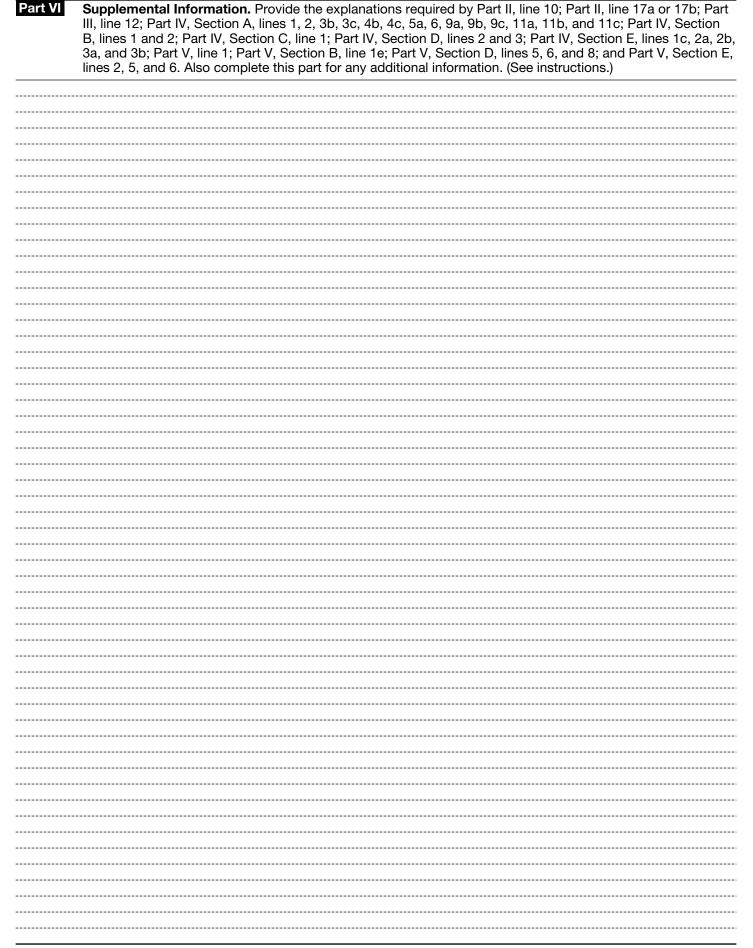
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
		· · <u> </u>	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2016

Part		by Supporting Organi		Current Year
	ion D - Distributions	avamat purpaga		Current Year
1	Amounts paid to supported organizations to accomplish e		ut a al	
2	Amounts paid to perform activity that directly furthers exe	orted		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	Inizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	sponsive	
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
c	From 2013			
d	From 2014			
e	F 0045			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
<u> </u>	· · · · · ·			
<u>h</u>	Applied to 2016 distributable amount			
<u> </u>	Carryover from 2011 not applied (see instructions)			
J	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, 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 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b b	Excess from 2013			
C	Excess from 2014			
d d	Excess from 2015			
	Excess from 2016			
е			Schedule	

Schedule A (Form 990 or 990-EZ) 2016



Schedule A, Part VI, Statement 1

Form: Schedule A (2016)

Page: 2

FUND FOR INVESTIGATIVE JOURNALISM INC

EIN: 52-0895081

Part II, Section C, Line 17

Facts And Circumstances Test Explanations

Facts And Circumstances Test

Although the Fund for Investigative Journalism, Inc. does not have 33 1/3% public support, it does receive a substantial amount of its support from contributions made directly or indirectly from a combination of sources, including the general public. As required in Section 1.17A-9T Section (F) subsection 3(I), the Fund for Investigative Journalism does receive more than 10% of its support from public sources. As outlined in Section 1.170A-9T Section (F) subsection 3(ii), the Fund for Investigative Journalism has an ongoing campaign for additional financial support. In addition to fund-raising with foundations that support journalism, the fund seeks financial support from previous winners as well as prominent individuals, journalists, and members of the community to increase the level of public support of our work. As outlined in Section 1.170-9T Section (F) Subsection (III) the level of public support for the fund has varied over the years, and in 2015 and 2016, the level was 27.03% and 29.80%, respectively. Most of our contributions are from a limited number of unrelated private foundations. As outlined above, we are working hard to broaden our base of public support. The Fund for Investigative Journalism was founded in 1969. It has a 12-member board that consists of active and retired investigative reporters, including Pulitzer Prize winners, and professors at major universities with well established journalism and investigative reporting programs. The academic institutions represented currently on the board include, Temple University and George Washington University. The Fund exists to provide a critical service to the public by selecting and financing well qualified journalists to produce a significant, independent and often ground-breaking investigative stories in the United States and around the world. The Journalists who receive grants from the Fund have presented and distributed their work in newspapers, magazines, on broadcast programs -- both television and radio, and on web sites in text, audio and video. These stories keep government and business accountable to the public, protect the weak and power-less, shine light on injustices and the need for reform, and reveal secret activities that pollute the environment, plunder the public coffers, or that result in the killing or physical abuse of citizens. The work supported by the Fund has been recognized with numerous awards and spurred follow-up investigations and reform that continue to benefit the public. The watchdog role of journalists that the Fund has supported for more than 40 years is crucial to creating and preserving free and democratic societies. Because of the Fund, the public has received a greater awareness and understanding of the major issues and problems in the U.S. and around the world. The Fund is now more important than ever because of the major reductions in staff and resources occurring in the news media in the U.S. Without the Fund, many of the most necessary and valuable investigative stories would not be done.

