PUBLIC DISCLOSURE COPY

Form **990**

Department of the Treasury Internal Revenue Service

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.

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

2022
Open to Public Inspection

Form 990 (2022)

AF	or me	2022 calendar year, or tax year beginning and c	ending					
B c	heck if	C Name of organization		D Employer identific	ation number			
	Address change Name			44 040677	0.4			
	change	Doing business as	Room/suite	41-21067				
H	return Final return/	Number and street (or P.O. box if mail is not delivered to street address) P.O. BOX 60238	E Telephone number 202-265-1					
	dreturn/ termin- ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	10,157,505.				
	Amend			H(a) Is this a group re				
-	Application				? Yes X No			
	pending	SAME AS C ABOVE		H(b) Are all subordinates in				
		mpt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) (or 527		list. See instructions			
_	Vebsite		01 1 321	H(c) Group exemption				
		organization: X Corporation Trust Association Other	I Voor		State of legal domicile: DC			
Pa		Summary	IL Teal	or formadon, 2005 N	N State of legal domining. DC			
-		Briefly describe the organization's mission or most significant activities:	SCHEDU	T.R O				
90	١, ,	orieny describe the organization a mission of most agrinoant activities.	00111110					
Activities & Governance	2	Check this box if the organization discontinued its operations or dispos	ed of more	than 25% of its net ass	sets.			
90	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	9			
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			. 8			
40		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			39			
ij		Total number of volunteers (estimate if necessary)			7009			
cţ.		Total unrelated business revenue from Part VIII, column (C), line 12			0.			
4		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.			
				Prior Year	Current Year			
•	8	Contributions and grants (Part VIII, line 1h)		2,962,133.	10,063,720.			
ž	9	Program service revenue (Part VIII, line 2g)		93,970.	59,223.			
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		8,441.	34,530.			
č		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	32.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,064,544.	10,157,505.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		310,600.	301,500.			
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
63	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,268,349.	3,816,440.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		86,400.	0.			
9	b	Total fundraising expenses (Part IX, column (D), line 25) 499,1	88.					
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		896,766.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,562,115.	5,255,618.			
	19	Revenue less expenses. Subtract line 18 from line 12		-1,497,571.	4,901,887.			
5	4		B	eginning of Gurrent Year	End of Year			
sets	20	Total assets (Part X, line 16)	[5,225,748.	10,689,315.			
ASS	21	Total liabilities (Part X, line 26)		501,020.				
Net Assets	22	Net assets or fund balances. Subtract line 21 from line 20		4,724,728.	9,626,615.			
P	art II	Signature Block						
		lties of perjury, I declare that I have examined this return, including accompanying schedule			y knowledge and belief, it is			
true	, correc	t, and complete. Declaration of preparet (other than officer) is based on all information of w	hich prepare	r has any knowledge.				
				5/1	12023			
Sig	ın	Signature of officer		Date				
He	re	KIMBERLY LONGEY, CHIEF OPERATING OFFICER						
-		Type or print name and title						
Print/Type preparer's name Preparer's signature Date Check PTIN								
Pai	d	KRISTIN A. JACQUELIN, CPA Mill & Sugardian, CPA		04/25/23 self-emplo				
Pre	parer	Firm's name CALIBRE CPA GROUP, PLLC			17-0900880			
Use	Only	Firm's address 7501 WISCONSIN AVENUE, SUITE 120	0 WEST					
***************************************		BETHESDA, MD 20814		Phone no. 20	2-331-9880			
Ma	y the I	RS discuss this return with the preparer shown above? See instructions			X Yes No			

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2022) FREE PRESS	41-2106721	Page 2
Pa	rt 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: SEE SCHEDULE O		
2	Did the organization undertake any significant program services during the year which were not listed on the		
2	prior Form 990 or 990-EZ?	Ves	X No
	If "Yes," describe these new services on Schedule O.	163	140
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		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	s, the total expenses, an	ıd
4a	revenue, if any, for each program service reported. (Code:) (Expenses \$1, 208, 917. including grants of \$ 1,000.) (Reven		250.)
74	(Code:) (Expenses \$1, 208, 917. including grants of \$1, 000.) (Reven		<u> </u>
	DIGITAL DIVIDE AND BRINGING AFFORDABLE BROADBAND SERVICE		OF
	PEOPLE LACKING SUCH SERVICE. PROMOTED AWARENESS OF THE A		
	CONNECTIVITY PROGRAM TO HELP LOWER INCOME PEOPLE AFFORD	PHONE AND	
	INTERNET ACCESS DURING THE PANDEMIC. URGED PASSAGE OF A	CONGRESSIONAL	
	RESOLUTION THAT DECLARES THAT ACCESS TO BROADBAND, WATER		
	HEATING AND COOLING ARE HUMAN RIGHTS. PUBLISHED RESEARCH)
	BILLIONS OF DOLLARS OF WASTE IN THE RURAL DIGITAL OPPORT		
	WORKED ON THE CREATION OF A BROADBAND-NUTRITION LABEL TO		<u>.e</u>
	ABOUT THE COST AND BASIC TERMS OF THEIR INTERNET-SERVICE		
	URGED THE FCC TO MAKE THE LABEL CLEAR AND VISIBLE TO CUS MONTHLY BILLS. PROVIDED PUBLIC TESTIMONY, ANALYSIS AND F		
46			500.)
4b	(Code:) (Expenses \$ 1,295,417. including grants of \$) (Revented by the companies of \$		<u> </u>
	DISINFORMATION AND CONSPIRACY THEORIES ONLINE WHILE PRES		<u>M</u>
	OF SPEECH AND PROTECTING MARGINALIZED COMMUNITIES WHEN T		
	CALLED ON TECH COMPANIES TO INSTITUTE ELECTION-INTEGRITY		
	ENFORCE THEIR RULES EQUALLY REGARDLESS OF A SPEAKER'S SO		
	POLITICAL STATUS; ENFORCE RULES EQUALLY ACROSS ALL LANGUE	AGES; AND BE	
	FAR MORE TRANSPARENT ABOUT THEIR CONTENT-MODERATION POLICE		
	SOCIAL-MEDIA PLATFORMS TO INVEST SIGNIFICANT RESOURCES I		
	ONLINE HATE AND DISINFORMATION IN LANGUAGES OTHER THAN E		
	PUBLISHED NUMEROUS REPORTS, BLOG POSTS, SOCIAL MEDIA POST		
	RELEASES SHOWCASING HOW SOCIAL MEDIA COMPANY SERVICES ARE	E USED TO STO)KE
4-	HATE AND REAL-WORLD VIOLENCE TARGETING BLACK AND BROWN P. (Code:) (Expenses \$2,053,866. including grants of \$300,500.) (Revenue)		
4c	(Code:) (Expenses \$2, U53, 866. including grants of \$300, 500.) (Revenue FUTURE OF JOURNALISM: THROUGH THE MEDIA2070 PROJECT, DOCTOR		700.
	CENTURIES OF HARM THE U.S. MEDIA SYSTEM HAS INFLICTED ON		
	COMMUNITY. EXAMINED HOW HISTORIC AND CONTEMPORARY RACIAL		ON
	IN ALL MEDIA AND GOVERNMENT POLICIES HAVE EXCLUDED BLACK		
	OTHER COMMUNITIES OF COLOR FROM CONTROLLING THE NATION'S		
	COMMUNICATIONS INFRASTRUCTURE. WORKED WITH A GROWING CON	SORTIUM OF	
	MEDIA-MAKERS, SCHOLARS AND ACTIVISTS TO BUILD SUPPORT FOR		OR
	REPARATIONS. SUPPORTED CREATION OF "BLACK IN THE NEWS RO		
	AWARD-WINNING DOCUMENTARY FILM FEATURED IN SEVERAL FESTI		
	AND PRIVATE SCREENINGS ACROSS THE U.S. THROUGH THE NEWS		<u> CT</u>
	PROMOTED AWARENESS OF HOW THE LOCAL-NEWS CRISIS HAS LEFT		
4.3	ACROSS THE COUNTRY WITH LITTLE-TO-NO REPORTING ON LOCAL (JUVEKNMENT,	
40	Other program services (Describe on Schedule O.)	28,773.)	
<u>4e</u>	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 4,558,200.	20,113.)	
	- 1 - 2 - 1 m - 2	Form 9!	90 (2022)

