

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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.

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

2024

Open to Public Inspection

A For the **2024** calendar year, or tax year beginning **JUL 1, 2024** and ending **JUN 30, 2025**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization INVESTIGATIVE REPORTERS & EDITORS, INC.		D Employer identification number 51-0166741
	Doing business as		E Telephone number (573) 882-2042
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	109 LEE HILLS HALL, 221 S. 8TH STREET		G Gross receipts \$ 6,087,832.
	City or town, state or province, country, and ZIP or foreign postal code COLUMBIA, MO 65201		
F Name and address of principal officer: LAUREN GRANDESTAFF 109 LEE HILLS HALL, 221 S. 8TH STREET, COLUM		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
J Website: WWW.IRE.ORG		If "No," attach a list. See instructions	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1978 M State of legal domicile: MO	
H(c) Group exemption number			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: EDUCATE JOURNALISTS AND PROVIDE RESOURCES AND SUPPORT TO STRENGTHEN WATCHDOG REPORTING.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	5
	6 Total number of volunteers (estimate if necessary)	6	300
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	14,232.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	13,232.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	1,130,167.	1,483,350.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,336,538.	1,420,765.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	626,929.	712,018.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	155,666.	135,633.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,249,300.	3,751,766.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	240,381.	240,141.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	1,476,312.	1,426,026.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	169,606.	
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,381,704.	1,285,907.
19 Revenue less expenses. Subtract line 18 from line 12	3,098,397.	2,952,074.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	150,903.	799,692.
	21 Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	22 Net assets or fund balances. Subtract line 21 from line 20	8,923,338.	10,150,344.
		1,129,295.	1,742,964.
		7,794,043.	8,407,380.

Part II Signature Block

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

Sign Here	Signature of officer		Date		
	LAUREN GRANDESTAFF, INTERIM EXECUTIVE DIRECTOR				
Paid Preparer Use Only	Preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	RYAN HENRY		04/07/26		P01749573
Preparer Use Only	Firm's name	Firm's EIN		Phone no.	
	WILLIAMS-KEEPERS LLC	43-1126847		(573) 442-6171	
	Firm's address				
	2005 WEST BROADWAY SUITE 100				
	COLUMBIA, MO 65203				

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

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, 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? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 949,838. including grants of \$ 111,473.) (Revenue \$ 410,035.) NATIONAL INSTITUTE FOR COMPUTER-ASSISTED REPORTING OPERATES TO TRAIN AND EDUCATE THOSE IN THE JOURNALISM PROFESSION IN TECHNIQUES AND TECHNOLOGIES OF COMPUTER-ASSISTED REPORTING.

REVENUES SHOWN ABOVE DO NOT INCLUDE \$179,768 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.

4b (Code:) (Expenses \$ 875,296. including grants of \$ 128,668.) (Revenue \$ 645,648.) CONFERENCES TO EDUCATE AND INFORM MEMBERS ON ISSUES REGARDING INVESTIGATIVE REPORTING AND EDITING.

REVENUES SHOWN ABOVE DO NOT INCLUDE \$689,776 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.

4c (Code:) (Expenses \$ 176,200. including grants of \$) (Revenue \$ 279,912.) 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.

4d Other program services (Describe on Schedule O.) (Expenses \$ 158,888. including grants of \$) (Revenue \$ 200,760.)

4e Total program service expenses 2,160,222.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational reporting requirements, with 'X' marks in the Yes/No columns.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, tax-exempt bonds, and business transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee reporting, tax shelter transactions, and charitable contributions.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (13), 1b (13), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 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 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
HEATHER FELDMANN HENRY - (573) 884-7902
109 LEE HILLS HALL, 221 S. 8TH STREET, COLUMBIA, MO 65201

