Electronic Filing Client Status History for Tax Year 2023

EFIN: ***353 (Lane & Company, CPAs)

Client:	THE DAILY CALLER NEWS FOUNDATION
Client EIN:	**-***2471
Type:	990 Fed
Ret. SBM ID:	781353202417109idbub
1st Ext. SBM ID:	78135320241020967qcp

istory:	
Status	Status Date
1st Extension Accepted	04/11/2024
Status	Status Date
Return Accepted	06/19/2024
Status	Status Date
1st Extension Sent to IRS	04/11/2024
Status	Status Date
Return Sent to IRS	06/19/2024
Status	Status Date
1st Extension Received by Intuit	04/11/2024
Status	Status Date
Return Received by Intuit	06/19/2024
Status	Status Date
1st Extension Transmitted	04/11/2024
Status	Status Date
Return Transmitted	06/19/2024
Status	Status Date
1st Extension Ready to Transmit	04/11/2024
Status	Status Date
Return Ready to Transmit	06/19/2024

Electronic Filing Client Status History for Tax Year 2023

Status	Status Date
1st Extension Marked for EF	04/11/2024
Status	Status Date

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public

23

20

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

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

Department of the Treasury Internal Revenue Service

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

Inter	ernal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest in					Inspection						
Α	For the	e 2023 calen	dar year, or tax year beginning , 2023, and endi	ng		, 20						
в	Check if	f applicable:	C Name of organization THE DAILY CALLER NEWS FOUNDATION		D Empl	oyer identification number						
	Address	s change	Doing business as 45-2922471									
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address)	none number								
	Initial re	turn	(904)228-6464								
	Final ret	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code									
	Amende	ed return			receipts \$3,931,063.							
	Applicat	tion pending	H(a) Is this a gro	oup return fo	or subordinates? 🗌 Yes 🛛 No							
	NEIL PATEL, 1775 EYE ST NW, WASHINGTON, DC 20006 H(b) Are all subordinates included? Yes											
I	I Tax-exempt status: 🗴 501(c)(3) 🗍 501(c) () (insert no.) 🗍 4947(a)(1) or 🗍 527 If "No," attach a list. See instructions.											
J	Website	e: DAILY	CALLERNEWSFOUNDATION.ORG	H(c) Group ex	kemption	number						
К	Form of	organization: 🗙	Corporation Trust Association Other L Year of form	nation: 2011	M State	of legal domicile: DC						
Ρ	art I	Summa	•									
	1	Briefly des	cribe the organization's mission or most significant activities: FORME	D WITH A MISSI	ON TO	TRAIN UP-AND-COMING						
lce		REPORTE	RS AND EDITORS, TO CARRY OUT INVESTIGATIVE REP	ORTING, ANI	O TO	PERFORM						
nar			LICY REPORTING WITH A PURPOSE OF CONSUMER AWA									
Activities & Governance	2		box if the organization discontinued its operations or disposed		5% of it	s net assets.						
ဗိ	3		voting members of the governing body (Part VI, line 1a)		3	4						
യ് ഗ	4		independent voting members of the governing body (Part VI, line 1)	,	4	3						
itie	5	Total numb	5	45								
ĭį	6	Total numb	6	3								
Ă	7a				7a	0.						
	b	Net unrelat	ed business taxable income from Form 990-T, Part I, line 11		7b	0.						
				Prior Year		Current Year						
ne	8		ons and grants (Part VIII, line 1h)	3,242,	939.	3,839,132.						
Revenue	9	-	ervice revenue (Part VIII, line 2g)									
Re	10		income (Part VIII, column (A), lines 3, 4, and 7d)		989.	91,931.						
	11		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		244.	-180,228.						
	12		ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,175,	684.	3,750,835.						
	13		I similar amounts paid (Part IX, column (A), lines 1–3)									
	14		aid to or for members (Part IX, column (A), line 4)	1.005	- 1 1	0 100 001						
ses	15		her compensation, employee benefits (Part IX, column (A), lines 5–10)	1,295,	511.	2,123,361.						
Expenses	16a		al fundraising fees (Part IX, column (A), line 11e)									
Ä	b		aising expenses (Part IX, column (D), line 25) 402, 406.	7.77	620	1 105 006						
_	17		enses (Part IX, column (A), lines 11a–11d, 11f–24e)		638.	1,125,226.						
	18		nses. Add lines 13–17 (must equal Part IX, column (A), line 25) .	2,023,		3,248,587.						
<u>د</u>	19		ess expenses. Subtract line 18 from line 12	1,152,		502,248. End of Year						
Net Assets or Fund Balances	20	Total accord	s (Part X, line 16)	Beginning of Curro								
Asse Bala	20			3,467,		3,992,333.						
Vet /	21		ties (Part X, line 26)		674.	49,993.						
<u>~</u> й	22	iver assets	or fund balances. Subtract line 21 from line 20	3,410,	41U.	3,942,340.						

Part II 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.