SCHEDULE F (Form 990)		State	ement of	f Activitie	s Outside the Un	ited States	; -	OMB No. 1545-0047
(FOr	m 990)	► Comple	te if the organ	16.	2016			
	ment of the Treasury	▶ Informati	on about Sche		Open to Public			
	I Revenue Service of the organization				90) and its instructions is at	www.iis.gov/ioini		Inspection identification number
	D FOR INVESTIGA	TIVE JOURNA	LISM INC					52-0895081
Pa				ies Outside	the United States. Comp	olete if the organ		
), Part IV, line						
1		e grantees' eli	gibility for the	e grants or as	ords to substantiate the am sistance, and the selection			
2	For grantmal assistance out			the organizati	on's procedures for monit	toring the use c	of its grar	nts and other
3	Activities per F	Region. (The fo	llowing Part	I, line 3 table o	an be duplicated if addition	nal space is need	ded.)	
	(a) Regior		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity liste	ed in (d) is ervice, ic type of	(f) Total expenditures for and investments in the region
(1)	Russia and the n	ewly independ	0	1	Grantmaking	investigative jou	rnalism	4,450
(2)	Sub-Saharan Afr	ica	0	1	Grantmaking	investigative jou	rnalism	700
(3)	South America		0	1	Grantmaking	investigative jou	rnalism	5,000
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
3a								
b	Total from sheets to Part							
с			0	3				10,150

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

Part II

Part	Grants	and Other A	ssistance to Orga	anizations or Entiti	ies Outside the	United States. Cor	nplete if the orgar	ization answered "Ye	es" on Form 990,
	Part IV,	line 15, for ar	ny recipient who re	eceived more than §	\$5,000. Part II ca	an be duplicated if a	dditional space is	needed.	
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
(16)									

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

Schedule F (Form 990) 2016

Page **2**

Part III

(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)
(1) Support investigative journalism	Russia and the newly inde	1	4,450	wire	0		book
(2) Support investigative journalism	South America	1	5,000	wire			book
(3) Support investigative journalism	Sub-Saharan Africa	1	700	wire			book
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2016

Page 3 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Schedule F (Form 990) 2016

Page	4
------	---

Part	IV Foreign Forms		
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)	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; do not file with Form 990) .	Yes	🖌 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	🖌 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? <i>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).</i>	Yes	✓ 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	₽ 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; do not file with Form 990)	Yes	₽ No

Schedule F (Form 990) 2016

Part V Supplemental Information

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

Schedule F, Part I, Line 2 - Before awarding grants, the Fund requires commitments from news outlets that supported work will be published
or broadcast, as long as it meets the news organization's standards. The Fund pays half of the grant once the award is made and, to ensure
work is completed, pays the second half once the work is published in accordance with the original proposal. The Fund also establishes
deadlines for completion and monitors progress of grantees for the duration of the grant period.

