Form 990

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 201 Open to Public

Form 990 (2013)

Department of the Treasury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection For the 2013 calendar year, or tax year beginning 2013, and ending 20 Check if applicable: C Name of organization FUND FOR INVESTIGATIVE JOURNALISM, INC. D Employer identification number Address change Doing Business As 52-0895081 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Initial return 529 14TH STREET NW 13TH FLOOR 202-662-7564 Terminated City or town, state or province, country, and ZIP or foreign postal code Amended return WASHINGTON, DC 20045 G Gross receipts \$ 354.125 Application pending F Name and address of principal officer: H(a) is this a group return for subordinates? Yes Vo Brant Houston, President H(b) Are all subordinates included? Yes Vo √ 501(c)(3) ∢ (Insert no.) □ 4947(a)(1) or If "No," attach a list. (see instructions) Tax-exempt status: 501(c) (Website: ▶ WWW.FIJ.ORG H(c) Group exemption number Form of organization: Corporation Trust ☐ Association ☐ Other ▶ L Year of formation: 1969 M State of legal domicile: DC Part I Summary Briefly describe the organization's mission or most significant activities: The Organization provides critical support to independent journalists to investigate news stories regarding corruption, malfeasance, exploitation, or misappropriation of funds Activities & Governance in the public and private sectors. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 12 Number of independent voting members of the governing body (Part VI, line 1b) 4 12 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 1 Total number of volunteers (estimate if necessary) 6 0 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7b 0 Current Year 8 Contributions and grants (Part VIII, line 1h) . 273,884 353,140 Revenue 9 Program service revenue (Part VIII, line 2g) 0 10 investment income (Part VIII, column (A), lines 3, 4, and 7d) 805 985 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 0 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 274,689 354,125 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 260,836 248.976 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 48,967 54,086 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 13,854 26,669 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 336,472 316,916 19 Revenue less expenses. Subtract line 18 from line 12 -61.783 37,209 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 305,870 451,168 21 Total liabilities (Part X, line 26) . . -118,402 207,663 22 Net assets or fund balances. Subtract line 21 from line 20 187,468 243,505 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge, and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here ndra Type or print name and title Type preparer's name Date Paid Check TT Preparer Firm's EIN ▶ Use Only Firm's address ▶ Phone no.

(see instructions)

Cat. No. 11282Y

May the IRS discuss this return with the preparer shown above?

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2	013)
Part III	Sta

Part	
1	Check if Schedule O contains a response or note to any line in this Part III
•	Briefly describe the organization's mission:
	The Organization provides critical support to independent journalists to investigate news stories regarding corruption, malfeasance,
	expolitation, or misappropriation of funds in the public and private sectors.
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?
4	If "Yes," describe these changes on Schedule O.
*	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 \$ 298,781 including grants of \$ 248,976) (Revenue \$)
	The Fund for Investigative Journalism (FIJ) operates a grant program that provides critical support for freelance and independent
	journalists who produce investigative stories that otherwise would never come to light. Our grantees have ideas, sources, and
	know-how, but lack the funds to successfully complete an investigative project. To further support their work, the organization also
	seeks experienced investigative journalists as mentors for its grantees. Before awarding grants, the Fund receives written
	commitments from news outlets that supported work will be published or broadcast as long as it meets the news organizations'
	standards. Journalists who receive grants from the Fund present their work in newspapers, magazines, books, on broadcast
	programs TV and radio and on web sites in text, audio, and video.
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)

	•

4¢	(Code:) (Expenses \$ including grants of \$) (Revenue \$)

	*
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 298,781

Par	Checklist of Required Schedules	_		Page
			Yes	3 No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	1 2	╁	+
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Ť	/
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	1	1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		/
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		/
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			Ť
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
	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		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		V
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	11f		1
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.	12a 12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
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		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	1	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	201	W .	A

Part	IV Checklist of Required Schedules (continued)		_	raye -
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	
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		1
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		1
b b	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	N/	A A
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a	7	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	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? If "Yes," complete Schedule L, Part III	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):		7.5	•
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Schedule L, Part IV	28a 28b		<u>√</u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>▼</u>
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29		√ ✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u>·</u> ✓
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		<u>·</u> ✓
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		<u>~</u>
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		<u> </u>
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓ ✓
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	35b 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? If "Yes," complete Schedule R, Part VI			-
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	37	1	