					06	/19/2024	
Sign	Signature of officer				Date		
Here	NEIL PAT	CEL, CHAIRMAN					
Γ	Type or print name an	nd title					
Paid	Print/Type prepare	er's name	Preparer's signature	Date		Check X if	PTIN
Preparer	ROBERT E.	LANE		06/19/2	2024	self-employed	P01622353
Use Only		Lane & Company,	CPAs		Firm's	s EIN 52-1	738520
	Firm's address	eno. (202)6	517-2615				
May the IRS	S discuss this ret	urn with the preparer s	shown above? See instructions				🗙 Yes 🗌 No
							- 000 /

For Paperwork Reduction Act Notice, see the separate instructions. BAA

Form 99	00 (2023)	Page 2
Part	III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	· · · · <u>A</u>
•	FORMED WITH A MISSION TO TRAIN UP-AND-COMING	
	REPORTERS AND EDITORS, TO CARRY OUT INVESTIGATIVE REPORTING, AND TO PERFORM	
	DEEP POLICY REPORTING WITH A PURPOSE OF CONSUMER AWARENESS AND EDUCATION.	
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.	Yes 🗙 No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
•		Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services,	as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations	ations to others,
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 1,509,616. including grants of \$) (Revenue \$	
	FELLOWS (AMERICAN JOURNALISM INSTITUTE): OUR FELLOWSHIP PROGRAM TRAINS	
	YOUNG REPORTERS AND EDITORS THROUGH A TWO-YEAR ON THE JOB TRAINING PROGRAM.	
4b	(Code:) (Expenses \$585,944. including grants of \$) (Revenue \$	0.)
	INVESTIGATIVE GROUP: WE HOST AN EXPERIENCED TEAM OF INVESTIGATIVE	
	JOURNALISTS WITH A STRONG RECORD OF BREAKING ORIGINAL NEWS STORIES	
4c	(Code:) (Expenses \$160,513. including grants of \$) (Revenue \$	0.)
	COMMENTARY: OUR POLICY REPORTING TEAM REPORTS ON NUMEROUS DOMESTIC AND	
	FOREIGN POLICY MATTERS INCLUDING ENERGY, EDUCATION, ONLINE VIDEO	
	JOURNALISM, AND NATIONAL SECURITY.	
	·	
4d	Other program services (Describe on Schedule O.)	
40	(Expenses \$ 89,557. including grants of \$ 0.) (Revenue \$ 0.)	
4e	Total program service expenses 2,345,630. REV 05/09/24 PRO	Form 990 (2023)

Form 99	0 (2023)		F	Page 3
Part	IV Checklist of Required Schedules		-	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	×	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	×	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		×
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> .	5		×
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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		×
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	×	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		×
с	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		×
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	×	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	×	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
15	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .	14b		×
16	for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		×
17	assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		×
18	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		×
19	Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	×	<u> </u>
	If "Yes," complete Schedule G, Part III	19		×
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		×
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	20b		×

	90 (2023)			Page 4
Part	Checklist of Required Schedules (continued)		Mar	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .	00		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23	×	
24a	\$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		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a		25a		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	0.5%		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		×
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		×
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>			
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule	27		×
	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		×
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		×
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		×
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	52		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		×
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	×	
Part	V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 16			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	×	

Form 99	0 (2023)		F	Page 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
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 45			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	×	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			×
b	If "Yes," enter the name of the foreign country	4a		
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
C 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	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?			
7	Organizations that may receive deductible contributions under section 170(c).	6b		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a		×
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	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		×
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		×
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	00		
a b	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	50		
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
h	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
b	the organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		×
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		×
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities			ĺ
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

1a Enter the number of voting members of the governing body at the end of the tax year. 1a 4 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 1b 3 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 1b 3 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 2 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization have members or stockholders? 6 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 7a Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 7a 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a b Each committee with authority to act on behalf of the governing body? 8a <th>struct</th> <th>tions.</th>	struct	tions.
Section A. Governing Body and Management Y 1a Enter the number of voting members of the governing body at the end of the tax year Ia 4 4 1a Enter the number of voting members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Ib Ib 3 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 1b 3 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 2 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was file? 4 5 Did the organization have members or stockholders? 5 5 6 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 a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		No X X X
1a Enter the number of voting members of the governing body at the end of the tax year 1a 4 1f there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 1b 3 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 1b 3 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 2 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 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 7a Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8 Did the organization conte	Yes	× × ×
1a Enter the number of voting members of the governing body at the end of the tax year. 1a 4 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 1b 3 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 1b 3 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 2 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization have members or stockholders? 6 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 7a Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 7a 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a b Each committee with authority to act on behalf of the governing body? 8a <th>Yes</th> <th>× × ×</th>	Yes	× × ×
 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 7 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? 6 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? a The governing body? a The governing body? b Each committee with authority to act on behalf of the governing body? c Bab dia the organization to behalf of the governing body? d Bab dia the organization to the organization behalf of the governing body? 		× ×
supervision of officers, directors, trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 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? 6 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a a The governing body? 8a b Each committee with authority to act on behalf of the governing body? 8b		×
 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 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? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Are ony mittee with authority to act on behalf of the governing body? c at the governing body? d the organization contemporation contemporation the governing body? d the organization contemporation contemporation the governing body? d the organization contemporation contemporatic contemporation contemporatic		
 b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		×
a The governing body? 8a b Each committee with authority to act on behalf of the governing body? 8b		×
b Each committee with authority to act on behalf of the governing body?	×	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		×
the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9		×
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Cod		
	Yes	No
10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10a		×
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11ab Describe on Schedule O the process, if any, used by the organization to review this Form 990.Image: Complete copy of this Form 990 to all members of its governing body before filing the form?	×	
	×	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	×	
120	×	
	×	~
 14 Did the organization have a written document retention and destruction policy?		×
	×	
	×	
 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 		×
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		-
organization's exempt status with respect to such arrangements? 16b Section C. Disclosure		
 17 List the states with which a copy of this Form 990 is required to be filed DC 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website X Upon request Other (explain on Schedule O) 		0.1

- **19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records. STEVEN LEHRKE, 1775 EYE ST NW STE 1150-291, WASHINGTON, DC 20006 (202)463-5042