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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0	-	8		×
•	Schedule D, Part III	ٿ		
9				
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			₹.
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	*P\$061	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X,			
	as applicable.			14 J& E
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
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	11b		X
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	11c		X
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	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	militia de la companya del companya del companya de la companya de	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	<u>. </u>		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
4-7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	- ''		
17		4.7		х
46	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	\vdash	 ^
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	4.		_~
	1c and 8a? If "Yes," complete Schedule G, Part II	18	\vdash	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	l		-
	complete Schedule G, Part III	19	\vdash	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<u> </u>	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u> </u>	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	X	<u></u>
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Part IV Checklist of Required Schedules (cor	tinued)
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			Yes	No				
22	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	22		X				
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current							
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		х	l				
24 a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23						
	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							
	any tax-exempt bonds?	24c						
	Did the organization act as an "on behalf 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	l		77				
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>				
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			ı				
	Schedule L, Part I	25b		х				
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or 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? If "Yes," complete Schedule L, Part II	26		<u>X</u>				
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			7				
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled							
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	0807 81 81 8	<u>X</u>				
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,							
9	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If		[847] Janii	W.				
•	"Yes," complete Schedule L, Part IV	28a		x				
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X				
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If							
	"Yes," complete Schedule L, Part IV	28c		X				
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х					
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation							
	contributions? /f "Yes," complete Schedule M	30		<u>X</u>				
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X				
32	Schedule N, Part II]	l	x				
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32						
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X				
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and							
	Part V, line 1	34	Х					
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X				
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity							
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b						
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	_						
37	If "Yes," complete Schedule R, Part V, line 2	36	X					
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	İ	x				
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	 						
	Note: All Form 990 filers are required to complete Schedule O	38	х					
Par								
	Check if Schedule O contains a response or note to any line in this Part V							
_	Fitting	8.8789	Yes	<u>No</u>				
1a h	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1a 12 1b 0							
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable							
·	(gambling) winnings to prize winners?	1c	X	8375				
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Pai	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 39			100
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	i	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		1	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	 4a		x
h	If "Yes," enter the name of the foreign country			
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a		5a		х
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	1	X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	5c		
0a		_ ا		x
1	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	<u>6a</u>		
D		۱		
_	were not tax deductible?	6b	- 7. A.A.	Leading or
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 services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			Í
	to file Form 8282?	7с	Tr. 81 (1977)	X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	SAZ		
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a		12a	t vermiller	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		32.3	51.67
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note: See the instructions for additional information the organization must report on Schedule O.	27	750 P.	\$500 P.C
h	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			
_	Enter the amount of reserves on hand			
		44-	SKT FALL	x
14a		14a	-	
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	<u> </u>	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	١		7.7
	excess parachute payment(s) during the year?	15	\$3500 PM	X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	102504 BA	X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		<u></u>

232005 12-13-22

If "Yes," complete Form 6069.

FREE PRESS Form 990 (2022) 41-2106721 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent 8 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Яa Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe on Schedule O how this was done 12c Did the organization have a written whistleblower policy? X 13 13 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? <u>16a</u> b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O 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. Indicate how you made these available. Check all that apply, X Upon request Other (explain on Schedule O) Another's website 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.

Form 990 (2022)

State the name, address, and telephone number of the person who possesses the organization's books and records

KIMBERLY LONGEY - 202-265-1490

1025 CONNECTICUT AVE NW, WASHINGTON,

20036

Form 990 (2022) FREE PRESS 41-2106721 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 the instructions for definition of "key employees."
- 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.

(A)	(B)			_ ((C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	ition more	l than c	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	son i	s both	an	compensation	compensation	amount of other
	week	_	<u> </u>			17003		from	from related	
	(list any	Jirect				_		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	98 Or (stee			nsated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Individual trustee or director	Institutional trustee)yee	Highest compensated employee		1099-NEC)		and related
	below	ignal	賣	18.	ldma	est co	Former			organizations
	line)	횰	l is	Officer	Key	High	Forr			
(1) MATTHEW WOOD	34.00				İ					
VP OF POLICY AND GENERAL C	6.00	_	<u> </u>			Х		130,458.	23,022.	28,484
(2) CRAIG AARON	36.00									
PRESIDENT, CO-CEO	4.00	X		X				135,805.	15,089.	28,484
(3) MISTY PEREZ TRUEDSON	38.00	ļ						405 000	E 450	
CHIEF OF STAFF	2.00	H	_			X		135,908.	7,153.	28,037
(4) JESSICA GONZALEZ	36.00	l		77				144 706	16 000	0 010
CO-CEO (5) KIMBERLY LONGEY	4.00 34.00	ļ		X	_	Н		144,796.	16,088.	8,919
(5) KIMBERLY LONGEY COO. ASST TREASURER/SECRET	6.00	ł		x				125 722	23,953.	0 041
(6) S. DEREK TURNER	40.00	_	-	_	_	Н		135,733.	43,955.	8,941
RESEARCH DIRECTOR	40.00	ł				x		123,385.	0.	14,709
(7) COLLETTE BLAKENY WATSON	40.00					A		123,303.	0.	14,703
VP OF CULTURAL STRATEGIES	1000	1				x		130,381.	0.	6,802
(8) NORA BENAVIDEZ	38.00					_				0,002
DIRECTOR, SENIOR COUNSEL	2.00					x		114,488.	6,026.	10,410
(9) VICTOR PICKARD	1.00							•		
DIRECTOR, CHAIR	1.00	Х		X				0.	0.	0
(10) BRYAN MERCER	1.00								· · · · ·	
DIRECTOR, TREASURER (THROUGH 12/16/2	1.00	X		X				0.	0.	0
(11) OLGA DAVIDSON	1.00									
DIRECTOR, SECRETARY	1.00	X		X				0.	0.	0
(12) D. BENJAMIN SCOTT	1.00									
DIRECTOR	1.00	X	<u> </u>	Щ				0.	0.	0
(13) ASHLEY ALLISON	1.00									
DIRECTOR	1.00	X						0.	0.	0
(14) JOAN DONOVAN	1.00							_	_	
DIRECTOR	1.00	X						0.	0.	0
(15) MARTHA FUENTES-BAUTISTA	1.00									_
DIRECTOR	1.00	X	<u> </u>	_				0.	0.	0
(16) VANESSA CARDENAS	1.00	.,								
DIRECTOR	1.00	X	_					0.	0.	0
(17) BRANDI COLLINS DEXTER	0.00	٦,						,		_
DIRECTOR, TREASURER (EFF. 12/17/22)	l	X	L	X				0.	0.	Form 990 (202

232007 12-13-22

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization Form 990 (2022)