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			. г					
			Yes	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 47								
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			İ					
C	and a series and the series with the series of topolicolo payments to toligois and								
0-	reportable gaming (gambling) winnings to prize winners?	1c	1						
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			İ					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	ـــــ					
3a	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	1_		١.					
b	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a	<u> </u>	✓					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	3b	 	-					
40	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		ŀ						
	account)?	4a		1					
b	If "Yes," enter the name of the foreign country: ▶			÷					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Ť					
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		\Box					
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 b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	_	<u> </u>					
·	required to file Form 8282?			,					
d	16 40 April 16 all and a state of the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and th	7c		✓					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		,					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		/					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	W	A					
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		ΙÀ					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			•					
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring								
	organization, have excess business holdings at any time during the year?	8	N	/A-					
9	Sponsoring organizations maintaining donor advised funds.		7						
а	Did the organization make any taxable distributions under section 4966?	9a	N	14					
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	Ŋ	/A					
10	Section 501(c)(7) organizations. Enter:		. `						
а	Initiation fees and capital contributions included on Part VIII, line 12								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b] n/a		*.						
11	Section 501(c)(12) organizations. Enter:								
	Gross income from members or shareholders								
-	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	Al	IA					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b n/a	124	- 	71					
	Section 501(c)(29) qualified nonprofit health insurance issuers.								
	Is the organization licensed to issue qualified health plans in more than one state?	13a	N	A					
	Note. See the instructions for additional information the organization must report on Schedule O.		1						
b	Enter the amount of reserves the organization is required to maintain by the states in which		ı						
	the organization is licensed to issue qualified health plans		-						
	Enter the amount of reserves on hand								
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	I	✓					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b							

Form 9	990 (2013)			Page
Par	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See ir	struc	"No
Seci	Check if Schedule O contains a response or note to any line in this Part VI	•	· ·	<u>. L</u>
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1;	2	1	+
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b 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 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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	1-	17
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5	1 -	1
6	Did the organization have members or stockholders?	6		1
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		1
b	stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	V	l
þ	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	9		1
Sect	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.)	
40-	Did the secretary to the state of the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the secretary to the se		Yes	No
1Ua h	Did the organization have local chapters, branches, or affiliates?	10a		1
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	\	
b 12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Ý	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b	lacksquare	
_	describe in Schedule O how this was done	40-	1	
13	Did the organization have a written whistleblower policy?	12c	V	
14	Did the organization have a written document retention and destruction policy?	14	\vdash	
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?			-
а	The organization's CEO, Executive Director, or top management official	15a	1	
b	Other officers or key employees of the organization	15b		
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	with a taxable entity during the year?	16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
0	organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed NONE			••••
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	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 inte financial statements available to the public during the tax year.	erest p	oolicy,	, and
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: Sandy Bergo, 529 14th Street NW 13th Floor Washington, DC 20045	of the		

Part VII	Compensation of Officers, Directors,	Trustees, Key	Employees,	Highest Compensat	ed Employees, a	anc
	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.

compensated employees; and former such pers	sons.									, , , ,	
☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.											
(A) Name and Title	(B) Average hours per week (list any	(do r box, office	not ch unles	Pos neck ss pe d a d	c) sition more erson lirect		one n an tee)	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated	
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) Brant Houston	1.0										
President		✓		✓	Ш			0	0	0	
(2) Peter Eisler	1.0					1					
Treasurer		✓		✓	L	ļ		0	0	0	
(3) Sarah Cohen	.50								•		
Member (4)		✓	_	_				0	0	0	
(4) Mark Feldstein	.50	1	ŀ		1						
Member (5) O 5:-14		_		\vdash	Н	<u> </u>		0	0	0	
(5) Gary Fields	.50	/									
Member (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amount (6) I amoun		V		-	-		_	0	0	0	
(6) James V Grimaldi Member	.50	1							_	_	
(7) Stephanie Mencimer	.50	<u> </u>	_					0	0	0	
Member	.50	/									
(0) 0 10	.50	•			-			0	0	0	
Member	·····	1						0	o		
(9) David Ottaway	.50	Ť			Н					0	
Member	·	/						o	0	0	
(10) Ricardo Sandoval Palos	.50						_			<u> </u>	
Member		✓						o	o	0	
(11) Alicia C Shepard	.50									<u></u>	
Member		✓		I				o	o	0	
(12) Tisha Thompson	.50		乛	\neg					<u>-</u>		
Member		1				- 1		o	o	0	
(13) Sandy Bergo	20.0		\neg	\neg	\neg					<u></u>	
Secretary/Executive Director				✓				50,000	0	0	
(14)					П						
	' '	- 1			- 1	- 1	- 1				

Page 7

art VII	Section A. Officers, Directors, Trusto (A) Name and title	(B) Average hours per	(do no box, u office	ot che	Positeck respersion	tion nore son i	than or s both or/truste	ne an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	E a	(F) stimat mount other	of r	
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	or a	mpens from ti ganiza nd rela ganiza	he ition ited	
5)								<u></u>			-			
6)								L						
7)														
8)											-			
9)														
20)			-											
21)			-	,										
22)			-								_			
23)		-												
24)						_		1			_			
		l l						_			0			
c To	ub-total . otal from continuation sheets to Pa otal (add lines 1b and 1c) .	rt VII, Seci	MION	•	•	•	• •		50.0	0	0			
2 7	otal (add lines 1b and 1c)	out not limit	ea to	tho	se l	iste	d abo	ve)	who received	more than \$100			Yes	N
3 D	id the organization list any former	officer, dir	ector	, or suc	tru ch ii	stee ndiv	e, key idual	er	nployee, or h	ighest compen	sated	3		1
4 F	or any individual listed on line 1a, is reanization, and related organization	the sum of ns greater	repor than	tabl \$15	le c 50,0	omp 0007	ensa If "	tior Yes	and other co " complete \$	mpensation tro Schedule J for	such	4		/
ir	ndividual	• • •	• •	•	4!	4			unrelated orga	anization or indi	vidual	5		
Section	B. Independent Contractors Complete this table for your five higher compensation from the organization.							.	-t that roo	oived more than	\$100.0	000 o nizati	f ion's	tax
	ear.								(1	3) of services		(C		
	Name and business	address							Description	01 361 11063				
NONE														
2	Total number of independent contr received more than \$100,000 of com	actors (inc	luding	bu	it n	ot	imited	to	those listed	above) who				