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

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

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

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

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

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

		(C)								
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average					e than o is both		Reportable	Reportable	Estimated amount
	hours	office				or/trust		compensation	compensation	of other
	per week (list any	Individual trustee or director	Ins	Qf	Ke	em Hig	Fo	from the organization (W-2/	from related organizations (W-2/	compensation from the
	hours for	livid	titut	Officer	y er	ghes	Former	1099-MISC/	1099-MISC/	organization and
	related organizations	ual t	iona		Key employee	t co		1099-NEC)	1099-NEC)	related organizations
	below	trus	al tru		yee	mpe				
	dotted line)	lee	Institutional trustee			Highest compensated employee				
			Φ			ted				
(1) CHRISTOPHER BEDFORD	0.10									
DIRECTOR		×						0.	0.	0.
(2) WILLIAM CERVENY	0.10									
DIRECTOR		×						10,000.	0.	0.
(3) MARCUS STERNE	0.10									
DIRECTOR		×						10,000.	0.	0.
(4) BUCKLEY CARLSON	0.10									
DIRECTOR		×						0.	0.	0.
(5) NEIL PATEL	20.00	ļ								
CHAIRMAN		×		×				150,000.	0.	0.
(6) ADELE MALPASS	40.00	ļ								
PRESIDENT				×				152,308.	0.	0.
(7) LAURIE DUGAN	40.00	ļ								
CHIEF DEV. OFFICER						×		165,000.	0.	0.
(8)										
(9)										
(10)										
(11)										
(1)										
(12)										
(10)										
(13)										
(14)										
										Form 990 (0002)

Part	VII Section A. Officers, Directors, 1	rustees,	Key I	Emj	ploy	yee	s, an	d F	lighest Compe	nsated Emplo	yees (contir	nued)
	(A) Name and title	(B) Average hours per week	box, office	unles er and	Pos neck ss pe	rson	e than o is both or/trust	n an	(D) Reportable compensation from the	(E) Reportable compensation from related	c	(F) ated amo of other pensation	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	fr	om the ization a	and
(15)													
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1b	Subtotal								487,308.	0.			0.
	Total from continuation sheets to Part	-			•		•						
d	Total (add lines 1b and 1c)		· ·		Liet	 ad	ahove		487,308.	0. 0 0 0 0 \$ 100 000	of		0.
2	reportable compensation from the organi		1 10 11	1030	/ 1131		3	<i>.</i>) vv			01		
							<u> </u>					Yes	No
3	B Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>						3		×				
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>												
5	Did any person listed on line 1a receive of for services rendered to the organization?	or accrue co	ompe	nsat	tion	froi	m any	/ un	related organizat				×
Section	on B. Independent Contractors		<i></i>	2.0	201						5		
1	Complete this table for your five high compensation from the organization. Repo												

	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to received more than \$100,000 of compensation from the organization	those listed above) who 0	

Part VIII Statement of Revenue Check if Schedule O contain

Par	t VIII	Statement of Revenue Check if Schedule O contains a response	so or noto to or	w line in this Da	vet \/III		
		Check in Schedule O contains a respons	se or note to ar	(A)	(B)		<u> </u> (D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512–514
its, its	1a	Federated campaigns 1a					
irar our	b	Membership dues 1b					
¶g,G	С	Fundraising events	209,000.				
ar /	d	Related organizations 1d					
s, G	e f	Government grants (contributions) 1e All other contributions, gifts, grants,					
ion r Si	'		2 620 122				
but	q	Noncash contributions included in	3,630,132.				
Contributions, Gifts, Grants, and Other Similar Amounts	5		\$ 111,900.				
aŭ	h	Total. Add lines 1a–1f		3,839,132.			
			Business Code				
ce	2a						
le V	b						
ent S	С						
jram Ser Revenue	d						
Program Service Revenue	е						
4	f	All other program service revenue					
	9 3	Total. Add lines 2a–2f	interest and				
		other similar amounts)		91,931.	0.	0.	91,931.
	4	Income from investment of tax-exempt bo					<u> </u>
	5	Royalties					
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d						
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets other than inventory 7a					
đ	b	Less: cost or other basis					
venue		and sales expenses . 7b					
	с	Gain or (loss) 7c					
ŗ		Net gain or (loss)					
Other Re	8a	Gross income from fundraising					
Ò		events (not including \$ 209,000.					
		of contributions reported on line					
		1c). See Part IV, line 18 8a	0.				
		Less: direct expenses	180,228.	-180,228.		0	100 000
	с 9а	Gross income from gaming	nts	-100,220.		0.	-180,228.
	00	activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9b					
		Net income or (loss) from gaming activitie	s				
	10a	Gross sales of inventory, less					
		returns and allowances 10a					
		Less: cost of goods sold 10b					
	С	Net income or (loss) from sales of invento	-				
sno	44-	-	Business Code				
scellaneo Revenue	11a b						
șlla ver	D C						
Miscellaneous Revenue	d	All other revenue					
Σ	e	Total. Add lines 11a–11d					
	12	T I I O C I I I		3,750,835.	0.	0.	-88,297.