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DIANA FUENTES EXECUTIVE DIRECTOR	40.00			X				146,054.	0.	44,731.
(2) BRIAN ROSENTHAL CHAIR	1.00	X						0.	0.	0.
(3) JOSH HINKLE PRESIDENT	1.00	X		X				0.	0.	0.
(4) MARK GREENBLATT TREASURER	1.00	X		X				0.	0.	0.
(5) JODIE FLEISCHER BOARD MEMBER	1.00	X						0.	0.	0.
(6) CINDY GALLI BOARD MEMBER	1.00	X						0.	0.	0.
(7) KATE HOWARD VICE PRESIDENT	1.00	X		X				0.	0.	0.
(8) ANA LEY SECRETARY	1.00	X		X				0.	0.	0.
(9) ALEJANDRA CANCINO AT-LARGE	1.00	X						0.	0.	0.
(10) MARY HUDETZ BOARD MEMBER	1.00	X						0.	0.	0.
(11) ANDY LEHREN BOARD MEMBER	1.00	X						0.	0.	0.
(12) PAROMA SONI BOARD MEMBER	1.00	X						0.	0.	0.
(13) MARINA VILLENEUVE BOARD MEMBER	1.00	X						0.	0.	0.
(14) CARESSE JACKMAN BOARD MEMBER	1.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Subtotal							146,054.	0.	44,731.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							146,054.	0.	44,731.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	1,483,350.				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f			1,483,350.			
Program Service Revenue	2 a CONFERENCES/NICAR	Business Code					
		900099	1,053,776.	1,053,776.			
	b MEMBERSHIP DUES	900099	278,280.	278,280.			
	c DATA LIBRARY & WEB SERVICE	900099	45,220.	45,220.			
	d AWARDS CONTEST FEES	900099	43,020.	43,020.			
	e RESOURCE CENTER	900099	469.	469.			
	f All other program service revenue						
g Total. Add lines 2a-2f			1,420,765.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		321,291.			321,291.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		5,811.			5,811.	
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
				2,726,793.			
	b Less: cost or other basis and sales expenses	7b	2,336,066.				
	c Gain or (loss)	7c	390,727.				
	d Net gain or (loss)			390,727.		390,727.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a	11,684.					
b Less: cost of goods sold	10b	0.					
c Net income or (loss) from sales of inventory			11,684.	11,684.			
Miscellaneous Revenue	11 a SALES AND SERVICE	Business Code					
		900099	103,876.	103,876.			
	b ADVERTISING	541800	14,262.	30.	14,232.		
	c _____						
	d All other revenue						
e Total. Add lines 11a-11d			118,138.				
12 Total revenue. See instructions			3,751,766.	1,536,355.	14,232.	717,829.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 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 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	222,201.	222,201.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	17,940.	17,940.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	190,851.		143,138.	47,713.
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 Other salaries and wages	923,159.	714,817.	138,429.	69,913.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	312,016.	204,527.	65,531.	41,958.
10 Payroll taxes				
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	50,595.		50,595.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	18,390.		18,390.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	52,320.		52,320.	
12 Advertising and promotion				
13 Office expenses	63,399.	62,917.	482.	
14 Information technology	55,897.	22,747.	28,451.	4,699.
15 Royalties				
16 Occupancy	6,176.		6,176.	
17 Travel	138,217.	114,097.	21,895.	2,225.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	321,775.	321,775.		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,437.		6,437.	
23 Insurance	21,466.		21,466.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a UNRELATED BUSINESS INCO	415.		415.	
b BANQUETS	369,903.	369,903.		
c OTHER/MISCELLANEOUS	81,563.	78,666.	356.	2,541.
d BAD DEBTS	57,256.		57,256.	
e All other expenses	42,098.	30,632.	10,909.	557.
25 Total functional expenses. Add lines 1 through 24e	2,952,074.	2,160,222.	622,246.	169,606.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,089,822.	1	1,556,844.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	175,000.	3	200,000.
	4 Accounts receivable, net	132,545.	4	278,804.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	6,956.	8	12,472.
	9 Prepaid expenses and deferred charges	24,528.	9	115,246.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 35,859.		
	b Less: accumulated depreciation	10b 23,467.		
	11 Investments - publicly traded securities	15,047.	10c	12,392.
	12 Investments - other securities. See Part IV, line 11	7,479,440.	11	7,974,586.
	13 Investments - program-related. See Part IV, line 11		12	
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11		14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	8,923,338.	15		
		16	10,150,344.	
Liabilities	17 Accounts payable and accrued expenses	529,045.	17	733,038.
	18 Grants payable		18	
	19 Deferred revenue	8,550.	19	233,063.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	591,700.	25	776,863.
	26 Total liabilities. Add lines 17 through 25	1,129,295.	26	1,742,964.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	1,116,612.	27	779,898.
	28 Net assets with donor restrictions	6,677,431.	28	7,627,482.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	7,794,043.	32	8,407,380.
	33 Total liabilities and net assets/fund balances	8,923,338.	33	10,150,344.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,751,766.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,952,074.
3	Revenue less expenses. Subtract line 2 from line 1	3	799,692.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,794,043.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-186,355.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	8,407,380.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		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:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	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?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1080527.	1516558.	1177304.	1132167.	1483380.	6389936.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge	12,000.	12,000.	12,000.	12,000.	12,000.	60,000.
4 Total. Add lines 1 through 3	1092527.	1528558.	1189304.	1144167.	1495380.	6449936.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1579957.
6 Public support. Subtract line 5 from line 4.						4869979.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	1092527.	1528558.	1189304.	1144167.	1495380.	6449936.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	202,862.	170,069.	230,275.	269,688.	327,102.	1199996.
9 Net income from unrelated business activities, whether or not the business is regularly carried on				3,100.	14,232.	17,332.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						7667264.
12 Gross receipts from related activities, etc. (see instructions)					12	7,355,689.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	63.52	%
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	58.46	%
16a 33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Contains questions 11a, 11b, 11c regarding gifts and controlled entities.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Contains questions 1 and 2 regarding governing body powers and benefit of supported organizations.