	rt VIII	Check if Schedule O		sponse or note	to any line in th	is Part VIII		
	ar				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts Tts	1a	Federated campaigns						
ons, Gifts, Grants Similar Amounts	b	Membership dues .						
A, A	C	Fundraising events .						
Contributions, Gifts, and Other Similar Ar	d	Related organizations						
Si ji	е	Government grants (conf	tributions) 1e					
at S	f	All other contributions, git						
혈		and similar amounts not inc						14 1 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Contributic and Other	g	Noncash contributions includ						
	h	Total. Add lines 1a-1f	<u>.</u>	>	353,140			
Program Service Revenue				Business Code			11 14 1	
Ne Ne	2a					' ' ' '		
æ	b		***************************************					
<u>§</u>	C		•••••		Ť T			
ĕ	d							
Ë	е							
ğ	f	All other program serv	ice revenue .					
2	g	Total. Add lines 2a-2f				B 500 - 1 - 2015		<u> </u>
	3	Investment income (i	including divid	dends, interest,			l .	
		and other similar amou	unts)	•	985		İ	985
	4	Income from investment			300			300
	5	Royalties						
		Γ	(i) Real	(ii) Personal				
	6a	Gross rents		 ``				
	Ь	Less: rental expenses						
	C	Rental income or (loss)		 				
	ď	Net rental income or (loss)	000	'	2.35	The state of the	* * *	
	7a	Gross amount from sales of	(i) Securities	(ii) Other	*			
	'"	assets other than inventory	1,, 0000111100	(, G				
	ь	Less: cost or other basis		 				
		and sales expenses .						
		·						
	C	Gain or (loss) L		 	4.3			i* ·
	d	Net gain or (loss) .	• • • • •	· · · · P	<u> </u>			
<u>a</u>		0						
Revenue	8a	Gross income from fun	ndraising					
eVe		events (not including \$		İ				
Œ		of contributions reported						
Other		See Part IV, line 18 .	-				44 45	
ŏ		Less: direct expenses						
	C	Net income or (loss) from	om fundraising	events . >				
	9a	Gross income from gan	ning activities.				•	
		See Part IV, line 19 .					9	
	b	Less: direct expenses					•	
	С	Net income or (loss) fro		ivities ▶				
	10a	Gross sales of inv	entory, less			1.0		
		returns and allowances	i · · · a					
	b	Less: cost of goods so	ld b		And the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s			
- 1	С	Net income or (loss) fro		entory >				
		Miscellaneous Rev	/enue	Business Code	, sign of the			
[11a							
1	b							
	С							•
	d.	All other revenue .	• • • • •		`			
	e	Total. Add lines 11a-1		•				
	12	Total revenue. See ins			354,125	0	0	005
			•		337,123		UI	985

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com	nplete all columns. A	All other organization	ns must complete co	lumn (A).
<u>Da =</u>	Check if Schedule O contains a respon				
<i>8b, 9</i>	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	239,576	239,576		
3	Grants and other assistance to governments, organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	9,400	9,400		
4 5	Benefits paid to or for members Compensation of current officers, directors,	0	0		·
	trustees, and key employees	50,000	37,500	5,000	7,500
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	o	0	0	0
7	Other salaries and wages	0	0	0	0
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	4,086	2,869	643	574
11 a	Fees for services (non-employees): Management	o			
b	Legal	0	0	0 0	0
C	Accounting	2,609	1,957	261	391
d e	Lobbying	0	0	0	0
f	Investment management fees	0	0	0	0
9	Other. (If line 11g amount exceeds 10% of line 25, column				
12	(A) amount, list line 11g expenses on Schedule O.) Advertising and promotion	0	0	0	0
13	Office expenses	279 1,477	279 794	400	283
14	Information technology	690	690	0	0
15	Royalties	0	0	0	0
16 17	Occupancy	6,000	4,500	600	900
18	Payments of travel or entertainment expenses	0	0	0	0
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	1,183	4	582	597
20 21	Interest	0	0	0	0
22	Depreciation, depletion, and amortization .	339	254	34	<u>0</u> 51
23	Insurance	1,277	958	128	191
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a b c					
d e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	316,916	298,781	7,648	10,487
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) if		23,00	.,,5.10	.5, 107

