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

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

OMB No. 1545-0047 2015 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Information about Form 990 and its instructions is at www.irs.gov/form990. A For the 2015 calendar year, or tax year beginning

_	01 1	and	ending L	JUN 30, 2016	
В	Check	able:		D Employer identif	ication number
	Add cha Nar	THE THE REPORT OF THE REPORT OF THE	c.		
L	cha	Doing business as		51-0	166741
-	Fina	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	
	retu tern ateo	150 NEFF ANNEX-UMC		(573	3)882-2042
		anded COLLING TA NO. Country, and ZIP or loreign postal code		G Gross receipts \$	3,229,211.
	App	lica-		H(a) Is this a group r	
	pen	141 NEFF ANNEX, COLUMBIA, MO 65211		for subordinate	
ī	Tax-e	xempt status: X 501(c)(3)	or 527	H(b) Are all subordinates	
		site: WWW.IRE.ORG	1 J21		list. (see instructions)
K	Form	of organization: X Corporation Trust Association Other	I Vear	H(c) Group exemption 1978	M State of legal domicile: MC
P	art I		Liear	orioination. 1970	VI State of legal domicile; MC
e	1	Briefly describe the organization's mission or most significant activities: EDUCA	ATE AN	D INSTRUCT	REPORTERS
Governance		ON HOW TO BECOME BETTER, MORE IN-DEPTH AN	ID COM	PUTER LITER	ATE
ern	2	Check this box if the organization discontinued its operations or dispos	ed of more	than 25% of its net as	ssets
30	3	Number of voting members of the governing body (Part VI, line 1a)		2	13
ø	4	Number of independent voting members of the governing body (Part VI, line 1b)		1	13
Activities &	5	lotal number of individuals employed in calendar year 2015 (Part V. line 2a)		5	0
Ĭ.	6	lotal number of volunteers (estimate if necessary)		6	250
Ac	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	2,725.
	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
Revenue				Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	2,096,455.	1,401,746.	
	9	Program service revenue (Part VIII, line 2g)	1,110,773.	1,166,328.	
Re	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,813.	170,862.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		18,343.	68,124.
	13	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,227,384.	2,807,060.
	14	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		50,319.	105,049.
(A)		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ıse	16a	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,061,029.	1,063,919.
Expenses	b	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  72,91	2	0.	0.
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4.	1,064,874.	1 067 050
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,176,222.	1,067,059. 2,236,027.
	19	Revenue less expenses. Subtract line 18 from line 12		1,051,162.	571,033.
ces		The second substitution of the final field of the second substitution of th		inning of Current Year	
Assets or Balances	20	Total assets (Part X, line 16)	Dog	5,887,833.	End of Year 6,773,231.
d B		Total liabilities (Part X, line 26)		319,775.	634,140.
Fund	22	Net assets or fund balances. Subtract line 21 from line 20		5,568,058.	6,139,091.
	ırt II	Signature Block			
Jnde	er pena	alties of perjury, I declare that I have examined this return, including accompanying schedules a	and statemer	nts, and to the best of my	knowledge and belief, it is
rue,	correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of whic	h preparer h	as any knowledge.	3, 11
		Since the state of			
Sign		Signature of officer		Date	
Here	9	DOUG HADDIX, EXECUTIVE DIRECTOR Type or print name and title			
		Print/Type preparer's name  Preparer's signature	Da	te Check	PTIN
aid	arer	HEIDI A CHICK		self-employed	
	Only	Firm's name WILLIAMS-KEEPERS LLC		Firm's EIN	43-1126847
.00	Jilly	Firm's address 2005 WEST BROADWAY, SUITE 100 COLUMBIA, MO 65203		,	12) 110 55-5
124	the I			Phone no. (57	3) 442-6171
nay	trie it	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

	m 990 (2015) INVESTIGATIVE REPORTERS & EDITORS, INC. 51-0166741 Page 2 art III Statement of Program Service Accomplishments
	Charlett Calanta Control
1	briefly describe the organization's mission:
	THE MISSION OF INVESTIGATIVE REPORTERS AND EDITORS IS TO FOSTER
	EXCELLENCE IN INVESTIGATIVE JOURNALISM, WHICH IS ESSENTIAL TO A FREE SOCIETY. WE ACCOMPLISH THIS BY PROVIDING TRAINING PROPURED AND A SOCIETY.
	SOCIETY. WE ACCOMPLISH THIS BY PROVIDING TRAINING, RESOURCES AND A COMMUNITY OF SUPPORT TO INVESTIGATIVE JOURNALISTS, PROMOTING HIGH
2	Did the organization undertake any significant program services during the year which were not listed on
_	
	the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.
3	
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three lands.
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	
	(Code:) (Expenses \$ 300,800. including grants of \$ 48,591.) (Revenue \$ 411,279. CONFERENCES TO EDUCATE AND INFORM MEMBERS ON ISSUES REGARDING
	INVESTIGATIVE REPORTING AND EDITING.
	REVENUES SHOWN ABOVE DO NOT INCLUDE \$287,990 OF CONTRIBUTIONS THAT WERE
	RESTRICTED BY DONORS FOR USE IN FUNDING THE CONFERENCE EXPENSES SHOWN
	ABOVE. THE REQUIREMENTS FOR CLASSIFYING REVENUES IN THE FORM 990 DO NOT
	PERMIT CONTRIBUTIONS TO BE REPORTED ABOVE AS PROGRAM SERVICE REVENUE,
	BUT INSTEAD THEY ARE REPORTED ELSEWHERE AS CONTRIBUTION REVENUE.
	THE THE REPORTED BESEWIERE AS CONTRIBUTION REVENUE.
4b	(Code: ) (Expenses \$ 507,935. including grants of \$ 56,458.) (Revenue \$ 397,245.)
	(Code:) (Expenses \$ 507,935. including grants of \$ 56,458.) (Revenue \$ 397,245.)  NATIONAL INSTITUTE FOR COMPUTER-ASSISTED REPORTING OPERATES TO TRAIN
	AND EDUCATE THOSE IN THE JOURNALISM PROFESSION IN TECHNIQUES AND
	TECHNOLOGIES OF COMPUTER-ASSISED REPORTING.
	REVENUES SHOWN ABOVE DO NOT INCLUDE \$274,240 OF CONTRIBUTIONS THAT WERE
	RESTRICTED BY DONORS FOR USE IN FUNDING NICAR EXPENSES SHOWN ABOVE. THE
	REQUIREMENTS FOR CLASSIFYING REVENUES IN THE FORM 990 DO NOT PERMIT
	CONTRIBUTIONS TO BE REPORTED ABOVE AS PROGRAM SERVICE REVENUE BUT
	INSTEAD THEY ARE REPORTED ELSEWHERE AS CONTRIBUTION REVENUE.
4c	(Code:) (Expenses \$ 393,010 • including grants of \$ ) (Revenue \$
	OPERATE AND IMPROVE DOCUMENTCLOUD, AN ONLINE TOOL THAT ALLOWS
	JOURNALISTS TO ANALYZE DOCUMENTS AND PRESENT THEM TO THEIR AUDIENCES IN
	A MEANINGFUL WAY.
	REVENUES SHOWN ABOVE DO NOT INCLUDE \$412,801 OF CONTRIBUTIONS THAT WERE
	RESTRICTED BY DONORS FOR USE IN FUNDING DOCUMENTCLOUD EXPENSES SHOWN
	ABOVE. THE REQUIREMENTS FOR CLASSIFYING REVENUES IN THE FORM 990 DO NOT
	PERMIT CONTRIBUTIONS TO BE REPORTED ABOVE AS PROGRAM SERVICE REVENUE
	BUT INSTEAD THEY ARE REPORTED ELSEWHERE AS CONTRIBUTION REVENUE.
	LIKEWISE, THE ABOVE EXPENSES DO NOT INCLUDE \$143,707 OF NET COSTS THAT
	HAVE BEEN CAPITALIZED ON THE BALANCE SHEET DURING THE YEAR. TOTAL FUNDS
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 377,852 • including grants of \$ ) (Revenue \$ 418,305 •)
4e	Total program service expenses ▶ 1,579,597.