09220426 712177 71447

			Check if Schedule O conta	ins a respons	e or note to any lin	e in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
र र	1	а	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		b	Membership dues	1b	*				
2,5		С	Fundraising events	1c					
ifts ar /		d	Related organizations						
s, Biji		е	Government grants (contribution						* +
Sign			All other contributions, gifts, grants		***		4		•
but			similar amounts not included abov	e 1f	10,063,720.				
ĒĠ		g	Noncash contributions included in lines 1:	a-1f 1g \$	160,979.				
<u>0</u> <u>0</u>		h	Total. Add lines 1a-1f			10,063,720.			
					Business Code				Tage
g l	2	а	FEE FOR SERVICE		900099	33,423.	33,423.		
ار ار		b	HONORARIA		900099	25,800.	25,800.		
Program Service Revenue		С							
e a		d							
Ped		е							
<u>r</u>		f	All other program service rever	nue			_		
		g	Total. Add lines 2a-2f			59,223.			
	3		Investment income (including of	lividends, inte	rest, and				
			other similar amounts)		•••••••••••••••••••••••••••••••••••••••	34,530.			34,530.
	4		Income from investment of tax-	exempt bond	proceeds				
	5		Royalties			32.			32.
				(i) Real	(ii) Personal				
	6	а	Gross rents6a						
		b	Less: rental expenses 6b						
		C	Rental income or (loss) 6c			34.5	K. S. Carlotte and C. Carlotte	A PERSON STREET	
		d	Net rental income or (loss)						-
	7	а	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory 7a						
		b	Less: cost or other basis				turn turning		
- je			and sales expenses						
ē		С	Gain or (loss)7c			K-5-5580 2540 + 685 - 5		A Commence of the Commence of	
Other Revenue			Net gain or (loss)		·····		6 2/0 aswer 17 14/40 14/50 14/50		Since Francisco Company of the Compa
Ē	8	а	Gross income from fundraising eve	`					
ō			including \$	of				190	
			contributions reported on line 1	, i		According to the Control of the	and the second		
		_	Part IV, line 18						
			Less: direct expenses		<u> </u>			<u> </u>	
			Net income or (loss) from fundr						
	9	а	Gross income from gaming act		_				
			Part IV, line 19	1					
			Less: direct expenses		ומ	2.0			de de de la desemble de la composición de la composición de la composición de la composición de la composición
			Net income or (loss) from gamil						MAN SAN POPEN BANG
	10	а	Gross sales of inventory, less re						
		L	and allowances						
					, i.j.		kritisis ja ja teri ja keskultus tuktistis ka		
$\overline{}$		Ü	Net income or (loss) from sales	OT ITTVESTILOTY	Business Code				
ş	11	9				je vienir przedmanja (Slapa) (PSSAS)			
Miscellaneous Revenue		a b			-				
Ę Ę									· · · · · · · · · · · · · · · · · · ·
Be		d	All other revenue		·		-11.41		·
Ξ			Total. Add lines 11a-11d						
	12		Total revenue. See instructions			10,157,505.	59,223.	0.	34,562.
23200		13-					· · · · · · · · · · · · · · · · · · ·	. <u> </u>	Form 990 (2022)

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 (B) Program service expenses **(D)** Fundraising (A) Total expenses Do not include amounts reported on lines 6b. Management and general expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 301,500. 301,500. Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 457,595. 267,452. 64,675. 125,468. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 2,590,147. Other salaries and wages 2,365,643. 52,249 172,255. Pension plan accruals and contributions (include 109,732. 101,099. 1,825. section 401(k) and 403(b) employer contributions) 6,808. Other employee benefits 419,342. 368,601. 16,027. <u>34,714.</u> 8,919. 239,624. 207,547. 23,158. 10 Payroll taxes Fees for services (nonemployees): a Management _____ 4,309. 3,713. 158. 438. Legal 16,500. 16,500. Accounting d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, 372,022. 310,278. column (A), amount, list line 11g expenses on Sch O.) 5,167. 56,577. 70,811. 64,784. $4, \overline{141}$. Advertising and promotion 886. 12 34,457. 18,463. Office expenses 422. 15,572. 13 Information technology 395,941. 339,879. 14,452. 41,610. 14 15 Royalties 156,772. 134,904. 6,926. 14,942. 16 Occupancy 35,239. 33,820. 391. 1,028. 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 6,181. 6,115. 18. 48. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 5,126. 4,458. 501. 167. Depreciation, depletion, and amortization 22 10,128. 3,402. 6,350. 376. Insurance 23 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.) 17,605. 15,493 TRAINING AND DEV 343 769. SUBSCRIPTIONS AND DUES 12,587. 11,049. 421. 1,117. C d e All other expenses 5,255,618. 4,558,200. 198,230. Total functional expenses. Add lines 1 through 24e 499,188. 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)

232010 12-13-22

		Check if Schedule O contains a response or no	ι ε το any lir	ie in this ⊬art X I		T	,
					(A) Beginning of year		(B) End of year
-	1				44,020.	1	110,456
1.	2	Savings and temporary cash investments			3,832,833.	2	4,771,950
	3	Pledges and grants receivable, net			700,000.		4,645,726
	4	Accounts receivable, net	565,163.	4	500,945		
	5	Loans and other receivables from any current o		# 1,5			
		trustee, key employee, creator or founder, subs	tantial cont	ributor, or 35%			
		controlled entity or family member of any of the			5		
	6	Loans and other receivables from other disqual	-	'			
		under section 4958(f)(1)), and persons describe				6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use	•••••		40.44	8	
`	9				63,144.	9	95,120
1	10a	Land, buildings, and equipment: cost or other		05 604			
		basis. Complete Part VI of Schedule D		25,631.			
	b	Less: accumulated depreciation		23,050.	7,707.	10c	2,581
	11	Investments - publicly traded securities		· <u>-</u>	11		
	12	Investments - other securities. See Part IV, line		12			
_ `	13	Investments - program-related. See Part IV, line			13		
- 1 '	14	Intangible assets	10.001	14			
	15	Other assets. See Part IV, line 11	12,881.	15	562,537		
	16	Total assets. Add lines 1 through 15 (must equ	5,225,748.		10,689,315		
	17	Accounts payable and accrued expenses		376,020.		310,993	
1 1	18	Grants payable			18		
- 1 '	19	Deferred revenue				19	
	50	Tax-exempt bond liabilities				20	
ı	21	Escrow or custodial account liability. Complete				21	
e 2	22	Loans and other payables to any current or form		9			
Liabilities		trustee, key employee, creator or founder, subs			And Strike Strike (198		
ਫ਼∣ਫ਼	10	controlled entity or family member of any of the				22	
- 1	23 24	Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated	-			23	
	:4 25	Other liabilities (including federal income tax, pa				24	
*	25	parties, and other liabilities not included on lines	-				
					125,000.	05	751,707
١,	26	Total liabilities. Add lines 17 through 25			501,020.		1,062,700
	20	Organizations that follow FASB ASC 958, che		X	17,478,578, 201,178	_20	1,002,700
g		and complete lines 27, 28, 32, and 33.	CK HEIG				
و ا عَ	27	Net assets without donor restrictions	3,271,728.	27	3,325,097		
<u>g</u> 2	28	Net assets with donor restrictions	1,453,000.	28	6,301,518		
<u> </u>	-0	Organizations that do not follow FASB ASC 9				20	
ᆵ		and complete lines 29 through 33.					
و ا ۃ	29	Capital stock or trust principal, or current funds			r ann a 1867 an Airthean ann an 1866. -	29	respirations and a sile pirit of the
s s	30	Paid-in or capital surplus, or land, building, or ed				30	
SS 3	31	Retained earnings, endowment, accumulated in				31	
ا نب	32	Total net assets or fund balances			4,724,728.		9,626,615
_	33	Total liabilities and net assets/fund balances			5,225,748.	33	10,689,315
					-,,		Form 990 (20)

Form **990** (2022)

orn	n 990 (2022) FREE PRESS	41-2	106721	Page 12
Pa	rt 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	10,157	
2	Total expenses (must equal Part IX, column (A), line 25)	2		,618.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,901	,887.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,724	,728.
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		
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	9,626	,615.
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>	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 on Schedule	Ο.		
2a	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
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,	1.79E-5	
	consolidated basis, or both:			
	Separate basis Consolidated basis X 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,	The same of the sa	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	x
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche		37.75	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		1 min and 6 min	Santa au Beart III
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	
			Form S	90 (2022)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

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

OMB No. 1545-0047

Open to Public

Employer identification number

41-2106721 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi), (Complete Part ||,) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other nino document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

Schedule A (Form 990) 2022 FREE PRESS 41-2106

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.)