Part X Balance Sheet

_		Check if Schedule O contains a response or note to any line in this Pa	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	11,283	1	15,96
	2	Savings and temporary cash investments	204,042	2	353,41
	3	Pledges and grants receivable, net	27,500	3	
	4	Accounts receivable, net	897	4	80
w	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	·
	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	er i
Assets	7	Notes and loans receivable, net	0	7	
Ą	8	Inventories for sale or use	0	8	
	9	Prepaid expenses and deferred charges	382		552
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 1,016	302		
	ь	Less: accumulated depreciation 10b -1.016		10c	
	11	Investments—publicly traded securities	61,427		00.440
	12	Investments—other securities. See Part IV, line 11	01,427		80,443
	13	Investments – program-related. See Part IV, line 11	0		0
	14	Intangible assets	. 0	14	
	15	Other assets. See Part IV, line 11	0		0
	16	Total assets. Add lines 1 through 15 (must equal line 34)		_	0
	17	Accounts payable and accrued expenses	305,870		451,168
	18	Grants payable	433		1,777
	19	Deferred revenue	117,969		205,886
	20	Tax-exempt bond liabilities	0		0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
Ľ	23	Secured mortgages and notes payable to unrelated third parties	0	23	. 0
,	24	Unsecured notes and loans payable to unrelated third parties	0	_	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			
	26	Total liabilities. Add lines 17 through 25	0	25 26	0
		Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and	118,402	20	207,663
nces	07	complete lines 27 through 29, and lines 33 and 34.			
믍	27	Unrestricted net assets			185,147
<u>m</u>	28	Temporarily restricted net assets	97,195	28	58,358
Net Assets or Fund Balances	29	Permanently restricted net assets		29	
ន	30	Capital stock or trust principal, or current funds		30	
ss	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
۲	32	Retained earnings, endowment, accumulated income, or other funds .		32	
<u> </u>	33	Total net assets or fund balances	187,468	33	243,505
	34	Total liabilities and net assets/fund balances		34	451,168
			000,0101		Form 990 (2013)

	990 (2013)			P	age 12
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	ī			54,125
2		2			16,916
3	Revenue less expenses. Subtract line 2 from line 1	3			37,209
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3			37,468
5	Net unrealized gains (losses) on investments	5			18,828
6	Donated services and use of facilities	3			0
7		7			0
8	Prior period adjustments	3			0
9	Other changes in net assets or fund balances (explain in Schedule O)	,			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	ا ه		24	13,505
Par	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			1 -	
	If the organization changed its method of accounting from a prior year or checked "Other," explain Schedule O.	n in			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		1
	If "Yes," check a box below to indicate whether the financial statements for the year were compile	d or			<u> </u>
	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	1	1
	If "Yes," check a box below to indicate whether the financial statements for the year were audited of	on a			
	separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs	iaht			
	of the audit, review, or compilation of its financial statements and selection of an independent accounta	nt?	2c		

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in 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 undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Schedule O.

2c

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Form **990** (2013)

SCHEDULE A (Form 990 or 990-EZ)

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.

2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► 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	Name of the organization Employer identification number								_		
FUND FOR INVESTIGATIVE JOURNALISM, INC. 52-0895081 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.							895081				
Pai									instructi	ons.	_
1 2 3	2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	4 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:										
5	5 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.)										
6 7	An organization	on that normally	nment or government receives a substantia)(A)(vi). (Complete Pa	al part of	escribed i its supp	n sectio i ort from	n 170(b)([*] a govern	1)(A)(v). mental ui	nit or from	m the general publi	С
8	☐ A community	trust described i	n section 170(b)(1)(A)(vi). (Co	mplete P	art II.)					
9	receipts from support from	activities related gross investme	receives: (1) more that d to its exempt function ent income and unre lifter June 30, 1975. So	tions—su lated bu	bject to siness ta	certain e xable in	xceptions	s, and (2) ss sectio	no mor	e than 331/3% of it	s
10 11	An organization	on organized ar one or more pub	d operated exclusively and operated exclusively colicly supported organ describes the type of	ely for th	ne benefi describe	it of, to d in sect	perform ion 509(a	the funct a)(1) or se	tions of, ection 50	9(a)(2). See section	e n
е	a Type I By checking to other than four or section 509	ındation manage	II c Type II that the organization ers and other than on	is not co	ntrolled o	directly o	r indirectl	y by one	or more	tionally integrated disqualified personal in section 509(a)(1	s)
f		ation received a	a written determination	on from	the IRS	that it is	a Type	I, Type	II, or Typ	oe III supporting	1
g	Since August following pers		he organization accep	pted any	gift or c	ontributio	n from a	iny of the	•		,
			ndirectly controls, eithody of the supported						din (ii) a	nd Yes No	<u>-</u>
		- -	on described in (i) abo	-						11g(ii)	-
		•	a person described in							11g(iii)	-
h	Provide the fo	llowing informati	on about the support	ed organ	ization(s).	•					-
(ī) I	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col. (i) lis	organization sted in your document?	the orgai	ou notify nization in of your port?	organizat (i) organi	s the ion in col. zed in the S.?	(vii) Amount of monetary support	,
				Yes	No	Yes	No	Yes	No		
(A)											-
(B)											-
(C)											-
(D)											-
(E)											-
											-

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.)