Form **990** (2023)

Part IX Statement of Functional Expenses

Check if Schedule O contains a response or note to any line in this Part IX **(D)** Fundraising (B) Program service Do not include amounts reported on lines 6b. 7b. (A) Total expenses (C) Management and 8b. 9b. and 10b of Part VIII. general expenses expenses expenses 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 2 individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 302,308. 253,757. 14,964. 33,587. 6 Compensation not included above to disgualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . Other salaries and wages 7 1,598,792. 1,342,026. 79,140. 177,626. Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions) Other employee benefits 9 73,258. 61,493. 3,626. 8,139. 10 Payroll taxes 149,003. 125,073. 7,376. 16,554. Fees for services (nonemployees): 11 Management а 0. Legal 59,445. 0. 59,445. b С Accounting 39,770. 0. 39,770. 0. d Lobbying Professional fundraising services. See Part IV, line 17 е Investment management fees 1,250. 0. 1,250. Ο. f Other. (If line 11g amount exceeds 10% of line 25, column α (A), amount, list line 11g expenses on Schedule O.) 118,879. 84,881. 32,915. 1,083. 12 Advertising and promotion 13 277,597. 103,109. 92,961. 81,527. Office expenses 14 Information technology 15 Royalties Occupancy 175,318. 144,483. 15,308. 15,527. 16 Travel 56,526. 40,743. 9,674. 6,109. 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 0. 2,867. 0. 2,867. 20 Interest 21 Payments to affiliates 96,000. 96,000. Ο. 22 Depreciation, depletion, and amortization . 0 23 Insurance 100,326. 100,326. 0. 0. Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) POSTAGE AND DELIVERY 149,024. 51,041. 40,112. 57,871. а DUES AND SUBSCRIPTIONS b 48,224. 35,831. 8,010. 4,383. С _____ d _____ All other expenses е 25 Total functional expenses. Add lines 1 through 24e 3,248,587. 2,345,630. 500,551. 402,406. Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here [] if following ŠOP 98-2 (ASC 958-720)

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

Form 990 (2023)

_	ו 990 (2				Page 11
Ρ	art X				_
		Check if Schedule O contains a response or note to any line in this Pa	INTX		
	1	Cash-non-interest-bearing	2,950,306.	1	344,020.
	2	Savings and temporary cash investments		2	2,999,031.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	324,509.	4	152,645.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined		5	
	-	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net		7	
Assets	8			8	
As	9	Prepaid expenses and deferred charges	269.	9	50,786.
	10a	Land, buildings, and equipment: cost or other	205.		50,700.
		basis. Complete Part VI of Schedule D 10a 253,906.			
	b	Less: accumulated depreciation 10b 157,906.	192,000.	10c	96,000.
	11	Investments-publicly traded securities	,	11	349,851.
	12	Investments-other securities. See Part IV, line 11		12	
	13	Investments-program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	3,467,084.	16	3,992,333.
	17	Accounts payable and accrued expenses	56,674.	17	49,993.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
abi		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	56,674.	26	49,993.
ces		Organizations that follow FASB ASC 958, check here x and complete lines 27, 28, 32, and 33.			
lar	27	Net assets without donor restrictions	1,898,176.	27	3,942,340.
Ba	28	Net assets with donor restrictions	1,512,234.	28	0.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here 🗌 and complete lines 29 through 33.			
or	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SSC	31	Retained earnings, endowment, accumulated income, or other funds .		31	
jt A	32	Total net assets or fund balances	3,410,410.	32	3,942,340.
Ne	33	Total liabilities and net assets/fund balances	3,467,084.	33	3,992,333.
				(, ,

REV 05/09/24 PRO

Form **990** (2023)

Form 99	90 (2023)			Pa	age 12
Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. 🗌
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,5	750,8	335.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,2	248,5	587.
3	Revenue less expenses. Subtract line 2 from line 1	3	<u> </u>	502,2	248.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,4	110,4	<u>410.</u>
5	Net unrealized gains (losses) on investments	5		29,6	582.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	3,9	942,3	340.
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 🗆
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," e	explain	on		
	Schedule O.				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		×
	If "Yes," check a box below to indicate whether the financial statements for the year were co	mpiled	or		
	reviewed on a separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	×	
	If "Yes," check a box below to indicate whether the financial statements for the year were aut	lited on	ı a		
	separate basis, consolidated basis, or both.				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	/ersight	of		
	the audit, review, or compilation of its financial statements and selection of an independent account	tant? .	2c	×	
	If the organization changed either its oversight process or selection process during the tax year,	explain	on		
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set f	orth in t	he		
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		×
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not ur	dergo t			1
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such				
	REV 05/09/24 PRO		Fo	rm 990) (2023

SCHE	DULE	A
(Form	990)	

(E)

Total

Public Charity Status and Public Support

OMB No. 1545-0047 2023

Open to Public

Departn	nent of	f the '	Treasur	y
Internal	Reven	ue S	ervice	

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

Interna	l Revenue	e Service	Go t	o www.irs.gov/For	m990 for instructions ar	nd the late	st informa	tion.	Inspection
Name	of the o	rganization						Employer identification	number
			ER NEWS FOUNI					45-2922471	
Par	tl	Reason	for Public Cha	r ity Status. (All	organizations mus	t comple	ete this p	part.) See instruction	ons.
The o	-		•		s: (For lines 1 through			,	
1	🗌 A c	hurch, co	onvention of churcl	hes, or association	on of churches descri	ibed in se	ection 17	0(b)(1)(A)(i).	
2					Attach Schedule E (F	-	-		
3					anization described in				
4			•	•	onjunction with a hosp	oital desc	ribed in s	ection 170(b)(1)(A)	(iii). Enter the
_		-	ame, 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	🗌 A f	ederal, sta	ate, or local goveri	nment or govern	mental unit described	l in sectio	on 170(b)	(1)(A)(v).	
7			tion that normally section 170(b)(1)		tantial part of its sup e Part II)	port from	a gover	nmental unit or fron	n the general public
8					(1)(A)(vi). (Complete I	Part II.)			
9	_				in section 170(b)(1)		erated in	conjunction with a l	and-grant college
	or i uni	university versity:	or a non-land-gra	nt college of agri	iculture (see instructio	ons). Ente	r the nan	ne, city, and state of	the college or
10	rec sup	eipts fron	n activities related n gross investment	to its exempt fui t income and unr	than 33 ¹ /3% of its sunctions, subject to ce related business taxal 5. See section 509 (a	rtain exce ble incom	eptions; a ne (less se	nd (2) no more than ection 511 tax) from	33 ¹ /3% of its
11			0		sively to test for public		•	,	
12	🗌 An	organizat	ion organized and	operated exclusiv	vely for the benefit of,	to perfor	m the fun	ctions of, or to carry	out the purposes of
					escribed in section 5 the type of supporting				
_			•					•	
а		the supp	orted organization	(s) the power to	, supervised, or contr regularly appoint or e ete Part IV, Sections	lect a ma	jority of t		
b		Type II.	A supporting orga	nization supervis	ed or controlled in co	nnection	with its s	upported organizati	on(s), by having
					rganization vested in V, Sections A and C .		persons	that control or man	age the supported
		-	.,	-	ing organization oper		onnection	with and function	ally integrated with
С					ns). You must comp				any integrated with,
d		that is no	ot functionally integ	grated. The organ	pporting organization nization generally mus	st satisfy	a distribu	ition requirement an	
		-		-	omplete Part IV, Sec				
е					a written determination tionally integrated sup				e II, Type III
f	Ente		ber of supported of						
g				-	orted organization(s).				
			ed organization	(ii) EIN	(iii) Type of organization	L	organization	(v) Amount of monetary	(vi) Amount of
					(described on lines 1–10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
	Yes No								
(A)									
(B)									
(C)									
(D)									