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Contains question 1 regarding directors/trustees of supported organizations.

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Contains questions 1, 2, 3 regarding support provided, relationships, and significant voice.

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Contains questions 1, 2a, 2b, 3a, 3b regarding the Integral Part Test and activities.

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

Schedule A (Form 990) 2024

Part VI

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

Lined area for supplemental information.

Schedule A

**Identification of Excess Contributions
Included on Part II, Line 5**

2024

**** Do Not File ****

***** Not Open to Public Inspection *****

Contributor's Name	Total Contributions	Excess Contributions
ARNOLD FOUNDATION (PF)	775,000.	621,655.
GOOGLE, INC	180,000.	26,655.
JOHN S AND JAMES L KNIGHT FOUNDATION (PF)	193,000.	39,655.
JONATHAN LOGAN FAMILY	170,000.	16,655.
LUMINA FOUNDATION (PF)	245,000.	91,655.
PARK FOUNDATION (PF)	330,000.	176,655.
THE KOHLBERG FOUNDATION (PF)	650,000.	496,655.
RICK GEVERS AND ASSOCIATES	160,407.	7,062.
T. KOCH	200,000.	46,655.
INASMUCH FOUNDATION (PF)	210,000.	56,655.

Total Excess Contributions to Schedule A, Part II, Line 5 **1,579,957.**

**Schedule B
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

Employer identification number

INVESTIGATIVE REPORTERS & EDITORS, INC.

51-0166741

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (Rev. 12-2024)

Name of organization INVESTIGATIVE REPORTERS & EDITORS, INC.	Employer identification number 51-0166741
--------------------------------------------------------------------------------	---------------------------------------------------------

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<u>BLOOMBERG NEWS</u> <u>731 LEXINGTON AVE</u> <u>NEW YORK, NY 10022</u>	\$ <u>60,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<u>JOHN S AND JAMES L KNIGHT FOUNDATION</u> <u>WACHOVIA FINANCIAL CTR, 200 S BISCAYNE</u> <u>BLVD</u> <u>MIAMI, FL 33134</u>	\$ <u>33,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<u>GOOGLE</u> <u>1600 AMPHITHEATRE PKWY</u> <u>MOUNTAIN VIEW, CA 94043</u>	\$ <u>50,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<u>PARK FOUNDATION</u> <u>140 SENECA WAY SUITE 100</u> <u>ITHACA, NY 14850</u>	\$ <u>70,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<u>ARNOLD FOUNDATION</u> <u>1717 WEST LOOP SOUTH SUITE 1800</u> <u>HOUSTON, TX 77027-3048</u>	\$ <u>400,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<u>LUMINA FOUNDATION</u> <u>30 S MERIDIAN ST, SUITE 700</u> <u>INDIANAPOLIS, IN 46204</u>	\$ <u>35,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization INVESTIGATIVE REPORTERS & EDITORS, INC.	Employer identification number 51-0166741
--------------------------------------------------------------------------------	---------------------------------------------------------

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	KISCO FOUNDATION 84 BUSINESS PARK DR STE 304 ARMONK, NY 10504	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	NBC UNIVERSAL 30 ROCKEFELLER PLAZA NEW YORK, NY 10112	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	NEW YORK TIMES 620 EIGHTH AVE NEW YORK, NY 10018	\$ 55,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	PAUL SAGAN 20 UNIVERSITY ROAD, 4TH FLOOR CAMBRIDGE, MA 02138	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization INVESTIGATIVE REPORTERS & EDITORS, INC.	Employer identification number 51-0166741
--------------------------------------------------------------------------------	---------------------------------------------------------

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization INVESTIGATIVE REPORTERS & EDITORS, INC.	Employer identification number 51-0166741
--------------------------------------------------------------------------------	---------------------------------------------------------

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

INVESTIGATIVE REPORTERS & EDITORS, INC.