Sect	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	100,200					
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	100,200	234,262	211,665	273,884	353,140	1,173,151
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0				
4	Total. Add lines 1 through 3	100,200	234,262	211,665	273,884	353,140	1,173,151
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)					333,110	
6	Public support. Subtract line 5 from line 4.						908,259
	ion B. Total Support						264,892
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	100,200	234,262	211.665	273,884	353,140	1,173,151
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar				2.0,00	333,140	1,175,151
_	sources	536	456	637	805	985	3,419
	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0		0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	o	O	0	0	0
11	Total support. Add lines 7 through 10		ti selopiske		San a like		1,176,570
12	Gross receipts from related activities, etc.					12	0
13	First five years. If the Form 990 is for the organization, check this box and stop her	re				ear as a section	
	on C. Computation of Public Suppor						
14	Public support percentage for 2013 (line 6					14	22.51 %
15 16a	Public support percentage from 2012 Sch 331/a% support test—2013. If the organization qual box and stop here. The organization qual	zation did not o	heck the box	 on line 13, and organization	ا ا line 14 is 33	15 3% or more, ch	
b		ization did not	check a box	on line 13 or	16a, and line	15 is 33½% o	r more,
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part IV how the organization meets the "fa organization	ets the "facts-a acts-and-circui	nd-circumstar nstances" test	nces" test, che t. The organiza	ck this box and tion qualifies a	d stop here. Exas a publicly su	plain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization Explain in Part IV how the organization mosupported organization	ion meets the eets the "facts	"facts-and-cir -and-circumsta	cumstances" t ances" test. Th	test, check thi ne organizatior	is box and sto	and line p here. publicly
18	Private foundation. If the organization did instructions	d not check a b	ox on line 13,	16a, 16b, 17a,	or 17b, check		. ▶ □ ee . ▶ □

Part	III Support Schedule for Organiza	ations Descr	ihed in Sect	ion 509(a)(2)			J/A
ı aı v	(Complete only if you checked the					to qualify:	under Bort II
	If the organization fails to qualify						inder Fait II.
Secti	ion A. Public Support	under the te	Sta listed Del	ow, piease ci	bilipiete Part	11.)	
	idar year (or fiscal year beginning in)	(-) 0000	(h) 0010	(-) 0044	(n 0040	1 1 2 2 2 2 2	1 10 7
		(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees		ł			ļ	
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise						
2	sold or services performed, or facilities				ļ		
	furnished in any activity that is related to the		ļ		ĺ		
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an		į				-
	unrelated trade or business under section 513						1
4	Tax revenues levied for the						
	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			ļ			
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3					<u> </u>	
	received from disqualified persons .				1		
	· · ·						
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		·				
	Add lines 7a and 7b	- ;					
8	Public support (Subtract line 7c from						
	line 6.)				right to		
	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 .					ľ	į
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
• •	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or				<u>-</u>		
12	loss from the sale of capital assets						
	(Explain in Part IV.)						1
13	Total support. (Add lines 9, 10c, 11,						
.0	and 12.)						
14	First five years. If the Form 990 is for th	o organization	'a first sees	d third fourth	or fifth tou us		tion 501/a\/2\
14	organization, check this box and stop her	_	•		•		
C4						• • • •	▶ 🛚
	on C. Computation of Public Suppor			- 1 (0)		T .= I	
15	Public support percentage for 2013 (line 8		-			15	<u>%</u>
16	Public support percentage from 2012 Sch				<u></u>	16	<u>%</u>
	on D. Computation of Investment Inc					· · · · · · · · · · · · · · · · · · ·	
17	Investment income percentage for 2013 (I					17	%
18	Investment income percentage from 2012					18	<u>%</u>
19a	331/3% support tests—2013. If the organi						
	17 is not more than 331/3%, check this box a		-			-	
b	331/3% support tests—2012. If the organiz						
	line 18 is not more than 331/3%, check this b		_				
20	Private foundation. If the organization did	d not check a l	oox on line 14.	19a, or 19b, c	heck this box	and see inst	ructions > \box

Part III, line 12. Also complete this part for any additional information. (See instructions).
Part II, Section B, Line 17A, 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 1.170A-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 1.170A-9T Section (F) Subsection (III) the level of public support for the fund has varied over the years, and in 2012
and 2013, the level was 19.91% and 22.51%, 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 around the country with well established journalism and
investigative reporting programs. The academic institutions represented currently on the board include the University of Illinois, University
of Maryland and the University of Nevada-Las Vegas.
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 illegal 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 B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

2013

OMB No. 1545-0047

Name of the organization	Employer identification number							
FUND FOR INVESTIGATIVE	52-0895081							
Organization type (check one):								
Filers of:	Section:							
Form 990 or 990-EZ	✓ 501(c)(3) (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private for	ındation						
	☐ 527 political organization							
Form 990-PF	501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private founda	tion						
	501(c)(3) taxable private foundation							
Check if your organization i	s covered by the General Rule or a Special Rule.							
Note. Only a section 501(c) instructions.	(7), (8), or (10) organization can check boxes for both the General Rule a	nd a Special Rule. See						
General Rule								
For an organization property) from any	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,0 one contributor. Complete Parts I and II.	00 or more (in money or						
Special Rules								
under sections 509 the greater of (1) \$	For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.							
during the year, tot	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
during the year, co not total to more th year for an <i>exclusiv</i> applies to this orga								
Caution. An organization th	at is not covered by the General Rule and/or the Special Rules does not	file Schedule B (Form 990.						