SCHEDU		Grants and Other Assistance to Organizations, Governments, and Individuals in the United States							
				2016					
Department of				► Attach te	o Form 990.				Open to Public
Internal Revenu		► Info	ormation about Sche	edule I (Form 990) a	nd its instructions	is at <i>www.irs.gov/fo</i>	rm990.		Inspection
Name of the o	rganization							Employer id	entification number
FUND FOR	INVESTIGATIVE JOURNA	LISM INC							52-0895081
Part I	General Information	n on Grants an	d Assistance						
1 Doe	s the organization maint	ain records to su	bstantiate the amo	unt of the grants o	r assistance, the g	grantees' eligibility	for the grants or a	ssistance, a	nd
the	selection criteria used to	award the grants	s or assistance?						🖌 🖌 Yes 🗌 No
2 Des	cribe in Part IV the orga	nization's procedu	ures for monitoring	the use of grant fu	unds in the United	States.			
Part II	Grants and Other A								d "Yes" on Form
	990, Part IV, line 21,	for any recipier	nt that received m	ore than \$5,000	. Part II can be c	luplicated if addit	ional space is n	eeded.	
1 (a) Name	and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description noncash assista		(h) Purpose of grant or assistance
(1) Sch I, S	tmt 1	-							
(2)									
		-							
(3)		-							
(4)		-							
(5)		-							
(6)		-							
(7)		-							
(8)		-							
(9)		-							
(10)		-							
(11)		_							
(12)		-							
2 Ente	er total number of sectio	n 501(c)(3) and go	overnment organiza	ations listed in the	line 1 table			•	2
3 Ente	er total number of other	organizations liste	ed in the line 1 tabl	e				•	0

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

Part III	art III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.						
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance	
1 Investi	gative journalism grants	34	157,706	0	book		
2							
3							
4							
5							
6							
7							
Part IV	Supplemental Information. Provide	the information r	required in Part I, lin	e 2; Part III, columr	h (b); and any other addit	ional information.	
Schedule	, Part I, Line 2 - Before awarding grants, the F	und requires writter	n commitments from ne	ws outlets that suppo	rted work will be published o	r broadcast, as long as it meets the	
	nization's standards. The Fund pays half of th						
with the or	iginal proposal. The Fund also establishes de	adlines for complet	ion and monitors progr	ess of grantees for the	e duration of the grant period	l	

Schedule I (Form 990) (2016)

Schedule I, Part IV, State	FUND FOR INVES	FUND FOR INVESTIGATIVE JOURNALISM INC				
Form: Schedule I (2016)		EIN: 52-0895081				
Page: 1				Part II, Line 1		
Des	scription of Grants and Other Assistance to Governme	ents and Organizations in the United	States			
		Recipient EIN	Amt. of cash grant	Amt. of non- cash asst.		
Name and address	American University 4400 Massachusetts Avenue NW McKinley Suite 112 Washington, DC 20016-8017	53-0196549	7,000	0		
IRC code section	501(c)(3)					
Method of valuation	book					
Desc. of Non-Cash Asst.						
Purpose of grant	Investigative journalism grant					
Name and address	InvestigateWest P O Box 9574 Seattle, WA 98109	27-0170663	9,700	0		
IRC code section Method of valuation	501(c)(3) book					

Desc. of Non-Cash Asst. Purpose of grant

Investigative journalism grant

SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 or 990-I		OMB No. 1545-0047
(FOIII 990 01 990-EZ)	Complete to provide information for responses to specific question Form 990 or 990-EZ or to provide any additional information.	s on	2016
Department of the Treasury Internal Revenue Service	 Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www 	v.irs.gov/form990.	Open to Public Inspection
Name of the organization		Employer identifica	ation number
FUND FOR INVESTIG	ATIVE JOURNALISM INC	52-	0895081
Form 990, Part VI, Sec	tion B, Line 11b - The Fund provides an electronic copy of the Form 990 to the B	oard to review pr	ior to filing the form.
	tion B, Line 12c - The Fund has a conflict of interest policy. All board members r		
	pplications or contracts and recuse themselves when appropriate. All activities a licy, contracts or grants.	are routinely mon	Itored through the
	tion B, Line 15 - The search committee of the Fund, composed of board member		
other similar nonprofi	t organizations, and discussed it and what the budget would allow throughout th	e process of hirir	<u>ng.</u>
Form 990, Part VI, Sec the public upon writte	tion C, Line 19 - The Fund's governing documents, conflict of interest policy and n request.	l financial statem	ents are available to
	e 11g - Development Consultant Fees \$5,250; Program Fellowships \$42,834; Web	site and Adminis	trative support
\$18,440			

Schedule O, Statement 1

Form: Form 990 (2016)

Page: 1

FUND FOR INVESTIGATIVE JOURNALISM INC

EIN: 52-0895081

Header Section

Reasonable Cause Explanations

Explanation

The Fund for Investigative Journalism completed a timely Form 8868, Application for Automatic Extension of Time to File, and it was approved.