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 ..... X 2 Is the organization required to complete Schedule B, Schedule of Contributors? 2 X Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X 3 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 X 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 X Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I X 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III X 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV X 9 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V X 10 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 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? If "Yes," complete Schedule D, Part VII X 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII X 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? If "Yes," complete Schedule D, Part IX 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII X 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 X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule EX 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 foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV X 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV X 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I X 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II X 18

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

X

complete Schedule G, Part III

Form 990 (2015) INVESTIGATIVE REPO Part IV Checklist of Required Schedules (continued)

20-	Did the second of the second o		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
22	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		₹7	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	22	X	
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J			v
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		X
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
	any tax-exempt bonds?	24c		
d	and the digarization act as all on benall of issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
27	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
28	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			37
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28b	-	X
	director, trustee or direct or indirect owner? If "Vos " complete School !			v
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29	-	
	contributions? If "Yes," complete Schedule M	30		X
O I	bid the organization indudate, terminate, or dissolve and cease operations?	50		
	If "Yes," complete Schedule N, Part I	31		X
OL	bid the organization sell, exchange, dispose or, or transfer more than 25% of its net assets? If "Yes." complete			
	Schedule N, Part II	32		X
-	and the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
D	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)2 If "Yes." complete School Ve B. Bott V. line 3.			
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b	_	
	If "Yes," complete Schedule R. Part V. line 2	0.5		v
37	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	-	X
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	27		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37	_	7
	Note. All Form 990 filers are required to complete Schedule O	38	x	
		Form 0	_	015)

Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response or note to any line in this Part V Part V

4.					Yes	No
18	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	1'	7		
Ľ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1h		0		
(	o and several	reportal	ole gaming			
0-	(gambling) winnings to prize winners?			1c	X	
20	Effect the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements	1 1				
L	filed for the calendar year ending with or within the year covered by this return	2a	(	)		
L	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	ırns?		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ns)				
Sa	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	X	
4-	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	e O		3b	X	
44	At any time during the calendar year, did the organization have an interest in, or a signature or other	authori	ty over, a			
la la	financial account in a foreign country (such as a bank account, securities account, or other financia	accoun	t)?	4a		X
D	If "Yes," enter the name of the foreign country: ►					
F-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Account	s (FBAR).			
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
0	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	action?		5b		X
62	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
Oa	and did to organization have arrived gross receipts that are normally greater than \$100,000, and did to	he organ	nization colinit			
h	any contributions that were not tax deductible as charitable contributions?			6a		X
D	res, did the organization include with every solicitation an express statement that such contribu	tions or	gifts			
7	were not tax deductible?			6b		
7	organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices pr	ovided to the payor?	7a		X
D	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as requ	ired			
٨	to file Form 8282?	··········		7c		X
e	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contract	?	7e		X
g	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f		X
_	If the organization received a contribution of qualified intellectual property, did the organization file Formanization received a contribution of acre backs similar to the organization received a contribution of acre backs similar to the organization received a contribution of acre backs similar to the organization received as contribution of acre backs similar to the organization of the organization received as contribution of acre backs similar to the organization of the organization organization of the organization organization of the organization of the organization of the organization orga	orm 889	9 as required?	7g		
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations maintaining denote advised for the Did and the Organizations maintaining denote advised for the Did and the Organizations maintaining denote advised for the Did and the Organizations maintaining denote advised for the Organization of	ation file	a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the				
9	sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.			8		
а	Did the sponsoring organization make any taxable distributions under parties 40000					
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9a		
10	Section 501(c)(7) organizations. Enter:			9b		
a	Initiation fees and capital contributions included on Part VIII, line 12	10-				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a				
11	Section 501(c)(12) organizations. Enter:	10b				
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against	Ha				
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10/12		10-		
b	If "Voc " optor the amount of the constant of	12b	+	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120				
	Is the organization licensed to issue qualified health plans in more than one state?		H	120	Supplied 1	
	Note. See the instructions for additional information the organization must report on Schedule O.			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
		100				
C	Enter the amount of reserves on hand	130			THE RESERVE CO.	
C	Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?	13c		14a		X

Form 990 (2015) INVESTIGATIVE REPORTERS & EDITORS, INC. 51–0166741 Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Ca	Check if Schedule O contains a response or note to any line in this Part VI			X
Se	ction A. Governing Body and Management			
			Yes	No
18	Enter the number of voting members of the governing body at the end of the tax year1a1.	3		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ŀ	Enter the number of voting members included in line 1a, above, who are independent	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a hysiness relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	organization delegate control over management duties customarily performed by or under the direct supervision	_	_	1
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	bid the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	bid the organization become aware during the year of a significant diversion of the organization's assets?	5	+	X
6	Did the organization have members or stockholders?	6	X	21
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	-0	22	-
	more members of the governing body?	7-	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a	Λ	-
	persons other than the governing body?	71	v	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b	X	
а	The governing body?  Fach committee with authority to got on head of the property of the prope		v	
b	Each committee with authority to act on behalf of the governing body?	8a	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	8b	Λ	
_	organization's mailing address? If "Yes " provide the names and addresses in Calculation			v
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		X
	the internal nevertue code.)			
10a	Did the organization have local chapters, branches, or affiliates?		Yes	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		X
	and branches to ensure their operations are consistent with the organization's exempt purposes?			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	v	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	X	
12a	Did the organization have a written conflict of interest policy? If "No " go to line 12		37	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12b	X	
	in Schedule O how this was done  Did the organization have a written whistlehlands a line of the organization have a written whistlehlands a line of the organization have a written whistlehlands a line of the organization have a written whistlehlands a line of the organization have a written whistlehlands a line of the organization have a written whistlehlands a line of the organization have a written which the land of the organization have a written which the land of the organization have a written which the land of the organization have a written which the organization have a written which the organization have a written which the land of the organization have a written which the written which the organization have a written which the written which which the written which will be written which which we will be written which which we will be written which will be written which will be written which which we will be written which which we will be written which which will be written which which will be written which will be written with the writer which will be written w		37	
13	Did the organization have a written whistleblower policy?	12c	X	_
14	Did the organization have a written document retention and destruction policy?	13	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	14	Х	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official			
b	Other officers or key employees of the organization	15a		X
	Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a	140000000	X
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?			
Sect	tion C. Disclosure	16b		
	List the states with which a copy of this Form 990 is required to be filed ▶IN			
18	Section 6104 requires an organization to make its Forms 1000 (s. 1004 / s. 1			
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) at for public inspection. Indicate how you made these available. Check all that apply.	ailabl	е	
	X Our website			
19	Office (Capitalian in Schedule ())			
	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ial	
20	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:			
	HEATHER FELDMANN HENRY - (573) 884-7902			
	141 NEFF ANNEX, COLUMBIA, COLUMBIA, MO 65211			

_				
F	orm	990	1201	E

51-0166741

Page 7

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization	on nor any related	org	aniz	atio	n cor	mpe	ensa	ted any current officer,	director, or trustee.	
(A)	(B)		(C)					(D)	(E)	(F)
Name and Title	Average	(do	Position o not check more than one			than	one	Reportable	Reportable	Estimated
	hours per week	box, unless person is both an officer and a director/trustee)			is bo	th an	compensation	compensation	amount of	
	(list any		Т	Г	Т		T	from	from related	other
	hours for	direct				_		the organization	organizations (W-2/1099-MISC)	compensation
	related	ee or	stee			nsate		(W-2/1099-MISC)	(VV-2/1099-WISC)	from the organization
	organizations	trust	al tru		yee	adwo		(** = *********************************		and related
	below	Individual trustee or director	Institutional trustee	er.	Key employee	est co	ler			organizations
14.	line)	Indi	Insti	Officer	Key	Highest compensated employee	Former			0
(1) MATT GOLDBERG	1.00									
PRESIDENT		X		X				0.	0.	0.
(2) ZIVA BRANSTETTER	1.00								1	
VICE PRESIDENT		X		X				0.	0.	0.
(3) ANDREW DONOHUE	1.00									
TREASURER		X		X				0.	0.	0.
(4) ELLEN GABLER	1.00									
SECRETARY		X		X				0.	0.	0.
(5) SARAH COHEN	1.00									0.
BOARD MEMBER		X						0.	0.	0.
(6) JOSH MEYER	1.00								0.	0.
BOARD MEMBER		X						0.	0.	0.
(7) T. CHRISTIAN MILLER	1.00									0.
BOARD MEMBER		X						0.	0.	0.
(8) STEVEN RICH	1.00								0.	0.
BOARD MEMBER		X						0.	0.	0.
(9) JILL RIEPENHOFF	1.00									0.
BOARD MEMBER		X						0.	0.	0.
(10) CHERYL W. THOMPSON	1.00								0.	0.
BOARD MEMBER		X						0.	0.	0.
(11) NICOLE VAP	1.00				$\dashv$			0.	0.	0.
BOARD MEMBER		X						0.	0.	0.
(12) PHIL WILLIAMS	1.00	22	_		_			0.	0.	0.
BOARD MEMBER	2000	X						0.	0.	0.
(13) LEE ZURIK	1.00	21	_		_			0.	0.	0.
BOARD MEMBER	1.00	X						0.	0.	0.
(14) MARK HORVIT	40.00	21	$\rightarrow$	$\dashv$	_	$\dashv$		0.	0.	0.
EXECUTIVE DIRECTOR	40.00			X				87,106.	0.	20 620
(15) ANTHONY DEBARROS	40.00	-	-	21	_	_	_	07,100.	0.	30,638.
DIRECTOR OF PRODUCT DEVELOPMENT	10.00					X		125,303.	0.	43,829.
		$\neg$		$\neg$	1			123,303.	0.	43,023.
		$\dashv$	+	-	+	+	_			
									The second secon	The second secon

Total number of independent contractors (including but not limited to those listed above) who received more than

0

\$100,000 of compensation from the organization

Form 990 (2015)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Revenue excluded from tax under Related or Total revenue Unrelated exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events ..... 1c d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 1,401,746. g Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f ,401,746 **Business Code** 2 a CONFERENCES 900099 Program Service Revenue 781,119. 781,119. 290,333. b MEMBERSHIP DUES 900099 290,333. c DATA LIBRARY & WEB SER 900099 62,406. 62,406. d AWARDS CONTEST FEES 32,470. 900099 32,470. f All other program service revenue g Total. Add lines 2a-2f 1,166,328. Investment income (including dividends, interest, and other similar amounts) 171,918. 171,918. Income from investment of tax-exempt bond proceeds 4,898. Royalties .... 4,898. (i) Real 6 a Gross rents b Less: rental expenses c Rental income or (loss) ..... d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other 402,946. assets other than inventory b Less: cost or other basis and sales expenses ...... 16,138. 387,864. c Gain or (loss) 15,082.-16,138. d Net gain or (loss) -1,056-1,056.8 a Gross income from fundraising events (not Other Revenue including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 27,023. b Less: cost of goods sold b 18,149. c Net income or (loss) from sales of inventory 8,874. 8,874. Miscellaneous Revenue **Business Code** 11 a SALES AND SERVICE 900099 51,627. 51,627. b ADVERTISING INCOME 541800 2,725. 2,725. d All other revenue 54,352. e Total. Add lines 11a-11d 12 Total revenue. See instructions. 2,807,060.1,226,829. 2,725. 175,760.