Sec	Section A. Public Support										
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	1995817.	4610385.	6270716.	2962133.	10063720.	<u>25902771.</u>				
2	Tax revenues levied for the organ-					1					
	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										
4	Total. Add lines 1 through 3	1995817.	4610385.	6270716.	2962133.	<u> 10063720.</u>	25902771.				
5	The portion of total contributions						1				
	by each person (other than a										
	governmental unit or publicly										
	supported organization) included	7									
	on line 1 that exceeds 2% of the										
	amount shown on line 11,										
	column (f)			4.1		A STAR STAR	13520294.				
	Public support. Subtract line 5 from line 4.			***		C.S. (8) (15) (80)	12382477.				
Sec	tion B. Total Support					1					
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total				
7	Amounts from line 4	1995817.	4610385.	6270716.	2962133.	пообзудо.	25902771.				
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,										
	and income from similar sources	25,158.	31,889.	16,381.	8,441.	34,562.	116,431.				
9	Net income from unrelated business										
	activities, whether or not the										
	business is regularly carried on					<u> </u>					
10	Other income. Do not include gain										
	or loss from the sale of capital										
	assets (Explain in Part VI.)			w managarata Talimo etc est cassillo		V 300 0 7.00 1 1 10 2 3 3 1	2664000				
11	Total support. Add lines 7 through 10						26019202.				
12						12	210,537.				
13	First 5 years. If the Form 990 is for the										
_	organization, check this box and stor			·····							
	ction C. Computation of Publi					T I	47 FO				
	Public support percentage for 2022 (I					14	47.59 %				
	Public support percentage from 2021					15	44.13 %				
16a	33 1/3% support test - 2022. If the										
	stop here. The organization qualifies	as a publicly supp	orted organization				X				
k	33 1/3% support test - 2021. If the										
	and stop here. The organization qual										
17a	7a 10% -facts-and-circumstances test - 2022. 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 te					47 line 4F in					
ŀ	10% -facts-and-circumstances test						10% or				
	more, and if the organization meets the										
	organization meets the facts-and-circ						H				
<u>18</u>	Private foundation. If the organization	on did not check a	pox on line 13, 16	a, 160, 1/a, or 17t	o, check this box a						
						Scheanle A	\ (Form 990) 2022				

Schedule A (Form 990) 2022 FREE PRESS 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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
Ū	are not an unrelated trade or bus-						
	iness under section 513						
	Tax revenues levied for the organ-						
4	ization's benefit and either paid to						
_	The value of services or facilities						
5							
	furnished by a governmental unit to the organization without charge						
_	-		· -				
	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
t	3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		, , , , , , , , , , , , , , , , , , , ,				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b 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						
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third.	fourth, or fifth tax	year as a section 5	01(c)(3) organizatio	n,
		_					
Se	ction C. Computation of Publi						
15	Public support percentage for 2022 (line 8, column (f), d	livided by line 13, o	column (f))		15	%
16	Public support percentage from 2021		*			16	%
	ction D. Computation of Inves						
17	Investment income percentage for 20			ne 13, column (f))		17	%
18	Investment income percentage from					18	%
	a 33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box a						
	33 1/3% support tests - 2021. If the	-					
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
	23 12-09-22	<u></u>					(Form 990) 2022

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

 If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	<u> </u>	T
	Yes	No
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		100
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3 b		
3с		
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4c	- Ignaria, oze ege	\$56785+1001
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<u> </u>	2.2	\$ 7 E No.
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	1231.	
10a		
10a		

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Schedule A (Form 990) 2022

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

instructions).

	dule A (Form 990) 2022 FREE PRESS TV Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizatione /		1-2106721 Page 7
1-7-7-1	tV Type III Non-Functionally Integrated 509 on D - Distributions	(a)(o) Supporting Orga	nizations (continu	lea)	Current Year
<u>Sect</u>	Amounts paid to supported organizations to accomplish exe	mnt numoses		1	Ourront rour
	Amounts paid to supported organizations to accomplish exc			•	
2	organizations, in excess of income from activity	or barboace or eabborree		2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pr	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.	Ovide details in 1 and 117		6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	he organization is responsive			
•	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	ıs	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required · explain in Part VI). See instructions.				1 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3	Excess distributions carryover, if any, to 2022			2.033	2.17
а	From 2017				
b	From 2018				
С	From 2019		12. F		
d	From 2020				
е	From 2021	300			
f	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount			4.62.47	
<u></u>	Carryover from 2017 not applied (see instructions)				
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			td	
4	Distributions for 2022 from Section D,				
	line 7: \$	Park to the same of the same o	90, 30,300 S. G. W. T. V.		
<u>a</u>	Applied to underdistributions of prior years		agen, page, seguine as trapented to the contract of the contra	v. Of Green and	
<u>b</u>	Applied to 2022 distributable amount	- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10			
<u>c</u>	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater	4.0			
	than zero, explain in Part VI. See instructions.			SSATURE	// / / / / / / / / / / / / / / / / / /
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
_	and 4c.			V (1921	
8	Breakdown of line 7:				
_	Excess from 2018				
	Excess from 2019				4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
	Excess from 2020			raene Valla	
	Excess from 2021			<u>wewsy</u> The A	
e	Excess from 2022				

Schedule A (Form 990) 2022

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

		anization	tions. Complete Fart III.		Emp	loyer identification number
		FREE PR	ESS			41-2106721
Pa	ırt I-A		janization is exempt und	er section 501(c)	or is a section 527 or	
1 2 3	Political		zation's direct and indirect politic tures ign activities			3
Pa	rt I-B	Complete if the org	janization is exempt und	er section 501(c)	(3).	
1			incurred by the organization und			
			incurred by organization manag			
			n 4955 tax, did it file Form 4720			
						Yes No
	If "Yes,' I rt I-C	describe in Part IV.	janization is exempt und	er section 501(c)	eveent section 501/c	-)(3)
1	200 Sept. 600 60 50		by the filing organization for se			
-			ization's funds contributed to ot			
_				•		3
3			s. Add lines 1 and 2. Enter here a			
	line 17b	·				S
4	Did the	filing organization file Form	1120-POL for this year?			Yes No
5	Enter th	e names, addresses and er	nployer identification number (El	N) of all section 527 po	olitical organizations to which	n the filing organization
			tion listed, enter the amount pai			
			omptly and directly delivered to additional space is needed, prov			e segregated fund or a
	political	• • •	1			
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
_						