Employer identification number

51-0166741

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year _____

4 Number of states where property subject to conservation easement is located _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

Schedule D (Form 990) (Rev. 12-2024)

LHA 432051 01-02-25

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a** Public exhibition **d** Loan or exchange program
- b** Scholarly research **e** Other _____
- c** Preservation for future generations
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|----------------------------------------|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	6,023,584.	5,241,652.	4,865,986.	5,099,166.	4,349,835.
b Contributions	80,701.	326,158.	311,794.	120,250.	247,373.
c Net investment earnings, gains, and losses	607,634.	550,294.	276,497.	-55,179.	570,853.
d Grants or scholarships					
e Other expenditures for facilities and programs	278,701.	94,520.			
f Administrative expenses			212,625.	298,251.	68,895.
g End of year balance	6,433,218.	6,023,584.	5,241,652.	4,865,986.	5,099,166.

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment 4.7250 %
- b** Permanent endowment 75.1170 %
- c** Term endowment 20.1580 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---------------------------------------------------------------------------------------------------|-----|----------|
| (i) Unrelated organizations? | | X |
| (ii) Related organizations? | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		35,859.	23,467.	12,392.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				12,392.

Part VII Investments - Other Securities

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, line 12, col. (B))		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(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, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) FUNDS ADMINISTERED AS FISCAL AGENT	776,863.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	776,863.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	3,763,766.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a		
	b Donated services and use of facilities	2b	12,000.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d		2e	12,000.
3	Subtract line 2e from line 1		3	3,751,766.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	3,751,766.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	2,964,074.
2	Amounts included on line 1 but not on Form 990, 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		
	e Add lines 2a through 2d		2e	12,000.
3	Subtract line 2e from line 1		3	2,952,074.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	2,952,074.

Part XIII Supplemental Information

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

PART V, LINE 4:

THE PURPOSES OF ENDOWMENT FUNDS ARE: RESOURCE CENTER, FUND FELLOWSHIPS, INVESTIGATIVE REPORTING TRAINING, AND GENERAL SUPPORT OF IRE OPERATIONS.

PART V, COLUMN C, LINE 1A

THE BEGINNING ENDOWMENT FUND BALANCE OF FISCAL YEAR ENDED 6/30/19 HAS BEEN ADJUSTED. THE OPENING BALANCE CHANGED DUE TO CHANGES IN FUNDS DISCOVERED DURING AN AUDIT OF THE FINANCIAL STATEMENTS.

SCH D, PART V, LINE 5

THE AMOUNT REPORTED ON LINE 6 AS ADMINISTRATIVE EXPENSES HAVE BEEN CHANGED TO LINE 5 TO MORE ACCURATELY REPRESENT THE EXPENDITURE. THE AMOUNT OF THE DRAWS FROM ENDOWMENT FUNDS WERE REPORTED AS ADMINISTRATIVE EXPENSES IN PRIOR YEARS. HOWEVER, THESE ACTUALLY REPRESENT DRAWS FROM THE ENDOWMENT THAT ARE USED FOR PROGRAMS, AND THEREFORE THEY SHOULD BE REPORTED AS OTHER EXPENDITURES FOR FACILITIES AND PROGRAMS.

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
DIVERSITY FELLOWSHIPS	SOUTH ASIA	1	0.	NA	274.	REGISTRATION AND MEMBERSHIP	FMV
DIVERSITY FELLOWSHIPS	SUB-SAHARAN AFRICA	1	0.	NA	274.	REGISTRATION AND MEMBERSHIP	FMV
DIVERSITY FELLOWSHIPS	SUB-SAHARAN AFRICA	1	0.	NA	274.	REGISTRATION AND MEMBERSHIP	FMV
DIVERSITY FELLOWSHIPS	EAST ASIA AND THE PACIFIC	1	0.	NA	224.	REGISTRATION AND MEMBERSHIP	FMV
DIVERSITY FELLOWSHIPS	SOUTH AMERICA	1	500.	CHECK	1,387.	REGISTRATION, MEMBERSHIP & LODGING	FMV
JENNIFER LEONARD FELLOWSHIP	SUB-SAHARAN AFRICA	2	0.	NA	299.	REGISTRATION AND MEMBERSHIP	FMV
JENNIFER LEONARD FELLOWSHIP	SOUTH ASIA	1	0.	NA	224.	REGISTRATION AND MEMBERSHIP	FMV
JENNIFER LEONARD FELLOWSHIP	CENTRAL AMERICA AND THE CARIBBEAN	1	0.	NA	224.	REGISTRATION AND MEMBERSHIP	FMV
JENNIFER LEONARD FELLOWSHIP	NORTH AMERICA	1	0.	NA	199.	REGISTRATION AND MEMBERSHIP	FMV