Form 990 (2015) INVESTIGATIVE
Part IX Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All oth	ner organizations must co	omplete column (A)	
	Check if Schedule O contains a respon-	se or note to any line in	this Part IX	procession (A).	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21			government of the second	expenses
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	105,049.	105,049.		
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	121,232.	12,123.	48,492.	60,617
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7		728,378.	175 214	0.50	
8	Other salaries and wages Pension plan accruals and contributions (include	140,3/8.	475,314.	253,064.	
O	section 401(k) and 403(b) employer contributions)	214,309.	147 270	C7 020	
9	Other employee benefits	214,309.	147,270.	67,039.	
10	Payroll taxes				
11	Fees for services (non-employees):				
	Management		*		
h	Legal	15,954.	75.	15 070	
C	Accounting	20,410.	/5.	15,879.	
d	Lobbying	20,410.		20,410.	
e	Professional fundraising services. See Part IV, line 17				<del>V</del>
f	Investment management fees	16,747.		16,747.	, , , , , , , , , , , , , , , , , , , ,
g	Other. (If line 11g amount exceeds 10% of line 25,	10,717.		10,747.	
3	column (A) amount, list line 11g expenses on Sch O.)	6,519.	901.	4,618.	1 000
12	Advertising and promotion	3,627.	3,434.	4,010.	1,000.
13	Office expenses	265,209.	138,364.	122,881.	3,964.
14	Information technology	24,825.	7,079.	16,361.	1,385.
15	Royalties	,	.,,,,,,	20,301.	1,303.
16	Occupancy				
17	Travel	87,806.	74,449.	7,604.	5,753.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials			7,70020	3,733.
19	Conferences, conventions, and meetings	262,171.	262,171.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	170,664.	160,241.	10,423.	
23	Insurance				
24	Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	PROJECT WORD	79,113.	79,113.		
b	DOCUMENT CLOUD	62,218.	62,218.		· · · · · · · · · · · · · · · · · · ·
C	AWARDS EXPENSE	20,187.	20,187.		
d	OUTLINERS	8,000.	8,000.		
е	All other expenses	23,609.	23,609.		
25	Total functional expenses. Add lines 1 through 24e	2,236,027.	1,579,597.	583,518.	72,912.
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here if following SOP 98-2 (ASC 958-720)				. 2 / 3 1 2 8
	in following SOP 98-2 (ASC 958-720)				

Form 990 (2015)
Part X Balance Sheet

		Check if Schedule O contains a versus					
		Check if Schedule O contains a response or no	ote to any lir	ne in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			822,867		1,484,194
	2	Savings and temporary cash investments	200,022	. 2	200,079		
	3	riedges and grants receivable, net		799,573	• 3	102,239	
	4	Accounts receivable, fiet	225,943	. 4	282,138		
	5	trustees, key employees, and highest compens	ormer office ated emplo	ers, directors,			
		Part II of Schedule L				5	APPENDING TO THE PERSON OF THE
	6	Loans and other receivables from other disqua	ified person	s (as defined under		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		section 4958(f)(1)), persons described in sectio	n 4958(c)(3)	(B), and contributing			
.		employers and sponsoring organizations of sec	tion 501(c)(	9) voluntary			
Assets		employees' beneficiary organizations (see instr)	. Complete	Part II of Sch L		6	
HSS	7	Notes and loans receivable, net				7	
`	8	inventories for sale or use			13,562.		16,333
- 1	9	repaid expenses and deterred charges			18,375.	9	25,330
1	0a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	88,406.			
	b	Less: accumulated depreciation	10b	86,633.	22,282.	10c	1.773
1	1	Investments - publicly traded securities	3,432,021.	11	1,773 4,079,596		
12	_	investments - other securities. See Part IV, line			12		
10	3	Investments - program-related. See Part IV, line			13		
14	4	Intangible assets	353,188.	14	581,549		
15	9	Other assets. See Part IV, line 11		15			
16	0	Total assets. Add lines 1 through 15 (must equal	al line 34)		5,887,833.	16	6,773,231
17	,	Accounts payable and accrued expenses	313,635.	17	347,309		
18	5	Grants payable				18	
19	9	Deferred revenue			6,140.	19	31,850
20	,	rax-exempt bond liabilities				20	
21		Escrow of custodial account liability. Complete F	Part IV of Sc	hedule D		21	
22	2	Loans and other payables to current and former	officers, dire	ectors, trustees,			
		key employees, highest compensated employee	s, and disqu	ualified persons.			
22	,	Complete Part II of Schedule L	• • • • • • • • • • • • • • • • • • • •			22	
24	l i	Secured mortgages and notes payable to unrela	ted third par	rties		23	
25	. (	Unsecured notes and loans payable to unrelated	third partie	S		24	
20	r	Other liabilities (including federal income tax, pay	ables to rela	ated third			×
		parties, and other liabilities not included on lines Schedule D			_		
26		Total liabilities Add Face 47.11			0.	25	254,981
120		Organizations that follow SEAS 117 (ASS SES)			319,775.	26	634,140
		Organizations that follow SFAS 117 (ASC 958) complete lines 27 through 29, and lines 33 and	, check her	e ► 🔼 and			
27	l	Investricted net assets	134.		602 052		
28	T	Inrestricted net assets			683,053.	27	1,100,868
29	F	Femporarily restricted net assets Permanently restricted net assets			1,562,838.	28	1,659,718
	C	Organizations that do not follow SFAS 117 (AS	C 050\ aba		3,322,167.	29	3,378,505.
	а	and complete lines 30 through 34.	C 936), che	ck nere			
30	C	Capital stock or trust principal, or current funds		- September 2000 Control Contr			
31	P	Paid-in or capital surplus, or land, building, or equ	inmort f			30	
32	R	Retained earnings, endowment, accumulated inc	ipinent tunc			31	
33	Т	otal net assets or fund balances	or othe	er funds	E E C 0 0 T 0	32	6.400
34	Т	otal net assets or fund balances otal liabilities and net assets/fund balances			5,568,058.	33	6,139,091.
		Daiances			5,887,833.	34	6,773,231.

Form 990 (2015) INVESTIGATIVE REPORTERS & EDITORS, INC. 51-0  Part XI Reconciliation of Net Assets	16674:		
			age 12
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)	2.80	7.	060.
2 Total expenses (must equal Part IX, column (A), line 25)			027.
rievende less expenses. Subtract line 2 from line 1			033.
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	5,56		
Net unrealized gains (losses) on investments	- / 0 (		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
6			
7 Investment expenses 7			
Prior period adjustments			
Other changes in net assets or fund balances (explain in Schedule O)			0.
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
column (B))	6,13	9.0	)91.
Financial Statements and Reporting			-
Check if Schedule O contains a response or note to any line in this Part XII			X
		Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other			
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.	-		
Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
if Yes," check a box below to indicate whether the financial statements for the year were compiled 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	X	
The Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis			
consolidated basis, or both:			
X Separate basis Consolidated basis Both consolidated and separate basis			
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
review, or compilation of its financial statements and selection of an independent accountant?	2c	X	Data Segre State
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			10 mg
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
Act and OMB Circular A-133?	За		X
b if res, and the organization undergo the required audit or audits? If the organization did not undergo the required audit			
or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
	Form	990	(2015)

#### SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

INVESTIGATIVE REPORTERS & EDITORS TNC Employer identification number 51-0166741

Pa	art I	Reason for Public	Charity Status	3 (4)!!		OILD,	1110.	31-0100/41
		instinction is seen to it is	o Onarity Status	(All organizations must	complete	this part.)	See instructions.	
1	Organ	ization is not a private fou	ndation because it is	s: (For lines 1 through 11	, check or	nly one box	c.)	
		A church, convention of	churches, or associa	ation of churches describ	oed in sec	tion 170(b)	(1)(A)(i).	
2		A school described in se	ction 170(b)(1)(A)(ii)	). (Attach Schedule E (Fo	orm 990 or	990-EZ).)		
3		A hospital or a cooperation	ve hospital service o	rganization described in	section 1	70(b)(1)(A)	(iii).	
4		A medical research organ	nization operated in	conjunction with a hospi	tal describ	ed in secti	on 170(b)(1)(A)(iii). Ente	er the hospital's name
		city, and state:						
5		An organization operated section 170(b)(1)(A)(iv).	for the benefit of a	college or university owr	ned or ope	rated by a	governmental unit descr	ribed in
6								
7	X	A federal, state, or local g	overnment or gover	nmental unit described i	n section	170(b)(1)(A	\)(v).	
,		An organization that norm	nally receives a subs	tantial part of its suppor	t from a go	overnment	al unit or from the genera	al public described in
0		section 170(b)(1)(A)(vi).						
8		A community trust descri	bed in <b>section 170</b> (l	o)(1)(A)(vi). (Complete Pa	art II.)			
9		An organization that norm	nally receives: (1) mo	re than 33 1/3% of its si	upport froi	m contribut	ions, membership fees,	and gross receipts from
		activities related to its exe	empt functions - sub	ject to certain exception	s, and (2)	no more th	an 33 1/3% of its suppo	ert from gross investment
		income and unrelated bus	siness taxable incom	ne (less section 511 tax)	from busir	nesses acq	uired by the organization	n after June 30, 1975
		See section 509(a)(2). (C	omplete Part III.)					
10		An organization organized	and operated exclu	sively to test for public :	safety. See	e section 5	09(a)(4).	
11		An organization organized	and operated exclu	sively for the benefit of,	to perforn	n the functi	ons of or to carry out th	le nurnoses of one or
		more publicly supported of	organizations describ	ped in section 509(a)(1)	or section	509(a)(2)	See section 500(a)(3)	Chack the have in
		lines 11a through 11d tha	t describes the type	of supporting organizat	ion and co	mnlete line	e 11e 11f and 11g	Check the box in
a		Type I. A supporting org	ganization operated.	supervised, or controlle	d by its su	innorted or	ganization(s) typically b	v giving
		the supported organizat	tion(s) the power to r	regularly appoint or elect	a majority	of the dire	ectors or trustees of the	y giving
		organization. You must	complete Part IV. S	Sections A and B	a majority	y or the dire	ctors or trustees of the	supporting
b		Type II. A supporting or	ganization supervise	ed or controlled in conne	ction with	ita aummani	od	
		control or management	of the supporting or	ganization vested in the	came per	no suppor	ed organization(s), by n	aving
		organization(s). You mu	st complete Part IV	Sections A and C	same pers	sons that c	ontrol or manage the su	pported
C		Type III functionally int	egrated A supporti	ng organization as and C.	1.1-			
		Type III functionally int	on(s) (see instruction	ng organization operated	in conne	ction with,	and functionally integrat	ted with,
d		its supported organization	on(s) (see instruction	is). You must complete	Part IV, S	Sections A,	D, and E.	
ŭ		Type III non-functional	tograted. A sup	porting organization ope	erated in c	onnection	with its supported organ	ization(s)
		that is not functionally in	tiegrated. The organ	ization generally must sa	atisfy a dis	tribution re	quirement and an attent	tiveness
•		requirement (see instruc	tions). You must co	mplete Part IV, Section	s A and D	), and Part	V.	
e		Check this box if the org	anization received a	written determination fr	om the IR	S that it is a	Type I, Type II, Type III	
	C-t-	functionally integrated, o	or Type III non-function	onally integrated suppor	ting organ	ization.		
		the number of supported						
g	Provid	de the following informatio						
	(1)	organization	(ii) EIN	(iii) Type of organization (described on lines 1-9		organization in your	(v) Amount of monetary	(vi) Amount of
		9		above (see instructions))		document?	support (see	other support (see
				"	Yes	No	instructions)	instructions)
tal								

Schedule A (Form 990 or 990-EZ) 2015 INVESTIGATIVE REPORTERS & EDITORS, INC. 51-0166741 Page 2

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

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

Se	ction A. Public Support	stod bolow, piec	200 complete Part	111.)			
	endar year (or fiscal year beginning in)	(a) 2011	(b) 0010	(-) 0010	/ 0 == : :		
	Gifts, grants, contributions, and	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	membership fees received. (Do not						
	include any "unusual grants.")	1231349.	1201372.	982,427.	2096455.	1401746.	6012240
2	Tax revenues levied for the organ-	1231313.	1201572.	702,427.	2090433.	1401/46.	6913349.
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	12,000.	12,000.	12,000.	12,000.	12 000	60 000
4	Total. Add lines 1 through 3	1243349.		994,427.	2108455.	12,000. 1413746.	60,000.
5	The portion of total contributions	1213313.	1213372.	774,427.	2100433.	1413/46.	6973349.
	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,						
	l (f)						2404025
6	Public support. Subtract line 5 from line 4.			And the state of t			3484935.
Sec	ction B. Total Support	- Marie Company of the Company of th					3488414.
	ndar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(a) 2012	(-1) 004.4	1.0045	
	Amounts from line 4	1243349.	1213372.	(c) 2013 994, 427.	(d) 2014 2108455.	(e) 2015 1413746.	(f) Total 6973349.
	Gross income from interest,	22100191	1213372.	JJ4,427.	2100455.	1413/40.	09/3349.
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	165,192.	164,980.	166,350.	166,882.	176,816.	840,220.
	Net income from unrelated business		202/3000	100,330.	100,002.	170,010.	040,220.
	activities, whether or not the						
	business is regularly carried on						
	Other income. Do not include gain					-	
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10	Market No. 2012/15/2011					7813569.
	Gross receipts from related activities,	etc. (see instruction	ns)			12 5	,173,999.
13	First five years. If the Form 990 is for	the organization's	first, second, third	fourth or fifth ta	x vear as a section	501(0)(3)	, 110,000.
Sec	organization, check this box and stop tion C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2015 (li	ne 6, column (f) div	vided by line 11, co	olumn (fl)		14	44.65 %
15	Public support percentage from 2014	Schedule A, Part I	I, line 14	(//		15	37.22 %
16a	33 1/3% support test - 2015. If the or	rganization did not	check the box on	line 13, and line 1	4 is 33 1/3% or m	ore check this ho	x and
	stop here. The organization qualifies a	as a publicly suppo	orted organization	,		ore, erroen and be	X
b	33 1/3% support test - 2014. If the or	rganization did not	check a box on lir	ne 13 or 16a, and	line 15 is 33 1/3%	or more check thi	is hox
	and <b>stop here.</b> The organization qualif	fies as a publicly su	upported organiza	tion			<b>N</b>
17a	10% -facts-and-circumstances test	- 2015. If the orga	nization did not ch	neck a box on line	13, 16a, or 16b, ar	nd line 14 is 10% (	or more.
	and if the organization meets the "fact	s-and-circumstanc	es" test, check thi	s box and stop he	ere. Explain in Part	VI how the organi	zation
	meets the "facts-and-circumstances" t	est. The organizat	on qualifies as a p	ublicly supported	organization	on the organi	
b	10% -facts-and-circumstances test	- 2014. If the orga	nization did not ch	neck a box on line	13, 16a, 16b, or 1	7a. and line 15 is 1	0% or
1	more, and if the organization meets the	e "facts-and-circun	nstances" test, che	eck this box and s	top here. Explain	in Part VI how the	0,00
(	organization meets the "facts-and-circu	umstances" test. T	he organization or	ualifies as a public	ly supported organ	nization	
18	Private foundation. If the organization	did not check a b	ox on line 13, 16a	16b, 17a, or 17b	check this box an	id see instructions	
				2, 3, 1, 1, 0,		lule A (Form 990	
					Scried	7 (1 01111 990 (	J. 000-LEJ 20 10

## Schedule A (Form 990 or 990-EZ) 2015 INVESTIGATIVE REPORTERS & EDITORS, INC. 51-0166741 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	now, please com	piete Part II.)				
_	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(4) 0014	(-) 0045	(0.7)
	Gifts, grants, contributions, and	(a) 2011	(b) 2012	(0) 2013	(d) 2014	(e) 2015	(f) Total
	membership fees received. (Do not						
	include any "unusual grants.")						
2					<del>                                     </del>		
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	_						
0	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and					-	
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received					-	
	from other than disqualified persons that	1					
	exceed the greater of \$5,000 or 1% of the	ŀ					
•	amount on line 13 for the year	-					
	Add lines 7a and 7b						
Sec	Public support. (Subtract line 7c from line 6.)				12 15 11 15 mg		
						,	
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Amounts from line 6						
IUa	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						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is	2					
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
13	assets (Explain in Part VI.)						
	First five years. If the Form 990 is for the	no organization's	first seemed thing	fat = = : ('ft = 1-		504(1)(0)	
	check this box and stop here						ation,
	tion C. Computation of Public	Support Por	contago				
10	Public support percentage for 2015 (line	e 8, column (f) div	vided by line 13, co	olumn (f))		15	%
500	Public support percentage from 2014 S	chedule A, Part I	III, line 15			16	%
	tion D. Computation of Invest						
17	Investment income percentage for 2015	(line 10c, colum	n (f) divided by line	e 13, column (f))		17	%
18	Investment income percentage from 20	14 Schedule A, F	Part III, line 17			18	%
19a	<b>33 1/3% support tests - 2015.</b> If the or	rganization did no	ot check the box o	n line 14, and line	15 is more than 3	33 1/3%, and line 17	' is not
	more than 33 1/3%, check this box and	stop here. The	organization qualif	ies as a publicly s	supported organiz	ation	
b	33 1/3% support tests - 2014. If the or	ganization did no	ot check a box on	line 14 or line 19a	, and line 16 is mo	ore than 33 1/3% ar	nd
	ine 18 is not more than 33 1/3%, check	this box and sto	op here. The organ	nization qualifies a	as a publicly supp	orted organization	
20	Private foundation. If the organization	did not check a b	oox on line 14, 19a	, or 19b, check th	is box and see in	structions	
22022	00 00 15	The second secon					