Part IISupport 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.)

Secti	on A. Public Support	e quality anal					,
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						13,949,323.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	2,487,689.	1,575,570.	2,803,993.	3,242,939.	3,839,132.	13,949,323.
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)						2,956,811.
6	Public support. Subtract line 5 from line 4						10,992,512.
	on B. Total Support			•	1	1	
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	2,487,689.	1,575,570.	2,803,993.	3,242,939.	3,839,132.	13,949,323.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,552.	1,920.	2,462.	14,989.	91,931.	112,854.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						14,062,177.
12	Gross receipts from related activities, etc	•	,			12	
13	First 5 years. If the Form 990 is for the organization, check this box and stop he	ere			or fifth tax ye	ear as a section	on 501(c)(3) · · · · □
	on C. Computation of Public Suppo			11			70 170/
14 15	Public support percentage for 2023 (line Public support percentage from 2022 Sc					14 15	78.17%
15 16a	33 ¹ / ₃ % support test-2023. If the organ						
IVa							
b							
17a							
b							
18	Private foundation. If the organization						
	instructions	<u>.</u>				<u> </u>	· · · · 🔲
						Cabadula	A (Form 990) 2023

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

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

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
-	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
_	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
•	Add lines 7a and 7b						
с 8	Public support. (Subtract line 7c from						-
U							
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	(-,	(0) - 0 - 0	(0) = 0 = 1	(0) = 0 = 0	(0) = 0 = 0	(1)
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	organization'	s first second	third fourth	or fifth tax ve	ar as a soc	tion 501(c)(3)
14	organization, check this box and stop he	0			· · · · · ·		()()
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2023 (line 8			13. column (f))		15	%
16	Public support percentage from 2022 Sch		•			16	%
Secti	on D. Computation of Investment In						
17	Investment income percentage for 2023 (line 10c, colur	nn (f), divided k	by line 13, colu	ımn (f))	17	%
18	Investment income percentage from 2022			-		18	%
19a	331/3% support tests-2023. If the organ						
	17 is not more than $33^{1/3}$ %, check this box	and stop here	. The organizati	on qualifies as	a publicly suppo	orted organiz	ation
b	331/3% support tests-2022. If the organiz						
	line 18 is not more than 33 ¹ / ₃ %, check this I	box and stop h	ere . The organ	ization qualifies	s as a publicly s	upported org	anization .
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see inst	ructions .

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

10b

Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Section D. All Type III Supporting Organizations

Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's

supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- а The organization satisfied the Activities Test. *Complete line 2 below.*
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of а the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Yes No

1

2

1

3

2a

2b

3a

3b

Yes No

Yes No

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
_			· · · · · ·	

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

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Schedule A (Form 990) 2023

Schedu	le A (Form 990) 2023			Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3	B) Supporting Organi	zations (continued)	1
Sect	ion D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish		1	
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	orted 2		
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required-	–provide details in Part	<i>VI</i>) 5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	ponsive 8	
9	Distributable amount for 2023 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		1()
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required – <i>explain in Part VI</i>). See instructions.			
3	Excess distributions carryover, if any, to 2023			
а	From 2018			
b	From 2019			
С	From 2020			
d	From 2021			
е	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
с	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2019			
b	Excess from 2020			
С	Excess from 2021			
d	Excess from 2022			
е	Excess from 2023			

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Schedule A (Form 990) 2023

Dout V/	
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part
	III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section
	B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b,
	3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E,
	lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