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

Schedule C (Form 990) 2022

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Schedule C (Form 990) 2022	REE PRESS			41-2	106721 Page 2
Part II-A Complete if the orga	mization is exemp	t under section 5	01(c)(3) and file	d Form 5768 (ele	ction under
section 501(h)).					
	on belongs to an affiliat		art IV each affiliated (group member's name	, address, EIN,
	of excess lobbying exp				
B Check if the filing organizati	on checked box A and	"limited control" provis	sions apply.		
Limit	on Lobbying Expendi	itures		(a) Filing organization's	(b) Affiliated group totals
(The term "expend	itures" means amount	s paid or incurred.)		totals	
1a Total lobbying expenditures to influe	ence public opinion (gra	ssroots lobbying)			
b Total lobbying expenditures to influ					
c Total lobbying expenditures (add lin	•				
d Other exempt purpose expenditures					
e Total exempt purpose expenditures					
f Lobbying nontaxable amount. Enter		ollowing table in both o	olumns.		
If the amount on line 1e, column (a) or		ring nontaxable amou			
Not over \$500,000	20% of the	amount on line 1e.			
Over \$500,000 but not over \$1,000	000 \$100,000	plus 15% of the excess	s over \$500,000.		
Over \$1,000,000 but not over \$1,50		plus 10% of the excess			
Over \$1,500,000 but not over \$17,0	00,000 \$225,000	plus 5% of the excess	over \$1,50 <u>0,000.</u>		
Over \$17,000,000	\$1,000,00	0.			
g Grassroots nontaxable amount (ent					
h Subtract line 1g from line 1a. If zero					
i Subtract line 1f from line 1c. If zero		4° 4' 4 4			
j If there is an amount other than zero		e 11, did the organization	on file Form 4/20	Г	Yes No
reporting section 4911 tax for this y		aging Period Under So	notion 501/h)		165 140
(Some organizations th	4-Year Avera at made a section 501	(h) election do not ha	ve to complete all o	f the five columns be	elow.
(Some organizations to		e instructions for line			
	Lobbying Expend	itures During 4-Year	Averaging Period		
Calendar year	4) 0045	#1 0000	(-) 0004	(-I) 0000	(a) Tatal
(or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
O - Labbying postavable amount	354,291.	334,895.	354,398.		1,043,584.
2a Lobbying nontaxable amount b Lobbying ceiling amount	331/231				
(150% of line 2a, column(e))					1,565,376.
(10070 of mile 2a) colorina(e))	527 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C	Service American Conference of the Conference of			
c Total lobbying expenditures	150,000.	125,000.	100,000.		375,000.
	-				
d Grassroots nontaxable amount	88,573.	83,724.	88,600.		260,897.
e Grassroots ceiling amount		***************************************			
(150% of line 2d, column (e))					391,346.
			AF 446		00.550
f Grassroots lobbying expenditures	37,500.	31,250.	<u> 25,000.</u>		93,750.

Schedule C (Form 990) 2022

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(4	a)	(I	b)
	e lobbying activity.	Yes	No	Ame	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?		***		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f					
q	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
i	Total. Add lines 1c through 1i				
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	**************************************			
	If "Yes," enter the amount of any tax incurred under section 4912	IXV oyweek v			S. N. W. J. S.
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	****	Barta Carra (On the San	SAME A	
	t III-A Complete if the organization is exempt under section 501(c)(4), sectio	n 501(c)(5), or sec	ction	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members				J, 15
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a	1	
b					
c	PP 1 1				
3			I _		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess	5,75		-
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical		1	
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par	t IV Supplemental Information				
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group actions); and Part II-B, line 1. Also, complete this part for any additional information.	list); Part II	A, lines i a	nd 2 (See	

SCHEDULE D

Supplemental Financial Statements

(Form 990)

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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	FREE PRESS		41-2106721
Pa	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 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 v	writing that the assets held in donor advised t	funds
•	are the organization's property, subject to the organization's	<u> </u>	
6	Did the organization inform all grantees, donors, and donor as		
Ū	for charitable purposes and not for the benefit of the donor or		•
		donor advisor, or for any other purpose con	
Pai			
3 2000 32 1			t IV, line 7.
1	Purpose(s) of conservation easements held by the organization	· · · / 	
	Preservation of land for public use (for example, recreat	· <u> </u>	nistorically important land area
	Protection of natural habitat	Preservation of a c	certified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form of a	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
C	Number of conservation easements on a certified historic stru	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	fter July 25,2006, 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 org	ganization during the tax
	year		
4	Number of states where property subject to conservation eas	ement is located	
5	Does the organization have a written policy regarding the peri	odic 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 conserv	ation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation	easements during the year
8	Does each conservation easement reported on line 2(d) above	e 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	on easements in its revenue and expense state	tement and
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial statements	that describes the
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Other	r 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	8, not to report in its revenue statement and	balance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in furthe	erance of public
	service, provide in Part XIII the text of the footnote to its finan	cial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 958	8, to report in its revenue statement and bala	nce sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthera	nce of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
2	If the organization received or held works of art, historical trea		
_	the following amounts required to be reported under FASB AS	_	••
а	Revenue included on Form 990, Part VIII, line 1		\$
	Assets included in Form 990, Part X		

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

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Schedule D (Form 990) 2022

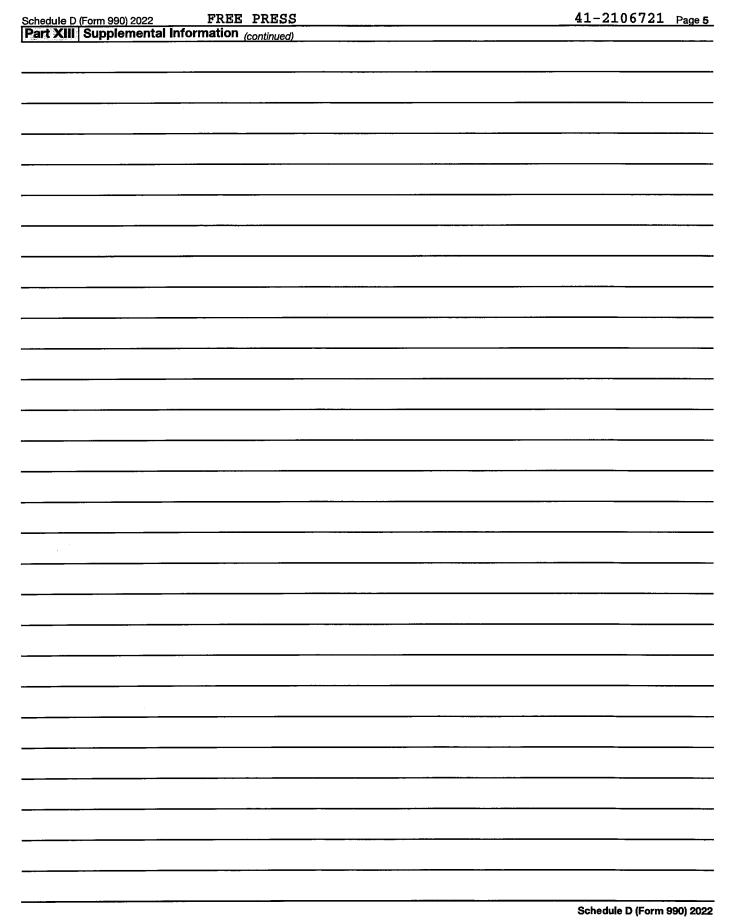
	dule D (Form 990) 2022 FREE PR		- Tu-1. · · · =		6/1	4	11-21	0672	L P	<u>age 2</u>
Pai	t III Organizations Maintaining C							(contir	ued)	
3	Using the organization's acquisition, accessi	on, and other record	is, check any of th	e following tha	t make si	ignificant u	se of its			
	collection items (check all that apply):									
а	Public exhibition	(d Loan or e	xchange progr	am					
þ	Scholarly research	•	e Dother							
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how they further	the organization	on's exer	npt purpos	e in Part	XIII.		
5	During the year, did the organization solicit of	or receive donations	of art, historical tre	asures, or other	er similar	assets				
	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arran		ete if the organizat	ion answered	"Yes" on	Form 990,	, Part IV, I	ine 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	diary for contribution	ns or other as	sets not i	included		_		
	on Form 990, Part X?						\square	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:							
								Amount	t	
C	Beginning balance					. 1c				
d	Additions during the year					. 1d				
е	Distributions during the year					. 1e				
f	Ending balance									
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or	custodial acco	unt liabil	ity?	\square	Yes		No
b	If "Yes," explain the arrangement in Part XIII.									
Par	t V Endowment Funds. Complete	if the organization ar	nswered "Yes" on	Form 990, Parl						
		(a) Current year	(b) Prior year	(c) Two yea	rs back	(d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance									
b	Contributions									
C	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr		e (line 1g, column	(a)) held as:						
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
C	Term endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
За	Are there endowment funds not in the posse		ation that are held	and administe	red for th	ie				
	organization by:	-						ſ	Yes	No
	(i) Unrelated organizations							3a(i)		
	(ii) Related organizations							3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza							3b		
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.							
Par										
	Complete if the organization answere	d "Yes" on Form 990	0, Part IV, line 11a.	See Form 990), Part X,	line 10.				
	Description of property	(a) Cost or o	other (b) Co	st or other	(c) A	ccumulate	d	(d) Bool	k valu	e
		basis (investr	ment) basi	is (other)	de	preciation		` '		
1a	Land						28.0			
	Buildings									
	Leasehold improvements									
	Equipment			25,631.		23,05	0.		2,5	81.
	Other	i		- , - -		,			, ,	-
_	Add lines 1s through 1s. (Oak man (d) must s		V ==1: (D) !:	40-1	1				2 5	<u> </u>