## Schedule A (Form 990 or 990-EZ) 2015 INVESTIGATIVE REPORTERS & EDITORS, INC. 51-0166741 Page 4

#### Part IV | Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Sch	nedule A (Form 990 or 990 EZ) 2015 INVESTIGATIVE REPORTERS & EDITORS, INC. 51	-016674	11 P	age 5
	art IV Supporting Organizations (continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?			
k	A family member of a person described in (a) above?	11a	-	
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11b	-	
Se	ction B. Type I Supporting Organizations	110		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
0	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
Sec	ction C. Type II Supporting Organizations	2		
			V	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		Yes	No
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations			
	D'III		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			
2	organization's governing documents in effect on the date of notification, to the extent not previously provided?  Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	1		
-	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).			
3	By reason of the relationship described in (2), did the organization's supported organizations have a	2		
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction	ns):		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instructions)		
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes.			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	2a		
~	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.	01		
3	Parent of Supported Organizations. Answer (a) and (b) below.	2b		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
	of its supported organizations? If "Yes" describe in Part VI, the role played by the organization in this regard	O.L.		

Sch	edule A (Form 990 or 990-EZ) 2015 INVESTIGATIVE REPORTERS	S & EI	OITORS, INC.	51-0166741
Pa	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ng Orga	nizatione	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	na trust on	Nov 20 1070 See insta	
	other Type III non-functionally integrated supporting organizations must c	omplete S	octions A through E	uctions. All
800		ompiete Si	ections A through E.	(2)
360	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		(Optional)
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		
	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):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	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	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Section	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to	3		
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally	1 0		
	instructions)	rintegrated	rype III supporting organ	nization (see

Schedule A (Form 990 or 990-EZ) 2015

instructions).

Schedule A (Form 990 or 990-EZ) 2015 INVESTIGATIVE REPORTERS & EDITORS, INC. 51-0166741 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2015 from Section C, line 6 10 Line 8 amount divided by Line 9 amount (i) (ii) (iii) Underdistributions **Excess Distributions** Distributable Section E - Distribution Allocations (see instructions) Pre-2015 Amount for 2015 Distributable amount for 2015 from Section C, line 6 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2015: a b C d From 2013 e From 2014 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2015 distributable amount Carryover from 2010 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2015 from Section D, line 7: a Applied to underdistributions of prior years b Applied to 2015 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions). Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see 7 Excess distributions carryover to 2016. Add lines 3j and 4c. 8 Breakdown of line 7: a b c Excess from 2013

Schedule A (Form 990 or 990-EZ) 2015

d Excess from 2014e Excess from 2015

Part VI	Supplemental Information S. A.
3 -11 11	Part IV. Section A lines 1.2 3h 3c 4h 4c 5a 6.9c No. 2 14th by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
	line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, Iine 1; Part V, Section B, lines 1 and 2; Part IV, Section C, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6, Also complete this control of the section B, line 1e; Part V, Section B, lin
	Section D, lines 5, 6, and 8; and Part V, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, (See instructions.)

#### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

2015 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

INVESTIGATIVE REPORTERS & EDITORS, INC.

Employer identification number 51-0166741

Pa	art I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	ne 6.	The second secon
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be us	sed only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose co	enferring
	impermissible private benefit?		Ves No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990. Pa	rt IV. line 7
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a historic	cally important land area
	Protection of natural habitat	Preservation of a certifie	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of	a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
a	The state of the s		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the or	ganization during the tax
	year >		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the peri	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, and enforcing conser	vation easements during the year
7			
7	Amount of expenses incurred in monitoring, inspecting, handl  \$\bigset\$ \$	ling of violations, and enforcing conservation	n easements during the year
8			
0	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(	4)(B)(i)
9	and section 170(h)(4)(B)(ii)?		Yes No
3	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense sta	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizati conservation easements.	on's financial statements that describes the	organization's accounting for
Par	t III Organizations Maintaining Collections of	Art Historical Treasures or Othe	or Similar Assets
	Complete if the organization answered "Yes" on Form S	990. Part IV line 8	ei Siiiliai Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC		t and halance sheet wells of sit
	historical treasures, or other similar assets held for public exhi	ibition education or research in further and	of public services provide in Bot VIII
	the text of the footnote to its financial statements that describ	pes these items	of public service, provide, in Part XIII,
b	If the organization elected, as permitted under SFAS 116 (ASC		d balance about wells of set bistories.
	treasures, or other similar assets held for public exhibition, edu	ucation or research in furtherance of public	d balance sneet works of art, historical
	relating to these items:	deation, or research in furtherance of public	service, provide the following amounts
			•
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical treas	sures or other similar assets for financial as	in provide
	the following amounts required to be reported under SFAS 111	6 (ASC 958) relating to these items:	in, provide
a	Revenue included on Form 990, Part VIII, line 1	e vice doop rolating to these items.	•
b	Assets included in Form 990 Part X		

	edule D (Form 990) 2015 INVESTI	GATIVE REP	ORTERS & E	EDITORS, IN	NC. 51-	0166741 Page 2
Pa	organizations Maintaining (	Collections of A	rt, Historical Tr	easures, or Oth	ner Similar A	ssets(continued)
3	Using the organization's acquisition, access	ion, and other record	s, check any of the	following that are a	significant use o	f its collection items
	(check all that apply):					
a	Public exhibition	, d	Loan or exc	change programs		
b	The state of the s	е				
C	The second secon			***		
4	Provide a description of the organization's c	ollections and explain	n how they further t	he organization's ex	empt purpose in	Part XIII.
5	During the year, did the organization solicit of	or receive donations	of art, historical trea	sures, or other simil	ar assets	
	to be sold to raise funds rather than to be m	aintained as part of t	he organization's co	ollection?		Yes No
Pa	rt IV Escrow and Custodial Arran	gements. Comple	ete if the organization	on answered "Yes" o	n Form 990. Parl	IV. line 9. or
_	reported an amount on Form 990, Pa	rt X, line 21.				,
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribution	ns or other assets no	ot included	V
	on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:			
						Amount
C	Beginning balance				1c	, , , , , , , , , , , , , , , , , , , ,
d	Additions during the year				1d	,
е	Distributions during the year				1e	, , , , , , , , , , , , , , , , , , , ,
f	Ending balance				1f	
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or cu	ustodial account liab	oility?	Yes No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided on Part XI	II	
Pa	rt V Endowment Funds. Complete i	f the organization and	swered "Yes" on Fo	orm 990, Part IV, line	10.	
		(a) Current year	(b) Prior year		(d) Three years ba	ack (e) Four years back
1a	3 , ,	3,460,526.	3,562,520.	3,420,785.	3,413,93	13. 3,425,149.
b	Contributions	39,295.	67,050.	28,113.	9,30	
C	Net investment earnings, gains, and losses	170,196.	-19,044.	315,075.	142,50	165,494.
d	Grants or scholarships		100,000.	45,500.	51,00	36,000.
е	Other expenditures for facilities					
	and programs		50,000.	104,500.	94,00	159,000.
f	Administrative expenses			51,453.		
g	End of year balance	3,670,017.	3,460,526.	3,562,520.	3,420,78	3,413,913.
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, column (a	)) held as:		
a	Board designated or quasi-endowment		%			
b	Permanent endowment > 92.06	%	-			
C	Temporarily restricted endowment ▶	7.94 %				
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.				
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are held ar	nd administered for	the organization	
	by:					Yes No
	(i) unrelated organizations					3a(i) X
	(II) related organizations					3a(ii) X
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?			3b
4	Describe in Part XIII the intended uses of the	organization's endov	wment funds.			
Pai	t VI Land, Buildings, and Equipm					
	Complete if the organization answered	d "Yes" on Form 990,	Part IV, line 11a. S	ee Form 990, Part X	, line 10.	
	Description of property	(a) Cost or oth			ccumulated	(d) Book value
		basis (investm	ent) basis (	other) de	preciation	
1a	Land					
b	Buildings					,
C	Leasehold improvements					
d	Equipment		88	8,406.	86,633.	1,773.
е	Other					
otal	. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part X	(, column (B), line 10	Oc.)	<b>&gt;</b>	1,773.