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

	rage a
Name of organization	Employer identification number
FUND FOR INVESTIGATIVE JOURNALISM, INC	52-0895081

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) No. Name, address, and ZIP + 4 Total contributions Type of contribution 1 ETHICS AND EXCELLENCE IN JOURNALISM FOUNDATION Person \square Pavroli 210 Park Avenue, Suite 3150 100,000 Noncash (Complete Part II for Oklahoma City, OK 73102 noncash contributions.) (a) No. (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 NICHOLAS B OTTAWAY FOUNDATION Person **Pavroll** P. O. Box 401 25,000 Noncash П (Complete Part II for Campbell Hall, NY 10916-0401 noncash contributions.) (a) (c) (d) No. Name, address, and ZiP + 4 **Total contributions** Type of contribution 3 **GANNETT FOUNDATION** Person **Payroll** 7950 Jones Branch Drive 18,000 Noncash (Complete Part II for McLean, VA 22107 noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 4 PARK FOUNDATION Person Ø **Payroll** P. O. Box 550 50,000 Noncash (Complete Part II for Ithaca, NY 14851 noncash contributions.) (a) (c) No. Name, address, and ZIP + 4 Total contributions Type of contribution THE NARA FUND Person \square Pavroll \Box P. O. Box 2927 15,000 Noncash (Complete Part II for noncash contributions.) Framingham, MA 01703 (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 6 HERB BLOCK FOUNDATION Person ☑ Payroll 1730 M Street NW 901 10,000 Noncash (Complete Part II for Washington, DC 20036 noncash contributions.)

	(Form 990, 990-EZ, or 990-PF) (2013)		Page
	organization	Er	nployer identification number
Part I	R INVESTIVATIVE JOURNALISM, INC Contributors (see instructions). Use duplicate cop	ies of Part I if additional space is	52-0895081 needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	REVA AND ADVID LOGAN FOUNDATION 980 N. Michigan Avenue #1122 Chicago, IL 60611	\$\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	WILLIAM L. MATZKIN TRUST 3261 Worthing Street NW Washington, DC 20015	\$\$\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person

Name of o	rganization		Employer identification number
FUND FOR	R INVESTIGATIVE JOURNALISM, INC		52-0895081
Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional	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
		\$	

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990. ► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 20**13**

Open to Public Inspection

Employer identification number

FUND FOR INVESTIGATIVE JOURNALISM 52-0895081 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) . 2 Aggregate grants from (during year) . . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No **Conservation Easements.** Part II Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area ☐ Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, . Part III. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: **b** Assets included in Form 990, Part X

Par	Organizations Maintaining	ງ Collections of	Art, His	storical	Treasure	s, or Ot	her Similar	Assets (co	intinued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and o						a significan	
а	Public exhibition	•		П.				N/A	
	=				or exchar			,	
b	Scholarly researchPreservation for future generation	_	е	☐ Othe					
С 4)_i_ b	مالسنگ بيمال	41	!		
*	Provide a description of the organiza XIII.				-	-			ose in Part
5	During the year, did the organization assets to be sold to raise funds rather	r than to be maint	donation	ns of art, part of th	historical e organiza	treasures tion's co	s, or other sir llection? .		s 🗌 No
Par	Escrow and Custodial Arra	angements.			***				
	Complete if the organization 990, Part X, line 21.								Form
1a	990, Part X, line 21. Is the organization an agent, trustee included on Form 990, Part X?	, custodian or oti	her inten	nediary f	or contribu	itions or	other assets	not /	es 🗆 No
b	If "Yes," explain the arrangement in P	art XIII and compl	ete the f	ollowing t	able:			Amount	
_	Basissias balanca					-		Amount	
C	Beginning balance					1c			
d	Additions during the year					<u>1d</u>	4		
e	Distributions during the year					1e			
f	Ending balance					1f			<u></u>
2a	Did the organization include an amou								_
	If "Yes," explain the arrangement in P	art XIII. Check her	e if the e	xplanatio	n has beer	n provide	d in Part XIII	<u></u>	Ц
Par	t V Endowment Funds.							NIA	
	Complete if the organization								
	,	(a) Current year	(b) Pr	ior year	(c) Two yea	ars back	(d) Three years b	ack (e) Four	years back
1a	Beginning of year balance					l			
b	Contributions								
C	Net investment earnings, gains, and losses								
d	Grants or scholarships								
	Other expenditures for facilities and								
	programs								
f	Administrative expenses	,							
g	End of year balance								
2	Provide the estimated percentage of t	he current year er	nd balanc	e (line 1g	, column (a	a)) held a	s:		
а	Board designated or quasi-endowmer	nt 🕨	%		•				
b	Permanent endowment ▶	%							
С	Temporarily restricted endowment ▶	· %							
	The percentages in lines 2a, 2b, and 2	c should equal 10	00%.						
3a	Are there endowment funds not in the			zation tha	at are held	and adn	ninistered for	the	
	organization by:	•	•					T.	Yes No
	(i) unrelated organizations							. 3a(i)	
	(ii) related organizations							. 3a(ii)	
b	If "Yes" to 3a(ii), are the related organi			n Schedi	 			3b	
4	Describe in Part XIII the intended uses							. [30]	
Part			3 61100	Willelit	11103.				
ı aı ı			" to Ear	~ 000 D	art IV line	110 0	Farm 000	Dowl V II.	10
	Complete if the organization Description of property								
		(a) Cost or ot (investm			r other basis ther)		ccumulated preciation	(d) Book	value
1a	Land								
b	Buildings								
C	Leasehold improvements								
d	Equipment				1,016		1,016		0
е	Other	•							
Total.	Add lines 1a through 1e. (Column (d) m	oust equal Form 9	90, Part)	(, column	(B), line 10)(c).) .	▶		0