Schedule D (Form 990) 2022

	(Form 990) 2022 FREE PRESS			41-2106721 Page 3
Part VII				
	Complete if the organization answered "Yes"			
(a) Descrip	otion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost of	or end-of-year market value
(1) Financia	al derivatives			
(2) Closely	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
<u>(H)</u>				
	b) must equal Form 990, Part X, col. (B) line 12.)			<u>kati paka kengati na kalabatan pakayan </u>
Part VIII	Investments - Program Related.	E 000 D N/ F	44 - 0 - F 000 Bart V line 10	
	Complete if the organization answered "Yes"			or and of year market value
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost of	or end-oi-year market value
(1)				
(2)				
(3)				
(4)				
(5)				·
(6)				
<u>(7)</u>				
(8)				
<u>(9)</u>				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Other Assets.			
Part IX	Complete if the organization answered "Yes"	on Form 990 Port IV line	11d See Form 990 Part Y line 15	
		Description	Tru. Gee Forth 550, Farex, line 15.	(b) Book value
- CT	CURITY DEPOSIT	Description		12,881.
				549,656.
	OU ASSET			313,030.
(3)				
(4)				
(5)				-
(6)				
<u>(7)</u>				
(8)				
(9)	umn (b) must equal Form 990, Part X, col. (B) lin	no 15)		562,537.
Part X	Other Liabilities.	IC 13.)		
1.00 20 20 20 20 20 20 20 20 20 20 20 20 2	Complete if the organization answered "Yes'	on Form 990. Part IV. line	11e or 11f. See Form 990, Part X, li	ne 25.
4	(a) Description of liability		***************************************	(b) Book value
1.	deral income taxes			
(1) Tec	OVANCE FROM RELATED ORGA	NTZATTON		125,000.
	PERATING LEASE LIABILITY			626,707.
	BIGHTING DUNDU DIRECTOR			
<u>(4)</u>				
(5)				
<u>(6)</u>				
<u>(7)</u>				
(8)				
(9)	time (h) must equal Form 000 Part V and (D) ii-	26.25.)		751,707
TOTAL (CO)	umn (b) must equal Form 990, Part X, col. (B) lir	1 5 		, , , , , , , , , , , , , , , , ,

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

Schedule D (Form 990) 2022



SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047	2022	Open to Public
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Go to www.irs.gov/Form990 for the latest information. Attach to Form 990.

2 Schedule I (Form 990) 2022 Employer identification number SENERAL SUPPORT OF MEDIA 41-2106721 (h) Purpose of grant or assistance REEDOM FOUNDATION'S PROJECT CENSORED X Yes 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 CTIVITIES 1 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 (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) 6 (e) Amount of assistance noncash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed 300,000 (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) 3 Enter total number of other organizations listed in the line is the LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 94-3383394 501(C)(3) criteria used to award the grants or assistance? Part I General Information on Grants and Assistance (p) EIN FREE PRESS 1 (a) Name and address of organization THE MEDIA FREEDOM FOUNDATION or government FAIR OAKS, CA 95628 Name of the organization PO BOX 1177

232101 10-31-22

41-2106721

Page 2

Schedule I (Form 990) 2022 FREE PRESS

Epiritia 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.

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(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
			:		
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	uired in Part I, lin	e 2; Part III, column	(b); and any other ad	ditional information.	
PART I, LINE 2:					
GRANTEES ARE REQUIRED TO PROVIDE PERIODIC FINANCIAL AND NARRATIVE REPORTS	ERIODIC F	INANCIAL A	ND NARRATI	JE REPORTS	
DOCUMENTING AMOUNTS EXPENDED AND ACCOMPLISHMENTS. GRANTEE REPORTS ARE	CCOMPLISH	MENTS. GRA	NTEE REPOR	IS ARE	
REVIEWED BY MANAGEMENT.					

SCHEDULE J (Form 990)

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.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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Employer identification number

41-2106721

Ра	Int I Questions Regarding Compensation			
			Yes	No
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.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	1 !	i '	
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			ŀ
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	1	100 m 100 m	4.4
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain			1
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?	2	11/2/22/25/25/25	9977
	trustees, and officers, including the OLO/Executive Director, regarding the norms chocked on line 14.	25	17.27	100 m
_	Indicate which, if any, of the following the organization used to establish the compensation of the organization's		1.54	
3			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.		46.7	
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
				8
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			100
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	<u> </u>	X
C	Participate in or receive payment from an equity-based compensation arrangement?	4c	growth at the sale	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
		1789		
	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:			
а	The organization?	5a		X
b	Any related organization?	5b		X
_	If "Yes" on line 5a or 5b, describe in Part III.	477		100
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
Ū	contingent on the net earnings of:			
а		6a		X
	Any related organization?	6b		X
D	If "Yes" on line 6a or 6b, describe in Part III.			
7	The second state of the second state and the second state and the second		\$P\$1000	
7	not described on lines 5 and 6? If "Yes," describe in Part III		punes brover	x
_		25.00		
8	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	12 (315)	x
_	Initial contract exception described in Regulations section 53.4956-4(a)(5)? If if es, describe in Fait in Initial contract exception described in Initial contract ex		100	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
9		9	1. 2340	TEG PE
	Regulations section 53.4958-6(c)?	<u> </u>		

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Schedule J (Form 990) 20

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Schedule J (Form 990) 2022

Part III 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) 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.

		(B) Breakdown of W-	-2 and/or 1099-MISC and/or 1099-NEC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MATTHEW WOOD	Ü	130,458.	0	0	6,811.	17,400.	154,669.	0.
VP OF POLICY AND GENERAL C	: 8		0	0	1,202.	3,071.	27,295.	0.
(2) CRAIG AARON	Ξ		0	0.	7,212.	18,424.	161,441.	0.
) <u>(</u>		0	0	801.	2,047.	17,937.	0
(3) MISTY PEREZ TRUEDSON	€		0.	0.	7,188.	19,447.	162,543.	0.
CHIEF OF STAFF	: E		0.	0.	378.	1,024.	8,555.	0.
(4) JESSICA GONZALEZ	€	144,	0	0.	7,212.	815.	152,823.	0.
		16,088	0	0.	801.	91.	16,980.	.0
(5) KIMBERLY LONGEY	E	135,	0	0.	6,811.	789.		0.
_	E	23,	0.	0.	1,202.	139.	25,294.	0.
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							Schedt	Schedule J (Form 990) 2022