Schedule D (Form 990) 2015 INVESTIGATIVE REPO	RTERS & EDITORS, INC. 51-0166741 Page 3
Part VII Investments - Other Securities.	31 0100741 Page 3
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 (including name of security) (b) Book	value (c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives	
(2) Closely-held equity interests	
(3) Other	
(A)	
(B)	
(C)	
(D)	
(E)	
(F)	
(G)	
(H)	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	
Part VIII Investments - Program Related.	
Complete if the organization answered "Yes" on Form 990, I	Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment (b) Book	value (c) Method of valuation: Cost or end-of-year market value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	
Part IX Other Assets.	
Complete if the organization answered "Yes" on Form 990, F	art IV, line 11d. See Form 990, Part X, line 15.
(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
otal. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X   Other Liabilities.	<b>&gt;</b>
Complete if the organization answered "Yes" on Form 990, P  (a) Description of liability	
	(b) Book value
(1) Federal income taxes (2) FUNDS ADMINISTERED AS A FISCAL	
(2) FUNDS ADMINISTERED AS A FISCAL (3) AGENT	054 001
(4)	254,981.
(5)	
(6)	
(7)	
(8)	
(9)	
	054 004
otal. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 254,981.
<ul> <li>Liability for uncertain tax positions. In Part XIII, provide the text of the forganization's liability for uncertain tax positions under FIN 48 (ASC 74)</li> </ul>	potnote to the organization's financial statements that reports the

Schedule D (Form 990) 2015

Part XI Reconciliation of Revenue per A	TIVE REPORTERS &	EDITOR	S, INC.	51-	0166741	Page 4
Part XI Reconciliation of Revenue per A  Complete if the organization answered "Yes	es" on Form 990 Port IV line 199	ents with	Revenue per l	Returi	٦.	
1 Total revenue, gains, and other support per audit	ed financial statements			T .	2 020	1.60
2 Amounts included on line 1 but not on Form 990,	Part VIII line 10:			_1_	2,820	,462.
a Net unrealized gains (losses) on investments	rait viii, iiile 12.	2a				
b Donated services and use of facilities		2b	12,000.			
c Recoveries of prior year grants		2c	12,000			
d Other (Describe in Part XIII.)		2d		-		
e Add lines 2a through 2d		Zu		2e	12	000.
3 Subtract line 2e from line 1				3	2,808	462
Amounts included on Form 990, Part VIII, line 12,	but not on line 1:				27000	102
a Investment expenses not included on Form 990, F	Part VIII, line 7b	4a	16,747.	200		
b Other (Describe in Part XIII.)		4b	-18,149.			
c Add lines 4a and 4b				4c	-1,	402.
5 Total revenue. Add lines 3 and 4c. (This must equa	al Form 990, Part I, line 12.)			5	2 807	060.
rait All Recollemation of Expenses per /	Audited Financial Statem	ents With	Expenses per	Retu	rn.	
Complete if the organization answered "Ye	s" on Form 990, Part IV, line 12a					
1 Total expenses and losses per audited financial st	atements			1	2,249,	429.
2 Amounts included on line 1 but not on Form 990, I	Part IX, line 25:					
a Donated services and use of facilities		2a	12,000.			
b Prior year adjustments		2b				
c Other losses		2c				
d Other (Describe in Part XIII.)		2d	18,149.			
e Add lines 2a through 2d  3 Subtract line 2e from line 1				2e	30,	149.
				3	2,219,	280.
Amounts included on Form 990, Part IX, line 25, bi	It not on line 1:					
a Investment expenses not included on Form 990, P	art VIII, line /b	4a	16,747.			
b Other (Describe in Part XIII.) c Add lines 4a and 4b					1.5	- 4-
5 Total expenses. Add lines 3 and 4c. (This must equ	ual Form 000 Port Line 10.)			4c		747.
Part XIII Supplemental Information.	iair Oim 990, Fait i, line 16.)			5	2,236,	02/.
Provide the descriptions required for Part II, lines 3, 5, ar lines 2d and 4b; and Part XII, lines 2d and 4b. Also comp	d 9; Part III, lines 1a and 4; Part lete this part to provide any addi	IV, lines 1b a tional inform	nd 2b; Part V, line 4 ation.	1; Part )	K, line 2; Part X	l,
PART V, LINE 4:						
THE PURPOSES OF ENDOWMENT FU	NDS ARE: RESOURCE	ES CENT	ER, FUND	FELL	OWSHIPS	,
INVESTIGATIVE REPORTING TRAIN	NING, AND GENERAL	SUPPO	ORT OF IRE	OPE	RATIONS	•
PART XI, LINE 4B - OTHER ADJU	JSTMENTS:					
COST OF GOODS SOLD					-18,	149.
PART XII, LINE 2D - OTHER ADJ	USTMENTS:				107	
COST OF GOODS SOLD					18,	L49.

Schedule D (Form 990) 2015 Part XIII Supplemental In	INVESTIGATIVE	REPORTERS	&	EDITORS,	INC.	51-0166741	Page 5
Supplemental In	formation (continued)						
						<del>,</del>	
					· · · · · · · · · · · · · · · · · · ·		
			-				
				_			
		c					
				-			

#### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

## Statement of Activities Outside the United States

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

Attach to Form 990.

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

2015
Open to Public Inspection

Name of the organization

Employer identification number

INVESTIGATIVE F	REPORTERS	& EDIT	ORS, INC.		51-01667	1.1
Part I General Info	rmation on A	Activities Ou	tside the United States. Comp	lete if the organ	ization answered "	Yes" on
Form 990, Part I	V, line 14b.					100 011
1 For grantmakers. Does the grantees' eligibility f	s the organization for the grants or	n maintain recor assistance, and	rds to substantiate the amount of its gr the selection criteria used to award th	rants and other e grants or assi	assistance,	Yes No
United States.			procedures for monitoring the use of i		ther assistance out	side the
3 Activities per Region. (T		t I, line 3 table c	an be duplicated if additional space is	needed.)		
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a prog describe	rity listed in (d) gram service, specific type e(s) in region	(f) Total expenditures for and investments in region
HONG KONG	0	0	PROGRAM SERVICES	CUSTOM TRAI	NING	1,733.
NORWAY	0					
NORWAI	U	0	PROGRAM SERVICES	CUSTOM TRAIL	NING	2,856.
TORONTO	0	0	PROGRAM SERVICES	CUSTOM TRAII	NING	4,381.
PAKISTAN	0	0	PROGRAM SERVICES	CUSTOM TRAIN	NING	356.
3 a Sub-total	0	0				9,326.
b Total from continuation sheets to Part I	0	0				0.
c Totals (add lines 3a		0				

Schedule F (Form 990) 2015 INVESTIGATIVE REPORTERS & EDITORS, INC. 51-0166741

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

the IRS, or for which the grantee or counsel has prov  3 Enter total number of other organizations or entities	2 Enter total number of re					(a) Name of organization
e grantee or counsel ther organizations or	ecipient organizations					(b) IRS code section and EIN (if applicable)
has provided a section entities	s listed above that are re					(c) Region
the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by					(d) Purpose of grant
	foreign country, r					(e) Amount of cash grant
	ecognized as tax-ex					(e) Amount (f) Manner of of cash grant cash disbursement
<b>*</b>	empt by					(g) Amount of non-cash assistance
						(h) Description of non-cash assistance
						(i) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2015

532073 10-01-15

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015 INVESTIGATIVE REPORTERS & EDITORS, INC. 51-0166741

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

Page 3

Part III can be duplicated if additional space is needed.

				(a) Type of grant or assistance
				be of grant or assistance (b) Region
				c) Number of recipients
				(d) Amount of cash grant
				(e) Manner of cash disbursement
				(f) Amount of non-cash assistance
				(g) Description of non-cash assistance
				(h) Method of valuation (book, FMV, appraisal, other)

	ule F (Form 990) 2015 INVESTIGATIVE REPORTERS & EDITORS, INC. 5	1-0166741 Page 4
Part	IV Foreign Forms	i ago i
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes X No

Schedule F	(Form 990) 2015 INV	ESTIGATIVE	REPORTERS	& EDITORS	, INC.	51-0166741	Page 5
Part V	Supplemental Infor					*	
	Provide the information r	equired by Part I, line	2 (monitoring of fun	ds); Part I, line 3, col	umn (f) (acco	unting method; amounts of	
	investments vs. expendit	ures per region); Part	II, line 1 (accounting	method): Part III (ad	counting me	thod); and Part III, column (c	.)
	(estimated number of rec	ipients), as applicable	Also complete this	nart to provide any	additional inf	ormation	•)
		),	or all of the transfer transfe	part to provide arry	additional init	ormation.	

## (Form 990) SCHEDULE I

Internal Revenue Service Department of the Treasury

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

► Attach to Form 990.

OMB No. 1545-0047

Open to Public

LHA Name of the organization Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table 1 (a) Name and address of organization Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. criteria used to award the grants or assistance? Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any General Information on Grants and Assistance recipient that received more than \$5,000. Part II can be duplicated if additional space is needed or government INVESTIGATIVE REPORTERS & EDITORS, (b) EIN Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. (c) IRC section if applicable (d) Amount of cash grant (e) Amount of assistance non-cash valuation (book, FMV, appraisal, (f) Method of non-cash assistance (g) Description of Employer identification number 51-0166741Schedule I (Form 990) (2015) (h) Purpose of grant or assistance X Yes Inspection No.