Part VII	Investments—Other Securitie		000 B+ N/ !!	441 0 5	NA
	Complete if the organization and				
	(a) Description of security or catego (including name of security)		(b) Book value		thod of valuation: d-of-year market value
(1) Financial					
	neld equity interests				
(3) Other		*****************************			
(A)	***************************************				
(B)					
(C)	***************************************				
(D)					
(E)		**********************			
(F)					
(G)		***************************************			
(H)					
	o) must equal Form 990, Part X, col. (B) line 12.) ▶				
Part VIII	Investments—Program Relate				NA
	Complete if the organization ans	swered "Yes" to For		11c. See Form	990, Part X, line 13.
	(a) Description of investment		(b) Book value		thod of valuation: -of-year market value
(1)					
_(2)					
(3)					
(4)					
(5)					
_(6)					
(7)					
(8)					
(9)					
) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.				NA
	Complete if the organization ans		n 990, Part IV, line	11d. See Form	990, Part X, line 15.
		a) Description			(b) Book value
(1)					
(2)					
_(3)			<u></u>		
(4)					
(5)					
(6)					
(7)					
(8)					
	nn (b) must equal Form 990, Part X, co	ol (R) line 15.)			
Part X	Other Liabilities.	Oi. (D) III e 13.)	• • • • •		
rurex	Complete if the organization answers	wered "Voc" to Forn	a DOOL Book IV line	110 04 116 000	F 000 B+ V
	line 25.	wered les to rolli	1 990, Fart IV, IIIIe	Tie or Tif. See	rorm 990, Part X,
1.	(a) Description of liability	(b) Book value			N/H
(1) Federal inc		(5) 5000 14400			
(2)					
(3)				•	
(4)					
(5)			 		
(6)					
(7)					
(8)					
(9)					
Total. (Column (b)	must equal Form 990, Part X, col. (B) line 25.)				
2. Liability for u	incertain tax positions. In Part XIII, provident	de the text of the footno	te to the organization's	s financial statemen	ts that reports the
organization's	liability for uncertain tax positions under	FIN 48 (ASC 740). Chec	k here if the text of the	footnote has been	provided in Part XIII

Schedule	D/	Form	aan\	201	2
Schedule	υu	COMM	3301	201	.3

Doce	4

Par	XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenue per	Return	
	Complete if the organization answered "Yes" to Form 990,	Part IV. line 12a.		· N/A
1	Total revenue, gains, and other support per audited financial statements		1 1	<u> </u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		 	
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	1	
C	Recoveries of prior year grants		1	
d	Other (Describe in Part XIII.)	2d	1	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	 	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)		1	
C	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)	5	
Part		nents With Expenses pe		m.
-	Complete if the organization answered "Yes" to Form 990, I	Part IV. line 12a.		••••
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		 	
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses		1	
d	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b		4c	
_ 5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.)	5	
	XIII Supplemental Information.			
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 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 in	formatio	n.

	•			
*********				***************************************

	•			
	***************************************		•••••	

			•	
	***************************************		•••••	
			•••••	

Schedule D (Fo	m 990) 2013	Page 5
Part XIII	Supplemental Information (continued)	

••••••		

•••	***************************************	
	***************************************	***************************************

		•••••••••••••••••••••••••••••••••••••••
••••		

SCHEDULE F (Form 990)

Name of the organization

Statement of Activities Outside the United States

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

	of the organization					Employer i	dentification number
	FOR INVESTIGATIVE JOURNA General Informatio	LISM, INC	iaa Outaida	the Head Outer O		5	2-0895081
rai	Form 990, Part IV, line		ies Outside	the United States. Com	iplete if the organ	ization ans	swered "Yes" on
1	For grantmakers. Does the assistance, the grantees' e grants or assistance?	e organization	e grants or as	sistance, and the selectio	nount of its grants n criteria used to	and othe award the	r e □Yes □No
2	For grantmakers. Describ assistance outside the Unit	e in Part V ed States.	the organizati	on's procedures for mon	itoring the use o	f its gran	ts and other
3	Activities per Region. (The f	ollowing Part	I, line 3 table o	can be duplicated if additio	nal space is need	led.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity liste a program se describe specific service(s) in r	d in (d) is	(f) Total expenditures for and investments in region
_(1)	···						
(2)						3.	
(3)							
(4)							
(5)						it.	
(6)							
(7)				e e			
(8)			1				
(9)	¥:		-				
(10)							
(11)					9		
(12)							
(13)	l l						
(14)	7						
(15)							
(16)							
(17)							
3a b	Sub-total						

c Totals (add lines 3a and 3b)