	DULE D	Supplementa	al Financial Statements			OMB No. 1545-0047
(Form	n 990)	Complete if the orga	nization answered "Yes" on Form 990,	2023		
Departm	ent of the Treasury), 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12k .ttach to Form 990.).		Open to Public
	Revenue Service		0 for instructions and the latest informa	tion.		Inspection
Name o	f the organization	•		Employ	yer id	entification number
-		LER NEWS FOUNDATION		45-2		
Par		-	sed Funds or Other Similar Fund	ls or A	Acco	ounts
	Compl	ete if the organization answered ""				
	Tatal www.bay	at and after an	(a) Donor advised funds		(b) ⊦	unds and other accounts
1 2		at end of year				
2		ue of grants from (during year) .				
4		ue at end of year				
5			advisors in writing that the assets he	ld in d	onor	advised
	funds are the	organization's property, subject to the	organization's exclusive legal control	?		· · · 🗌 Yes 🗌 No
6			d donor advisors in writing that grant			
			of the donor or donor advisor, or for			
			<u> </u>	• •	•	· · · 🗌 Yes 🗌 No
Par		rvation Easements				
		ete if the organization answered "				
1	• • • •	conservation easements held by the o of land for public use (for example, recrea		fahiot	orior	lly important land area
		of natural habitat				Illy important land area historic structure
		on of open space			meu	
2			d a qualified conservation contributior	n in the	forn	n of a conservation
	easement on t	he last day of the tax year.				Held at the End of the Tax Year
а	Total number	of conservation easements		. [2a	
b	Total acreage	restricted by conservation easements		. [2b	
c			storic structure included on line 2a .		2c	
d			e 2c acquired after July 25, 2006, and			
•		tructure listed in the National Register			2d	the exception during the
3	tax year	inservation easements modified, trans	ferred, released, extinguished, or term	inateo	Бу	the organization during the
4		tes where property subject to conserv	vation easement is located			
5			arding the periodic monitoring, insp	ection,	, hai	ndling of
	violations, and	I enforcement of the conservation eas	ements it holds?			· · · 🗌 Yes 🗌 No
6	Staff and volun	teer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conse	rvatio	on easements during the year
7	Amount of exp	enses incurred in monitoring, inspecting	g, handling of violations, and enforcing o	conserv	atio/	n easements during the year
8			2d above satisfy the requirements of s			
9			onservation easements in its revenue a			
Ū		e 1	note to the organization's financial sta			
		accounting for conservation easement				
Part	III Organi	izations Maintaining Collections	of Art, Historical Treasures, or 0	Other	Sim	ilar Assets
	Compl	ete if the organization answered "	Yes" on Form 990, Part IV, line 8.			
1a			B ASC 958, not to report in its revenu			
			held for public exhibition, education,			
			o its financial statements that describe			
b			B ASC 958, to report in its revenue s for public exhibition, education, or res			
		llowing amounts relating to these item	•	GaloIII	in rui	anorance of public service,
	•	-				\$
						. ↓ . \$
2			historical treasures, or other similar			
	following amo	unts required to be reported under FA	SB ASC 958 relating to these items.			
а	Revenue inclu	ded on Form 990, Part VIII, line 1 .				. \$
b	Assets include	ed in Form 990, Part X	<u> </u>			. \$

Schedul	e D (Form 990) 2023									Pag	e 2
Part	III Organizations Maintaining	Coll	ections of	Art, His	torical T	reasures,	or Ot	her Similar As	sets (co	ontinued	d)
3	Using the organization's acquisition, a collection items (check all that apply).	acces	sion, and ot	ther reco	rds, chec	k any of the	e follov	ving that make s	ignifican	t use of	its
а	Public exhibition			d	🗌 Loan	or exchange	e progi	am			
b	Scholarly research			е	Other	-					
с	Preservation for future generations										
4	Provide a description of the organizat XIII.	tion's	collections	and expla	ain how t	hey further	the org	anization's exer	npt purp	ose in P	art
5	During the year, did the organization	solic	it or receive	donation	s of art,	historical tre	easure	s, or other simila	ar		
	assets to be sold to raise funds rather	than	to be mainta	ained as p	part of the	e organizatio	on's co	ollection?	🗌 Ye	es 🗌 N	١o
Part	IV Escrow and Custodial Arra	ange	ments								
	Complete if the organization 990, Part X, line 21.	ans	wered "Yes	" on For	m 990, F	Part IV, line	9, or	reported an an	nount or	n Form	
1 a	Is the organization an agent, trustee, included on Form 990, Part X?								ot	es 🗌 N	٩N
b	If "Yes," explain the arrangement in Pa	art XI	II and comple	ete the fo	llowing ta	able.					
								A	mount		
С	Beginning balance						10	;			
d	Additions during the year						10	1			
е	Distributions during the year						1e	•			
f	Ending balance						1f				
2a	Did the organization include an amour	nt on	Form 990, P	art X, line	21, for e	scrow or cu	istodia	I account liability	/? 🗌 Ye	es 🗌 N	١o
	If "Yes," explain the arrangement in Pa	art XI	II. Check her	e if the e	kplanatio	n has been	provid	ed in Part XIII .			
Part											
	Complete if the organization										
		(a)	Current year	(b) Pri	or year	(c) Two years	s back	(d) Three years back	< (e) Four	years bac	:k
1a	Beginning of year balance										
b	Contributions								_		
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of t	he cu	irrent year er	nd balanc	e (line 1g	, column (a)) held	as:			
а	Board designated or quasi-endowmer			%							
b	Permanent endowment	%									
С	Term endowment%										
-	The percentages on lines 2a, 2b, and										
3a	Are there endowment funds not in the	e pos	session of th	ne organi	zation the	at are held a	and ad	ministered for th	ie		
	organization by:									Yes N	ο
	(i) Unrelated organizations?								3a(i)		
	(ii) Related organizations?								3a(ii)		
b	If "Yes" on line 3a(ii), are the related of	•					• •		3b		
4 Part	Describe in Part XIII the intended uses VI Land, Buildings, and Equip			on s enac	wment n	unas.					
Fall	Complete if the organization			" on For	m 000 I	Part IV line	110	See Form 990	Part X	lino 10	
	Description of property	ans	(a) Cost or of			or other basis		Accumulated	(d) Boo		
	Description of property		(investm	nent)		ther)		epreciation	(u) Bot		
1a	Land			0.						().
b						40.005		1.4.4			
c	Leasehold improvements					40,000.		144,000.		96,000	
d	Equipment					13,906.		13,906.		().
<u>e</u>	Other										
i otal.	Add lines 1a through 1e. (Column (d) n	nust e	equai ⊦orm 9	90, Part)	k, iine 10	c, column (E	<i>5)]</i> .			96,000	١.