51-0166741

Page 2

Schedule I (Form 990) (2015) INVESTIGATIVE REPORTERS & EDITORS, INC.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Tune of orant or accietance	ILI Nimbor of	3- 1 A 1-1			
Ve/ / Jpo or grant or assistance	recipients	cash grant	cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
PHILIP L. GRAHAM DIVERSITY FELLOWSHIP	42	4,467.	1,320,FMV		1 YEAR MEMBERSHIP AND REGISTRATION FEE TO IRE
MINORITY DEVELOPMENT FELLOWSHIP	U1	6,467.	1,650.FMV		1 YEAR MEMBERSHIP AND REGISTRATION FEE TO IRE CONFERENCE
NICHOLAS OTTAWAY MINORITY FELLOWSHIPS	<u></u>	4,545.	7,020.FMV		1 YEAR MEMBERSHIP AND REGISTRATION FEE TO IRE CONFERENCE
HOLLY WHISENHUNT STEPHEN FELLOWSHIP	Ν	1,500.	2,340.	PMV	1 YEAR MEMBERSHIP AND REGISTRATION FEE TO IRE BOOTCAMP SEMINAR
- g	2	1,746.	660 <b>.</b> FMV		1 YEAR MEMBERSHIP AND REGISTRATION FEE TO IRE CONFERENCE
Part IV   Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	ired in Part I, line	2, Part III, column	(b), and any other ac		
PART I, LINE 2:					
APPLY FOR FELLOWSHIPS	ONLINE. 3	THE EXECUTIVE	IVE DIRECTOR	OR AND	
MEMBERSHIP COORDINATOR REVIEW THE APPL ON CONTENT OF WORK EXAMPLES SUBMITTED,	APPLICATIONS TED, DEGREE	OF AN	D MAKE THE SEL	SELECTION BASED	
INVOLVED WITH SUBMISSION, REFERENCES	, AND	COVER LETTER	ER AND CAREER	EER GOALS.	
THE GRANT FUNDS ARE HELD IN AN OPPH	OPPENHEIMER	INVESTMENT	ACCOUNT	AND INTEREST	
IS APPLIED MONTHLY. THE EXECUTIVE	DIRECTOR	AND FINANCIAL	NCIAL OFFICER	CER MEET	
MONTHLY TO DISCUSS AVAILABILITY AND	USE OF	FUNDS.			

532242 04-01-15

532242 04-01-15			DAVID DIETZ FELLOWSHIPS	JAMES RICHARD BENNETT SCHOLARSHIPS	GODFREY WELLS STANCILL FELLOWSHIPS	JENNIFER LEONARD SCHOLARSHIPS	(a) Type of grant or assistance	Schedule I (Form 990)  INVESTIGATIVE REPORTERS & EDITORS, INC.  Part III Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)
			<u> </u>	1.	1.	<u>, 1</u>	(b) Number of recipients	PORTERS
			1,387.	1,165.	500.	1,165.	(c) Amount of cash grant	& EDITORS,
			330.FMV	125.	330.	AWA 08.8	(d) Amount of non- cash assistance	, INC. 1 (Form 990), Part
			AWA	MA	PMV	NWA	(e) Method of valuation (book, FMV, appraisal, other)	T.)
Schedule I (Form 990)			1 YEAR MEMBERSHIP AND REGISTRATION FEE TO IRE CONFERENCE	1 YEAR MEMBERSHIP AND REGISTRATION FEE TO IRE CONFERENCE	1 YEAR MEMBERSHIP AND REGISTRATION FEE TO IRE CONFERENCE	1 YEAR MEMBERSHIP AND REGISTRATION FEE TO IRE CONFERENCE	(f) Description of non-cash assistance	51-0166741 Page 2

#### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

#### Supplemental Information to Form 990 or 990-EZ

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

Open to Public

Information about Schedule 0 (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

OMB No. 1545-0047

Name of the organization Employer identification number INVESTIGATIVE REPORTERS & EDITORS, INC. 51-0166741 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: INVESTIGATIVE REPORTERS FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PROFESSIONAL STANDARDS, PROTECTING THE RIGHTS OF INVESTIGATIVE JOURNALISTS, AND ENSURING THE FUTURE OF IRE. FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: ACTUALLY SPENT DURING THE YEAR WERE \$412,802. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: CREATE AND ACCUMULATE REFERENCE DATA AND ASSOCIATED SERVICES BY MEMBERS IN INVESTIGATIVE JOURNALISM. EXPENSES \$ 55,775. INCLUDING GRANTS OF \$ 0. REVENUE \$ 37,895. WEB SERVICES: FUNDING OPERATION OF THE WEBSITE, INCLUDING RESOURCES, WORKSHOPS, CONFERENCES, JOB ADS, AND OTHER ONLINE CONTENT. REVENUES SHOWN ABOVE DO NOT INCLUDE \$20,000 OF CONTRIBUTIONS THAT WERE RESTRICTED BY DONORS FOR USE IN FUNDING WEB SERVICES EXPENSES SHOWN ABOVE. THE REQUIREMENTS FOR CLASSIFYING REVENUES IN THE FORM 990 DO NOT PERMIT CONTRIBUTIONS TO BE REPORTED ABOVE AS PROGRAM SERVICE REVENUE, BUT INSTEAD THEY ARE REPORTED ELSEWHERE AS CONTRIBUTION REVENUE. EXPENSES \$ 69,690. INCLUDING GRANTS OF \$ 0. REVENUE \$ 35,001.

Name of the organization

INVESTIGATIVE REPORTERS & EDITORS, INC.

Employer identification number 51-0166741

EXPENSES \$ 20,187. INCLUDING GRANTS OF \$ 0. REVENUE \$ 32,470.

NET SALES OF PROGRAM RELATED ITEMS.

EXPENSES \$ 8,454. INCLUDING GRANTS OF \$ 0. REVENUE \$ 22,606.

PROVIDE GENERAL MEMBERSHIP SERVICES AND THE IRE JOURNAL TO ENHANCE THE SKILLS AND RESOURCES OF JOURNALISTS AND TRAIN AND EDUCATE THEM IN THE TECHNIQUES OF INVESTIGATIVE REPORTING.

EXPENSES \$ 117,631. INCLUDING GRANTS OF \$ 0. REVENUE \$ 290,333.

GRANT AWARDED TO CREATE A COMPREHENSIVE, OPEN DATABASE OF ELECTION RESULTS IN THE UNITED STATES.

REVENUES SHOWN ABOVE DO NOT INCLUDE \$8,064 OF CONTRIBUTIONS THAT WERE

RESTRICTED BY DONORS FOR USE IN FUNDING ELECTION DATABASE EXPENSES

SHOWN ABOVE. THE REQUIREMENTS FOR CLASSIFYING REVENUES IN THE FORM 990

DO NOT PERMIT CONTRIBUTIONS TO BE REPORTED ABOVE AS PROGRAM SERVICE

REVENUE, BUT INSTEAD THEY ARE REPORTED ELSEWHERE AS CONTRIBUTION

REVENUE.

EXPENSES \$ 8,064. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

GRANT AWARDED TO UPDATE AND EXPAND CENSUS.IRE.ORG, A TOOL FOR

JOURNALISTS TO EASILY FIND CENSUS AND OTHER INFORMATION ABOUT

COMMUNITIES.

REVENUES SHOWN ABOVE DO NOT INCLUDE \$11,696 OF CONTRIBUTIONS THAT WERE

RESTRICTED BY DONORS FOR USE IN FUNDING CENSUS DATABASE EXPENSES SHOWN

ABOVE. THE REQUIREMENTS FOR CLASSIFYING REVENUES IN THE FORM 990 DO NOT

Employer identification number 51-0166741

PERMIT CONTRIBUTIONS TO BE REPORTED ABOVE AS PROGRAM SERVICE REVENUE,

BUT INSTEAD THEY ARE REPORTED ELSEWHERE AS CONTRIBUTION REVENUE.

EXPENSES \$ 11,696. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

PROVIDE RESEARCH AND TRAINING SERVICES FOR A PILOT PROGRAM WITH PROJECT WORD THAT PROVIDES FREELANCE INVESTIGATIVE JOURNALISTS WITH REPORTING TOOLS AND RESOURCES INCLUDING THE HELP DESK RESOURCE AND THE VIRTUAL NEWSROOM IN-DEPTH RESEARCH ASSISTANCE INCLUDING LEGAL REVIEW, PROFESSIONAL TRAINING SESSIONS AND ACCESS TO EXPERIENCED FREELANCE EDITORS.

REVENUES SHOWN ABOVE DO NOT INCLUDE \$200,450 OF CONTRIBUTIONS THAT WERE RESTRICTED BY DONORS FOR USE IN FUNDING PROJECT WORD EXPENSES SHOWN ABOVE. THE REQUIREMENTS FOR CLASSIFYING REVENUES IN THE FORM 990 DO NOT PERMIT CONTRIBUTIONS TO BE REPORTED ABOVE AS PROGRAM SERVICE REVENUE, BUT INSTEAD THEY ARE REPORTED ELSEWHERE AS CONTRIBUTION REVENUE. EXPENSES \$ 86,355. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6:

CLASSES OF MEMBERSHIP. THE CORPORATION SHALL HAVE FIVE CLASSES OF MEMBERSHIP. THE CLASSES OF MEMBERSHIP SHALL BE ENTITLED "PROFESSIONAL", "ACADEMIC", "RETIRED", "ASSOCIATE" AND "STUDENT" RESPECTIVELY. PROFESSIONAL CLASS SHALL BE LIMITED TO PERSONS SUBSTANTIALLY ENGAGED IN REPORTING AND/OR EDITING. THE ACADEMIC CLASS SHALL BE LIMITED TO PERSONS ENGAGED FULL-TIME IN RESEARCH OR TEACHING IN THE FIELD OF JOURNALISM. THE RETIRED CLASS SHALL BE LIMITED TO PERSONS WHO FORMERLY BELONGED TO THE PROFESSIONAL AND OR ACADEMIC CLASS BUT HAVE RETIRED FROM THEIR OCCUPATION.