Page 2

Schedule F (Form 990) 2013

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	(h) IBS code			/c/ A	18 of An IRS code (A Basics (A Basics) (A Busics) (A Busics) (A Busics) (A Busics) (A Busics) (A Busics)	(a) Amount of	naanan.	(ii) Mathod of
organization	section and EIN (if applicable)	linifau (a)	grant	(e) Anount of cash grant	cash disbursement	non-cash assistance	(h) Description of non-cash assistance	(book, FMV, appraisal, other)
(1)								
(2)								
(C)								
€								
(2)								
(9)								
£								
(8)								
(6)								
(10)								
(1)								
(12)								
(8)								
(14)								
(15)								
(16)								
							T	

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

Enter total number of other organizations or entities ო

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013

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 Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (a) Type of grant or assistance (e) Manner of (f) Amount of (b) Region (c) Number of (d) Amount of (g) Description of non-cash assistance cash non-cash recipients cash grant disbursement assistance (1) investigative journalism Sub-Saharan Africa 3,200 wire 0 n/a book (2) investigative journalism Russia & Neighbor States 1 4,000 wire 0 n/a book (3) investigative journalism South Asia 1 2,200 wire 0 n/a book (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

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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 (and Instructions for Form 926).		
	Corporation (see Instructions for Form 926)	☐ Yes	₹
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to 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)	☐ Yes	₹
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	✓
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	7
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	V
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 file Form 5713, International Boycott Report (see Instructions		
	for Form 5713)	☐ Yes	√

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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization							Employe	er identification numb	er
FUND FOR INVESTIGATIVE JOURNAL								52-0895081	
Part I General Information									
 Does the organization mainta the selection criteria used to 	in records to sub: award the grants	stantiate the amo: or assistance?	unt of the grants or	assistance, the g	rantees' eligibility	for the grants or a	ssistance	e, and · · V Yes	
2 Describe in Part IV the organi			the use of grant fu	nds in the United	States.		• • •	· · M tes	□No
Part II Grants and Other As	sistance to Go	vernments and	Organizations	in the United S	tates. Complete	if the organization	าก ลกรเพศ	ered "Ves" to E	2rm 990
Part IV, line 21, for an	y recipient that	received more ti	nan \$5,000. Part	Il can be duplic	ated if additional	space is needed	i.	sied les toll	AIII 33Q
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(a) Amount of non-	(f) Method of valuation (book, FMV, appraisal, other)		of	(h) Purpose of or assistance	
(1) Fdtn for National Progress									
222 Sutter St #600 San Francisco, CA	94-2282759	501(c)(3)	6.000	0	book	n/a		educational	
(2) KBOO Foundation		-	·					Cuucadonal	
20 SE 8th Ave., Portland, OR 97214	23-7232987	501(c)(3)	5,500	0	book	n/a		educational	
(3) MuckRock News									
P. O. Box 5819 Boston, MA 02205	45-1116826		7,000	0	book	n/a	1	educational	
(4)									·
(5)									
(6)									
(7)									
(0)									
(8)							1		
(9)									
(10)									
(11)									
(12)									
2 Enter total number of section	501(a)(0) and							· · · · · · · · · · · · · · · · · · ·	
2 Enter total number of section3 Enter total number of other or	อบ เ(C)(ฮ) and gov danizations listed	ernment organiza	tions listed in the li	ne 1 table	• • • • • •	· · · · · · ·		2	
- Little total Harrison of Other Or	garnzations iisteu	minie ilie i table	<u> </u>					P 1	

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 Before awarding grants, the Fund requires written commitments from news outlets that supported work will be published or broadcast, as long as it meets the news organization's (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. ₽/U (e) Method of valuation (book, FMV, appraisal, other) proposal. The Fund also establishes deadlines for completion and monitors progress of grantees for the duration of the grant period. book (d) Amount of non-cash assistance 177,481 (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients 41 (a) Type of grant or assistance 1 Investigative journalism grants Part III Part IV N က 4 Ŋ 9

Schedule I (Form 990) (2013)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

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

Open to Public Inspection

Employer identification number

FUND FOR INVESTIGATIVE JOURNALISM, INC	52-0895081
Part VI, Section B. Policies Line 11b The Fund provides an electronic copy of the 990 to the Board	to review prior to filing the form.
Part VI, Section B. Policies Line 12 The Fund has a conflict of interest policy. All board members r	nust disclose any connections or
interest in any grant applications or contracts and recuse themselves when appropriate. All activities	are routinely monitored through the
process of making policy, contracts or grants.	
Part VI, Section B. Policies, Line 15 The search committee of the Fund, composed of board members	, reviewed comparable salaries at
other similar nonprofit organizations, and discussed it and what the budget would allow throughout the	e process of hiring.
Part VI, Section C. Disclosure, Line 19 The Fund's governing documents, conflict of interest policy a	nd financial statements are
available to the public upon written request.	
Part XI Reconciliation of Net Assets	
Line 5 - Net unrealized gains on investments reflect the difference in the cost of the marketable security	y and the Fair market value @ 12/31/13
	•••••