232112 10-18-22

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

FREE PRESS

Employer identification number 41-2106721

Par	tl T	ypes of Property					
			(a)	(b) Number of	(c) Noncash contribution	(d) Method of determinir	na
			Check if applicable	contributions or	amounts reported on	noncash contribution am	
			аррисаые		Form 990, Part VIII, line 1g	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1	Art - Wor	ks of art					
2		orical treasures					
_		tional interests					
		nd publications					
		and household goods					
	-	other vehicles					
		d planes					
8		al property					
		s - Publicly traded	X	3	160,979.	FMV	
10		s - Closely held stock					
		s - Partnership, LLC, or					
••	trust inte	•					
12		s - Miscellaneous					
13		conservation contribution -					
10		structures					
14		conservation contribution - Other					
15		ate - Residential					
16		ate - Commercial					
17		ate - Other					
18		les	l l				
19		entorynd medical supplies					
20	•	• •					
21		nyl artifacts					
22							
23		c specimens					
24		ogical artifacts					
25	Other	(
26	Other	()					
27	Other	()				<u> </u>	
<u>28</u>	Other	of Forms 8283 received by the organ	ization durin	a the tay year for a	contributions		
29	Number	of Forms 8263 received by the organ h the organization completed Form 8.	nzanon uumi 202 Do# \/	Donae Acknowled	gement 29		
	tor whic	n the organization completed Form of	200, Fait V,	Dollee You lowled	Jennent <u>20 1</u>		Yes No
		he year, did the organization receive	hu aantribusti	on any property re	norted in Part I lines 1 throu	gh 28 that if	
30a	During t	ne year, did the organization receive in the date of the for at least 3 years from the date of the formal in the date of the formal in the date of the formal in the date of the formal in the date of the formal in	dy contributi	on any property re	sich icn't required to be used	for	
							X
		purposes for the entire holding period	ı,	•••••		F. 3 5	30.5 p 30.5
b	If "Yes,"	describe the arrangement in Part II.		eastires the resieve	of any nonetandard contribu	utions? 31	X
31	Does th	e organization have a gift acceptance	policy triat r	equires trie review	icit menenen er sell nenensk	3101131	
32a		e organization hire or use third parties					x
	contribu				••••••	JZA	
b	If "Yes,	describe in Part II.			hiday which caliman (a) is she	nakad	
33		ganization didn't report an amount in	column (c) to	or a type of proper	ty for which column (a) is che	ouneu,	
	describ	e in Part II.					019738475 TEST

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Schedule M (Form 990) 2022

232142 09-09-22

Schedule M (Form 990) 2022

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2022
Open to Public Inspection

Name of the organization

FREE PRESS

Employer identification number 41-2106721

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FREE PRESS IS A NATIONAL, NONPARTISAN ORGANIZATION WORKING TO REFORM

THE MEDIA. FREE PRESS CONDUCTS RESEARCH ON HOW THE CURRENT MEDIA SYSTEM

INFLUENCES THE DEVELOPMENT OF PUBLIC POLICY AND EDUCATES THE PUBLIC AND

POLICY-MAKERS ON HOW A MORE DIVERSE AND PUBLIC SERVICE-ORIENTED MEDIA

SYSTEM CAN STRENGTHEN AMERICAN DEMOCRACY. FREE PRESS PROMOTES DIVERSE

AND INDEPENDENT MEDIA OWNERSHIP, STRONG PUBLIC MEDIA AND UNIVERSAL

ACCESS TO COMMUNICATIONS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FREE PRESS WAS CREATED TO GIVE PEOPLE A VOICE IN THE CRUCIAL DECISIONS

THAT SHAPE OUR MEDIA. WE BELIEVE THAT POSITIVE SOCIAL CHANGE, RACIAL

JUSTICE AND MEANINGFUL ENGAGEMENT IN PUBLIC LIFE REQUIRE EQUITABLE

ACCESS TO TECHNOLOGY, DIVERSE AND INDEPENDENT OWNERSHIP OF MEDIA

PLATFORMS, AND JOURNALISM THAT HOLDS LEADERS ACCOUNTABLE AND TELLS

PEOPLE WHAT'S ACTUALLY HAPPENING IN THEIR COMMUNITIES. FREE PRESS

CLOSELY WATCHES AS THE DECISIONS SHAPING THE MEDIA LANDSCAPE ARE MADE

AND SOUNDS THE ALARM WHEN PEOPLE'S RIGHTS TO CONNECT AND COMMUNICATE

ARE IN DANGER. WE FOCUS ON SAVING NET NEUTRALITY, ACHIEVING AFFORDABLE

INTERNET ACCESS FOR ALL, UPLIFTING THE VOICES OF PEOPLE OF COLOR IN THE

MEDIA, CHALLENGING OLD AND NEW MEDIA GATEKEEPERS TO SERVE THE PUBLIC

INTEREST, ENDING UNWARRANTED SURVEILLANCE, DEFENDING PRESS FREEDOM AND

REIMAGINING LOCAL JOURNALISM.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

TO PUBLIC INTEREST ORIENTED BROADBAND PROPOSALS IN NUMEROUS STATE AND

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

Schedule O (Form 990) 2022

FEDERAL REGULATORY AGENCY PROCEEDINGS. URGED THAT THE UNITED STATES

JOIN DOZENS OF OTHER COUNTRIES IN SIGNING THE DECLARATION OF THE FUTURE

OF THE INTERNET, WHICH PROMOTES A SHARED VISION OF A MORE OPEN,

AFFORDABLE, SECURE AND DEMOCRATIC INTERNET. AMONG THE DECLARATION'S

PRINCIPLES ARE CALLS FOR NET NEUTRALITY, AFFORDABLE AND INCLUSIVE

INTERNET ACCESS, AND DATA-PRIVACY PROTECTIONS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

LGBTQIA+ PEOPLE, RELIGIOUS MINORITIES AND IMMIGRANTS. URGED COMPANIES

TO STUDY ALGORITHMIC BIAS, COMMIT TO INDEPENDENT AUDITS AND TO ENFORCE

EXISTING TERMS OF SERVICE. WORKED WITH DOZENS OF GROUPS TO HIGHLIGHT

THE NEED TO SAFEGUARD PRIVACY, PROMOTE CIVIL RIGHTS AND SET GUARDRAILS

AGAINST THE ABUSE OF DATA ONLINE. PUBLISHED A MAJOR REPORT REVEALING

THE ONGOING FAILURES OF META, TIKTOK, TWITTER AND YOUTUBE TO CURB THE

SPREAD OF ELECTION DISINFORMATION AND EXTREMISM ACROSS THEIR NETWORKS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

SCHOOLS, PUBLIC HEALTH AND OTHER CRUCIAL MATTERS. URGED PROMINENT

NEWSPAPERS TO TRANSFORM COVERAGE OF THE CRIMINAL-LEGAL SYSTEM AND TO

CRAFT MORE EQUITABLE REPORTING ON PUBLIC SAFETY, POLICING AND TRAUMA

AND TO BETTER SUPPORT ITS JOURNALISTS OF COLOR. PUBLISHED TWO RESOURCE

GUIDES. HIGHLIGHTED IMPORTANCE OF REBUILDING LOCAL JOURNALISM AND

CREATING NEW FORMS OF PUBLIC FUNDING TO SUSTAIN IT. WORKED IN

COALITION, COMMUNITY GROUPS AND ACADEMIC INSTITUTIONS TO HIGHLIGHT

NEGATIVE IMPACTS OF NEWS DESERTS AND HOW TRANSFORMATIVE JOURNALISM

POLICIES WILL BETTER SERVE MARGINALIZED COMMUNITIES, MEDIA WORKERS AND

SOCIETY.