Schedule D (Form 990) 2023 Investments-Other Securities Part VII Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (c) Method of valuation: (including name of security) Cost or end-of-year market value Financial derivatives . . . (2) Closely held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments – Program Related Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (b) Book value (a) Description of investment (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 13, col. (B)) **Other Assets** Part IX Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. (B)) **Other Liabilities** Part X Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII X

	ıle D (Form 990) 2023			Page 4
Part			Returr	า
	Complete if the organization answered "Yes" on Form 990, Part IV, lir			
1	Total revenue, gains, and other support per audited financial statements		1	3,959,495.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	29,682.		
b	Donated services and use of facilities			
C	Recoveries of prior year grants 2c	100.000		
d	Other (Describe in Part XIII.)	180,228.	0	200 010
e	Add lines 2a through 2d	H	2e	209,910.
3	Subtract line 2e from line 1		3	3,749,585.
4		1 250		
a ⊾	Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIII.) 4b	1,250.		
b	Other (Describe in Part XIII.) 4b 4b Add lines 4a and 4b . <t< td=""><td></td><td>4.</td><td>1 250</td></t<>		4.	1 250
C E	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>)		4c 5	1,250.
5 Part				3,750,835.
rait	Complete if the organization answered "Yes" on Form 990, Part IV, lir		neu	
1	Total expenses and losses per audited financial statements		1	3,427,565.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		-	5,427,505.
	Donated services and use of facilities			
a b	Prior year adjustments			
c c	Other losses			
d	Other (Describe in Part XIII.)	180,228.		
e	Add lines 2a through 2d		2e	180,228.
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		3	3,247,337.
	Investment expenses not included on Form 990, Part VIII, line 7b 4a	1 250		
a b	Other (Describe in Part XIII.)	1,250.		
c c	Add lines 4a and 4b		4c	1,250.
5	Total expenses. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 18.</i>).		4 0 5	3,248,587.
Part			5	3,240,307.
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV	. lines 1b and 2b:	: Part V	/. line 4: Part X. line
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide			
		-		
Pt X	C, Line 2: THE FOUNDATION COMPLIES WITH THE PROVISIONS OF	THE FASB AC	COUNT	TING
	· ·			
STAN	IDARDS CODIFICATION TOPIC ACCOUNTING FOR UNCERTAINTY IN IN	ICOME TAXES.	FOR	
THE	YEAR ENDED DECEMBER 31, 2023, NO UNRECOGNIZED TAX PROVISI	IONS OR BENE	FIT E	EXISTS.
D+ V	I, Line 2d: FUNDRAISING EVENT EXPENSES NETTED AGAINST FUN		слтт	
A	II, HINE ZU. FUNDRAISING EVENI EKFENSES NEITED AGAINST FU	DICAIDING EV		
INCO	ME.			
Pt X	II, Line 2d: FUNDRAISING EVENT EXPENSES NETTED AGAINST FU	JNDRAISING E	VENT	
INCO	ME.			

Schedule D (Fo	orm 990) 2023	Page 5
Part XIII	Supplemental Information (continued)	

SCH	EDULE G					raising or Gam		OMB No. 1545-0047
(Fori	m 990)	Complete if	organization ente	red more tha	n \$15,000 on	0, Part IV, line 17, 18, Form 990-EZ, line 6a	or 19, or if the	2023
	ment of the Treasury I Revenue Service	G		ach to Form § orm990 for in		990-EZ. Id the latest informat	tion	Open to Public
	of the organization		lo to mm.ns.gom				Employer identif	Inspection fication number
THE	DAILY CALL	ER NEWS FOUN	IDATION				45-292247	1
Par		sing Activities. 00-EZ filers are r				vered "Yes" on	Form 990, Part IV	, line 17.
1	Indicate wheth	ner the organizatio	on raised funds t	hrough any	of the follo	owing activities. C	Check all that apply.	
а	Mail solicit			е [ion of non-goverr	•	
b	Internet an	d email solicitatio	ns	f L		ion of governmen	•	
c d		solicitations		g L		fundraising event	S	
2a	•		ten or oral agree	ement with	anv individ	lual (including off	icers, directors, trus	stees.
							fundraising services	
b		e 10 highest paid at least \$5,000 by			draisers) pı	ursuant to agreen	nents under which t	he fundraiser is to be
	(i) Name and addre or entity (fur		(ii) Activity	custody o	draiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
				Yes	No	_		
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
Total 3			nization is regis	tered or lic	ensed to s	olicit contributior	ns or has been noti	fied it is exempt from
	·							·

Schedule G (Form 990) 2023

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			(a) Event #1 ANNUAL AWARDS DINNER (event type)	(b) Event #2	(c) Other events None (total number)	(d) Total events (add col. (a) through col. (c))			
e									
Revenue	1	Gross receipts	209,000.			209,000.			
Å	2	Less: Contributions	209,000.			209,000.			
	3	Gross income (line 1 minus line 2)	0.			0.			
	4	Cash prizes							
	5	Noncash prizes							
nses	6	Rent/facility costs							
Direct Expenses	7	Food and beverages							
Direct	8	Entertainment							
	9	Other direct expenses .	180,228.			180,228.			
	10		180,228.						
	11	Net income summary. Subtra				-180,228.			
Pa	Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.								

Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))			
Reve	1	Gross revenue							
es	2	Cash prizes							
Direct Expenses	3	Noncash prizes							
	4	Rent/facility costs							
	5	Other direct expenses .							
	6	Volunteer labor	□ Yes% □ No	□ Yes% □ No	□ Yes% □ No				
	7	Direct expense summary. Ac	ld lines 2 through 5 in c	olumn (d) . . .					
	8	Net gaming income summar	y. Subtract line 7 from li	ne 1, column (d)					
9	9 Enter the state(s) in which the organization conducts gaming activities:								
		the organization licensed to co "No," explain:	onduct gaming activities	s in each of these states	5?	🗌 Yes 🗌 No			

	Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?	•	Yes No
b	If "Yes," explain:		

Schedu	ule G (Form 990) 2023	Page 3
11	Does the organization conduct gaming activities with nonmembers?	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	No
13	Indicate the percentage of gaming activity conducted in:	
а	The organization's facility	%
b	An outside facility	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	
	Name	
	Address	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	No
b c	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ If "Yes," enter name and address of the third party:	
	Name	
	Address	
16	Gaming manager information:	
	Name	
	Gaming manager compensation \$	
	Description of services provided	
	Director/officer	
17	Mandatory distributions:	
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?] No
	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year	
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information See instructions.	

SCHEDULE J (Form 990)		Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	омв	No. 1	⁵⁴⁵⁻⁰	047 B
Departm Internal	nent of the Treasury Revenue Service	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990. Go to <i>www.irs.gov/Form</i> 990 for instructions and the latest information.	Ope In		Puk ctior	
Name c	f the organization	Employer identificat				
_		ER NEWS FOUNDATION 45-2922471				
Part	Questic	ons Regarding Compensation			Yes	No
1a	990, Part VII, S	propriate box(es) if the organization provided any of the following to or for a person listed on F ection A, line 1a. Complete Part III to provide any relevant information regarding these items. or charter travel	orm		103	
	Travel for c					
b	or reimburser	boxes on line 1a are checked, did the organization follow a written policy regarding paym nent or provision of all of the expenses described above? If "No," complete Part II	I to	1b		
2	directors, trus	nization require substantiation prior to reimbursing or allowing expenses incurred by tees, and officers, including the CEO/Executive Director, regarding the items checked on		2		
				2		
3	organization's related organi	n, if any, of the following the organization used to establish the compensation of the CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by zation to establish compensation of the CEO/Executive Director, but explain in Part III.	/ a			
		tion committee Written employment contract nt compensation consultant Compensation survey or study of other organizations Approval by the board or compensation committee	•			
4		ar, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing r a related organization:				
а		erance payment or change-of-control payment?		4a		×
b		or receive payment from a supplemental nonqualified retirement plan?	-	4b		×
С	•	or receive payment from an equity-based compensation arrangement?	•	4c		×
5	For persons	501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue contingent on the revenues of:	any			
а		on?		5a		×
b		ganization?	•	5b		×
6		listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue contingent on the net earnings of:	any			
а		on?		6a		×
b		ganization?	•	6b		×
7		isted on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfidescribed on lines 5 and 6? If "Yes," describe in Part III		7		×
8	to the initial	ounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," desc	ribe			
9		ne 8, did the organization also follow the rebuttable presumption procedure described		8		×
		ection 53.4958-6(c)?		9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation				(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
ADELE MALPASS	(i)	142,308.	10,000.	0.	0.	0.	152,308.	0.
1 PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
LAURIE DUGAN	(i)	155,000.	10,000.	0.	0.	0.	165,000.	0.
2 CHIEF DEV. OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii) (i)							
10	(i) (ii)							
12	(i)							
10	(i) (ii)							
13	(i)							
14	(ii)							+
14	(i)							
15	(ii)							+
15	(i)							
16	(i) (ii)							+
10	(")		LEV 05/09/24 PRO					 nedule J (Form 990) 202

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Part III	Supplemental Information
Provide t	he information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this par
for any ac	dditional information.

Schedule J (Form 990) 2023

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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



Name of the organization

THE DAILY CALLER NEWS FOUNDATION

Pt VI, Line 8b: THERE ARE NO COMMITTEES.

Employer identification number 45-2922471

Pt VI, Line 11b: OFFICERS OF THE ORGANIZATION DISCUSS AND REVIEW THE TAX RETURNS BEFORE THE ACTUAL FILING OF TAX RETURNS. Pt VI, Line 12c: ORGANIZATION HAS ADOPTED A CONFLICT OF INTEREST POLICY AND OFFICERS ARE REQUIRED TO DISCLOSURE THE POSSIBLE CONFLICTS EVERY YEAR. PRESIDENT AND SECRETARY MEET TIME TO TIME TO DISCUSS AND MONITOR THE POLICY FOR POSSIBLE CONFLICT OF INTERESTS. Pt VI, Line 15a: COMPENSATION OF OFFICERS AND EXECUTIVE DIRECTOR IS DECIDED BY THE BOARD IN COMMENSURATE TO PRESENT WAGES IN THE JOB MARKET FOR SIMILAR SERVICES. Pt VI, Line 15b: COMPENSATION OF OFFICERS AND EXECUTIVE DIRECTOR IS DECIDED BY THE BOARD IN COMMENSURATE TO PRESENT WAGES IN THE JOB MARKET FOR SIMILAR SERVICES. Pt VI, Line 18: TAX RETURNS ARE MADE AVAILABLE TO PUBLIC UPON REQUEST AND THE SAME ARE AVAILABLE TO PUBLIC VIA THE ORGANIZATION'S WEBSITE AND THIRD PARTY WEBSITES. Pt VI, Line 19: GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST TO THE MANAGEMENT. Pt III, Line 4d: Expenses: \$89,557 including grants of: \$0 Revenue: \$0 Description: WE HOST AN ANNUAL AWARDS DINNER FOR OUR JOURNALIST AND SPECIAL GUESTS.