Schedule F (Form 990) (Rev. 12-2024)

Part III Continuation of Grants and Other Assistance to Individuals Outside the United States. (Schedule F (Form 990), Part III)

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
IRE FELLOWSHIPS	SUB-SAHARAN AFRICA	3	0.	NA	623.	REGISTRATION, MEMBERSHIP	FMV
IRE FELLOWSHIPS	SOUTH ASIA	9	0.	NA	2,217.	REGISTRATION, MEMBERSHIP	FMV
IRE FELLOWSHIPS	NORTH AMERICA	2	500.	CHECK	1,661.	REGISTRATION, MEMBERSHIP & LODGING	FMV
IRE FELLOWSHIPS	EAST ASIA AND THE PACIFIC	3	0.	NA	822.	REGISTRATION, MEMBERSHIP	FMV
IRE FELLOWSHIPS	SOUTH AMERICA	1	500.	CHECK	1,386.	REGISTRATION, MEMBERSHIP & LODGING	FMV
IRE FELLOWSHIPS	SUB-SAHARAN AFRICA	2	0.	NA	349.	REGISTRATION, MEMBERSHIP	FMV
IRE FELLOWSHIPS	SUB-SAHARAN AFRICA	1	0.	NA	274.	REGISTRATION, MEMBERSHIP	FMV
IRE FELLOWSHIPS	SUB-SAHARAN AFRICA	1	0.	NA	274.	REGISTRATION, MEMBERSHIP	FMV
IRE FELLOWSHIPS	MIDDLE EAST AND NORTH AFRICA	1	0.	NA	274.	REGISTRATION, MEMBERSHIP	FMV

Part III Continuation of Grants and Other Assistance to Individuals Outside the United States. (Schedule F (Form 990), Part III)

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
IRE FELLOWSHIPS	EAST ASIA AND THE PACIFIC	1	0.	NA	274.	REGISTRATION, MEMBERSHIP	FMV
IRE FELLOWSHIPS	MIDDLE EAST AND NORTH AFRICA	1	0.	NA	274.	REGISTRATION, MEMBERSHIP	FMV
IRE FELLOWSHIPS	EUROPE (INCLUDING ICELAND & GREENLAND)	1	0.	NA	75.	REGISTRATION, MEMBERSHIP	FMV
IRE FELLOWSHIPS	SUB-SAHARAN AFRICA	4	0.	NA	1,096.	REGISTRATION, MEMBERSHIP	FMV
IRE FELLOWSHIPS	SOUTH ASIA	5	0.	NA	1,270.	REGISTRATION, MEMBERSHIP	FMV
IRE FELLOWSHIPS	EAST ASIA AND THE PACIFIC	1	0.	NA	274.	REGISTRATION, MEMBERSHIP	FMV
IRE FELLOWSHIPS	SUB-SAHARAN AFRICA	4	0.	NA	1,096.	REGISTRATION, MEMBERSHIP	FMV
IRE FELLOWSHIPS	CENTRAL AMERICA AND THE CARIBBEAN	1	0.	NA	274.	REGISTRATION, MEMBERSHIP	FMV
IRE FELLOWSHIPS	EUROPE (INCLUDING ICELAND & GREENLAND)	2	0.	NA	548.	REGISTRATION, MEMBERSHIP	FMV

Part IV Foreign Forms

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

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) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
JAMES RICHARD BENNETT SCHOLARSHIP	2	1,000.	2,153.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
DAVID DIETZ FELLOWSHIP	5	1,000.	3,480.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
DIVERSITY FELLOWSHIP	29	11,500.	31,797.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
JEFF GERMAN FELLOWSHIP	1	500.	1,391.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
SANDRA THOMAS SCHOLARSHIP	2	1,000.	2,783.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