"ASSOCIATE" MEMBERSHIP WILL BE AVAILABLE TO FORMER PROFESSIONAL OR ACADEMIC 532212 09-02-15 Schedule O (Form 990 or 990-EZ) (2015)

 $\begin{array}{c} \text{Employer identification number} \\ 51-0166741 \end{array}$ 

MEMBERS WHO ARE NOT RETIRED, INDIVIDUALS ENGAGED PART-TIME IN REPORTING OR EDITING, PLUS INDIVIDUALS RECOGNIZED BY THE BOARD OF DIRECTORS FOR THEIR CONTRIBUTIONS TO THIS CORPORATION TO THE FIELD OF INVESTIGATIVE REPORTING AND EDITING. THE CORPORATION SHALL RECOGNIZE AS "STUDENT" MEMBERS THOSE COLLEGE STUDENTS PURSUING A DEGREE, WHO SUBSCRIBE TO THE CORPORATION, IN ORDER TO BE ENTITLED TO RECEIVE THE BENEFITS OF ITS EDUCATIONAL ACTIVITIES. NEITHER ASSOCIATE OR STUDENT MEMBERS SHALL BE ELIGIBLE FOR THE VOTING RIGHTS WHICH ARE RESERVED TO THE OTHER CLASSES OF MEMBERS. (AMENDMENT ADOPTED 6/7/08.)

EACH PROFESSIONAL, ACADEMIC OR RETIRED MEMBER OF THE CORPORATION WHO IS

PRESENT IN PERSON SHALL BE ENTITLED TO ONE (1) VOTE UPON EACH QUESTION

VOTED UPON AT ALL MEETINGS OF THE MEMBERS WITHOUT REGARD TO HIS OR HER

CLASS OF MEMBERSHIP.

FORM 990, PART VI, SECTION A, LINE 7A:

THE BOARD OF DIRECTORS IS ELECTED BY THE MEMBERSHIP. VACANCIES ON THE BOARD OF DIRECTORS SHALL OCCUR UPON THE DEATH, RESIGNATION, INCAPACITATION OR REMOVAL FOR STATED CAUSE BY TWO-THIRDS VOTE OF THE BOARD OF ANY MEMBER OF THE BOARD OF DIRECTORS, AND THE BOARD MAY FILL SUCH VACANCIES WITH THE NEXT QUALIFIED HIGHEST VOTE RECIPIENTS AMONG NOMINEES AT THE LAST PREVIOUS ELECTION, TO SERVE UNTIL THE NEXT MEETING OF THE MEMBERSHIP, WHICH SHALL THEN ELECT A PERSON TO FILL THE BALANCE OF THAT UNEXPIRED TERM.

FORM 990, PART VI, SECTION A, LINE 7B:

THE BOARD OF DIRECTORS IS ELECTED BY THE MEMBERSHIP. ANY CHANGES PROPOSED

TO THE ARTICLES OF INCORPORATION REQUIRE APPROVAL BY A TWO-THIRDS VOTE OF

THE MEMBERSHIP. THOSE ELIGIBLE TO VOTE IN SUCH CASES INCLUDE ALL MEMBERS

EXCEPT ASSOCIATE OR STUDENT MEMBERS.

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

FIRST THE FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR AND FINANCIAL

OFFICER. THEN A COPY OF THE FORM 990 IS E-MAILED TO ALL MEMBERS OF THE

EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS FOR REVIEW. IT IS REVIEWED

INDIVIDUALLY AND ANY QUESTIONS OR COMMENTS ARE DIRECTED TO THE EXECUTIVE

DIRECTOR.

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

IRE BOARD MEMBERS RECEIVE ANNUAL TRAINING ON THE POLICY AND MEMBERS OF THE BOARD'S EXECUTIVE COMMITTEE, ALONG WITH THE ORGANIZATION'S LEGAL COUNSEL, REVIEW ANY POTENTIAL ISSUES. ALL STAFF, BOARD MEMBERS, AND VOLUNTEERS ARE SUBJECT TO THE CONFLICT OF INTEREST POLICY. ALL CONFLICTS OF INTEREST ARE TO BE REPORTED TO THE FULL BOARD. THE PARTY WITH THE CONFLICT OF INTEREST IS PROHIBITED FROM PARTICIPATION IN ANY FINAL DISCUSSION OR ANY VOTE ON THE TRANSACTION OR ISSUE OF CONFLICT.

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS

ARE AVAILABLE TO THE PUBLIC ON THE ORGANIZATION'S WEBSITE AND UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE PROCESS FOR OVERSIGHT OF THE AUDIT AND SELECTION OF THE INDEPENDENT AUDITOR HAS NOT CHANGED FROM PRIOR YEARS.

FORM 990, PART I, LINE 19

ALL OF THE DIRECT EXPENSES FOR A PARTICULAR EVENT, SUCH AS A TRAINING

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SEMINAR, ARE REPORTED IN THE FISCAL YEAR IN WHICH THE EVENT IS HELD.

HOWEVER, BECAUSE CONTRIBUTIONS -- SUCH AS GRANTS THAT PAY FOR SUCH

TRAINING -- ARE RECOGNIZED WHEN RECEIVED, SOME MIGHT BE RECOGNIZED IN

THE FISCAL YEAR PRIOR TO WHEN THE EVENT IS HELD. IN IRE'S AUDITED

FINANCIAL STATEMENTS, SUCH CONTRIBUTIONS ARE PRESENTED AS TEMPORARILY

RESTRICTED IN ONE COLUMN WHEN RECEIVED AND THEN MATCHED WITH THE

EXPENSES IN A DIFFERENT COLUMN IN THE NEXT FISCAL YEAR WHEN THOSE

EXPENSES ARE RECOGNIZED. WITHOUT THE BENEFIT OF THE DISPLAY OF THE

SEPARATE COLUMNS, LINE 19 IN PART I OF THE 990, "REVENUE LESS EXPENSES"

WILL INCLUDE THE EXPENSES FOR THE EVENT IN THE CURRENT YEAR WHEREAS THE

CONTRIBUTED REVENUE WILL BE REPORTED IN THE RESPECTIVE LINE FOR THE

PRIOR YEAR. THEREFORE, A READER OF IRE'S FORM 990 CANNOT DRAW AN

ACCURATE CONCLUSION ABOUT THE SUCCESS OF IRE IN COVERING THE EXPENSES

OF ITS VARIOUS PROGRAMS AND EVENTS FOR A PARTICULAR FISCAL YEAR FROM

THE AMOUNT DISPLAYED AS "REVENUE LESS EXPENSES" ON LINE 19 OF PART I.

FORM 990, PART V, LINE 2A

PURSUANT TO AN AGREEMENT WITH THE UNIVERSITY OF MISSOURI, THE

UNIVERSITY EMPLOYS INDIVIDUALS FROM TIME TO TIME AS INVESTIGATIVE

REPORTERS & EDITORS, INC. (IRE) REQUESTS. THESE EMPLOYEES SHALL

PERFORM THE FUNCTIONS DUTIES AND OBLIGATIONS OF IRE. SUCH INDIVIDUALS

WILL BE DEEMED TO BE UNIVERSITY EMPLOYEES, SUBJECT TO ALL RULES AND

REGULATIONS OF THE UNIVERSITY AND ALL PERSONNEL POLICIES AND BENEFITS

PERTAINING TO UNIVERSITY EMPLOYEES.

FORM 990, PART VI, LINE 15A

THE CURRENT EXECUTIVE DIRECTOR'S COMPENSATION WAS DETERMINED BY A

COMMITTEE CREATED BY THE ORGANIZATION'S BOARD OF DIRECTORS. THE

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Name of the organization  INVESTIGATIVE REPORTERS & EDITORS, INC.	Employer identification number 51-0166741
COMMITTEE GATHERED COMPARABLE SALARY DATA TO USE IN MAKIN	
DECISION.	
FORM 990, PART VII	
COMPENSATION INFORMATION IN PART VII IS BASED ON THE PORT	ION OF
COMPENSATION PAID BY IRE PURSUANT TO AN AGREEMEENT WITH T	
OF MISSOURI AS DESCRIBED IN THE EXPLANATION RELATING TO F	
V, LINE 2A.	

528102 04-01-15						Asset No.
				1EQUIPMENT  * 990 PAGE 10 TOTAL  * MACHINERY & EQUIPM  * GRAND TOTAL 990  PAGE 10 DEPR	MACHINERY & EQUIPMENT	Description
				VARIESSL		Date Acquired
						Method
				.000		Life
(D) - /				16		Line No.
(D) - Asset disposed				120,367. 120,367. 120,367.		Unadjusted Cost Or Basis
						Bus % Excl
* ITO				0.		Reduction In Basis
Section 170 Salv				120,367. 120,367. 120,367.		Basis For Depreciation
				95,954. 95,954. 95,954.		Accumulated Depreciation
				0.		Current Sec 179
Section 179 Salvage Bonus Commercial Desitation Televation				0. 0.		Current Year Deduction