APPLICANTS APPLY FOR FELLOWSHIPS ONLINE. THE EXECUTIVE DIRECTOR AND MEMBERSHIP COORDINATOR REVIEW THE APPLICATIONS AND MAKE THE SELECTION BASED ON CONTENT OF WORK EXAMPLES SUBMITTED, DEGREE OF DIFFICULTY AND TIME INVOLVED WITH SUBMISSION, REFERENCES, AND COVER LETTER AND CAREER GOALS. THE GRANT FUNDS ARE HELD IN AN OPPENHEIMER INVESTMENT ACCOUNT AND INTEREST IS APPLIED MONTHLY. THE EXECUTIVE DIRECTOR AND FINANCIAL OFFICER MEET MONTHLY TO DISCUSS AVAILABILITY AND USE OF FUNDS.

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
GARY MARX FELLOWSHIP	12.	4,600.	10,468.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
IRE FELLOWSHIPS	37.	12,100.	27,892.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
JOURNALIST OF COLOR FELLOWSHIP	3.	4,000.	6,821.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
JENNIFER LEONARD SCHOLARSHIP	2.	1,000.	2,453.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
NAPOLI MANAGEMENT GROUP TV SCHOLARSHIP	3.	1,500.	3,939.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
NICHOLAS OTTAWAY DIVERSITY FELLOWSHIP	7.	7,000.	8,822.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
ERIC SAGAR SCHOLARSHIP	30.	7,500.	23,414.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
GODFREY WELLS STANCILL FELLOWSHIP	4.	500.	2,113.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
PROPUBLICA FELLOWSHIPS	3.	1,500.	3,849.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING

Schedule I (Form 990)

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
WHISENHUNT STEPHEN FELLOWSHIP	1.	750.	625.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
R-CAR FELLOWSHIPS	1.	500.	625.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
AMERICAN INDIAN FELLOWSHIP	1.	500.	1,146.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
APPLES & ORANGES FELLOWSHIP	3.	1,500.	4,174.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING
GEVERS-BURNS FELLOWSHIPS	93.	23,450.	2,855.	FMV	MEMBERSHIP, REGISTRATION, AND LODGING

**SCHEDULE J
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

INVESTIGATIVE REPORTERS & EDITORS, INC.

Employer identification number

51-0166741

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--------------------------------------------------------------------|----------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) (Rev. 12-2024)

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DIANA FUENTES EXECUTIVE DIRECTOR	(i)	146,054.	0.	0.	0.	44,731.	190,785.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

INVESTIGATIVE REPORTERS & EDITORS, INC.

Employer identification number

51-0166741

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 4D, OTHER PROGRAM SERVICES:

CREATE AND ACCUMULATE REFERENCE DATA AND ASSOCIATED SERVICES BY MEMBERS
IN INVESTIGATIVE JOURNALISM.

EXPENSES \$ 37,466. INCLUDING GRANTS OF \$ 0. REVENUE \$ 6,291.

WEB SERVICES: FUNDING OPERATION OF THE WEBSITE, INCLUDING RESOURCES,
WORKSHOPS, CONFERENCES, JOB ADS, AND OTHER ONLINE CONTENT.

REVENUES SHOWN ABOVE DO NOT INCLUDE \$2,000 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.

EXPENSES \$ 101,186. INCLUDING GRANTS OF \$ 0. REVENUE \$ 44,301.

AWARDS

EXPENSES \$ 16,623. INCLUDING GRANTS OF \$ 0. REVENUE \$ 43,020.

NET SALES OF PROGRAM RELATED ITEMS

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 107,148.

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.

EXPENSES \$ 3,613. 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. THE
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
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.)

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

Schedule O (Form 990) (Rev. 12-2024)

LHA 432211 01-15-25

Name of the organization	INVESTIGATIVE REPORTERS & EDITORS, INC.	Employer identification number	51-0166741
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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.

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

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 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"

Name of the organization INVESTIGATIVE REPORTERS & EDITORS, INC.	Employer identification number 51-0166741
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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 COMMITTEE GATHERED COMPARABLE SALARY DATA TO USE IN MAKING THEIR DECISION.

FORM 990, PART VII

COMPENSATION INFORMATION IN PART VII IS BASED ON THE PORTION OF COMPENSATION PAID BY IRE PURSUANT TO AN AGREEMENT WITH THE UNIVERSITY OF MISSOURI AS DESCRIBED IN THE EXPLANATION RELATING TO FORM 990, PART V, LINE 2A.