Schedule O (Form 990) 2022 Name of the organization **Employer identification number** FREE PRESS 41-2106721 FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: FREE PRESS WORKS TO PRESERVE RIGHTS TO FREE EXPRESSION, COMMUNICATION AND PRIVACY ONLINE AND IN PERSON. AREAS OF FOCUS INCLUDE FUTURE OF THE INTERNET; DEMOCRACY AND DIGITAL CIVIL RIGHTS; AND FUTURE OF JOURNALISM. IN 2022 FREE PRESS CONDUCTED RESEARCH, EDUCATION, AND ALSO ORGANIZED AND MOBILIZED TO ADVOCATE FOR BETTER MEDIA, OPEN TECHNOLOGY AND A HEALTHIER DEMOCRACY. PROVIDED REGULAR INFORMATION VIA EMAIL, WEBSITE, AND WEBINARS TO 1.4 MILLION CONSTITUENTS HAILING FROM ALL 50 STATES, THE DISTRICT OF COLUMBIA AND PUERTO RICO. ATTRACTED 333,000 OVERALL WEBSITE VISITS AND VIRTUAL EVENTS ATTRACTED HUNDREDS OF PARTICIPANTS. INTERACTED WITH 132,000 SOCIAL MEDIA FOLLOWERS AND EARNED 3,500 PRESS HITS. CREATED AND DISSEMINATED RESOURCE MATERIALS INCLUDING RESEARCH REPORTS, ISSUE BRIEFS, FACTSHEETS, AND BROCHURES. PROVIDED TRAINING AND SUPPORT TO DOZENS OF LOCAL AND REGIONAL MEDIA REFORM GROUPS AND TO THOUSANDS OF LOCAL MEDIA ACTIVISTS. FILED PUBLIC COMMENTS, AND PARTICIPATED IN SEVERAL FEDERAL COMMUNICATIONS COMMISSION PROCEEDINGS AND SEVERAL FEDERAL COURT PROCEEDINGS. WORKED WITH DOZENS OF ORGANIZATIONS TO PLAN AND IMPLEMENT HIGH PROFILE EDUCATIONAL EVENTS. SECURED FINANCIAL SUPPORT FROM 1,482 DONORS. EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 28,773. FORM 990, PART VI, SECTION A, LINE 8B:

THE ORGANIZATION HAS NO COMMITTEES THAT ARE AUTHORIZED TO ACT ON BEHALF OF THE GOVERNING BODY.

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

GENERALLY, AN ELECTRONIC COPY OF FORM 990 IS DISTRIBUTED TO MEMBERS OF THE AUDIT OVERSIGHT COMMITTEE (CHAIR, TREASURER, AND ASSISTANT TREASURER) WHO Schedule O (Form 990) 2022 232212 10-28-22

REVIEWS IT AND THE ORGANIZATION'S FINANCIAL STATEMENTS IN A MEETING WITH

THE CERTIFIED PUBLIC ACCOUNTANT RETAINED TO PREPARE THESE DOCUMENTS. ONCE

THE AUDIT OVERSIGHT COMMITTEE IS SATISFIED WITH THE ACCURACY OF THE

INFORMATION PRESENTED, A COPY OF THE FORM 990 IS SENT TO ALL BOARD MEMBERS

PRIOR TO FILING. EACH YEAR THE ENTIRE GOVERNING BODY IS OFFERED THE

OPPORTUNITY TO MEET WITH THE ORGANIZATION'S CERTIFIED PUBLIC ACCOUNTANT TO

REVIEW THE AUDITED FINANCIAL STATEMENTS AND DISCUSS THE FINANCIAL

MANAGEMENT PRACTICE OF THE ORGANIZATION. THIS IS AN OPTIONAL MEETING

DESIGNED TO ALLOW THE GOVERNING BODY DIRECT ACCESS TO THE INDEPENDENT

AUDITOR.

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

ALL OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES ARE REQUIRED TO

DISCLOSE ANNUALLY INTERESTS THAT COULD GIVE RISE TO CONFLICTS. SIGNED

DOCUMENTS ARE COLLECTED AT THE ANNUAL MEETING OF THE GOVERNING BODY. IF A

REAL OR PERCEIVED CONFLICT IS REPORTED, THE PROCEDURES IN THE POLICY ARE

FOLLOWED.

FORM 990, PART VI, SECTION B, LINE 15:

EACH POSITION AT FREE PRESS HAS A PAY RANGE. RANGES ARE DETERMINED AFTER
REVIEW OF SALARY COMPARABILITY DATA, INCLUDING COMPENSATION INFORMATION
RECEIVED FROM PEER ORGANIZATIONS, COMPENSATION DATA FROM THE FEDERAL
GOVERNMENT PAY SCALES, AND RESEARCH ON NON PROFIT COMPENSATION GATHERED
FROM GUIDESTAR, REGIONAL EMPLOYER COMPENSATION SURVEYS, AND JOB POSTINGS.
MANAGEMENT INCLUDES STAFF COMPENSATION INFORMATION, INCLUDING THE CEOS AND
KEY EMPLOYEES, IN THE ANNUAL BUDGET THAT IS REVIEWED AND APPROVED BY THE
GOVERNING BODY IN ADVANCE OF EACH FISCAL YEAR. A MEMO OUTLINED THE
ORGANIZATION'S COMPENSATION POLICY AND VALUES, HIGHEST AND LOWEST PAID

232212 10-28-22

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

2022

OMB No. 1545-0047

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

FREE PRESS

Name of the organization

Parti

Department of the Treasury Internal Revenue Service

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Employer identification number 41-2106721Open to Public Inspection

(g) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2022 ş × Direct controlling Yes Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Direct controlling entity End-of-year assets N/A <u>e</u> status (if section Public charity 501(c)(3)) Total income Exempt Code ਉ section DISTRICT OF COLUMBIA 501(C)(4) Ē Legal domicile (state or Legal domicile (state or foreign country) foreign country) PROMOTING MEDIA REFORM IN Primary activity Primary activity THE PUBLIC INTEREST <u>e</u> For Paperwork Reduction Act Notice, see the Instructions for Form 990. Name, address, and EIN (if applicable) FREE PRESS ACTION FUND - 04-3771598 Name, address, and EIN of related organization of disregarded entity FLORENCE, MA 01062 P.O. BOX 60238 PartII

41-2106721

Page 2

FREE PRESS

Schedule R (Form 990) 2022

Percentage ownership Yes No (i) Section 512(b)(13) controlled entity? Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. 3 Percentage ownership | Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets Disproportionate Yes No allocations? Ξ Share of total income Ξ (g) Share of end-of-year assets Type of entity (C corp, S corp, or trust) <u>e</u> Share of total income (d)
Direct controlling
entity Predominant income (related, unrelated, excluded from tax under sections 512-514) e Legal domicile (state or foreign country) ত (d)
(Direct controlling entity Primary activity (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization Œ Part

Schedule R (Form 990) 2022

232162 09-14-22

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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	lated organizations listed	in Parts II-IV?
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/		1a X
b Gift, grant, or capital contribution to related organization(s)			X 1b X
c Giff. grant. or capital contribution from related organization(s)			∆ 1c X
			Ä ,
e Loans of Idali gualaitees by refated organization(s)			
f Dividends from related organization(s)			T X
g Sale of assets to related organization(s)			1g X
h Purchase of assets from related organization(s)			X 1h X
			I
related organization(s)			l II
k Lease of facilities, equipment, or other assets from related organization(s)			X X
I Performance of services or membership or fundraising solicitations for related organization(s)	nization(s)		1 X
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)		T mt
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)		1 X ut
o Sharing of paid employees with related organization(s)			X 01
p Reimbursement paid to related organization(s) for expenses			X dt
q Reimbursement paid by related organization(s) for expenses			X pt
r Other transfer of cash or property to related organization(s)			1. X
s Other transfer of cash or property from related organization(s)			X st X
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	ho must complete th	is line, including covered r	elationships and transaction thresholds.
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved
(1) FREE PRESS ACTION FUND	Z	205,912.	912. ACTUAL COSTS, TIME SHEETS
(2) FREE PRESS ACTION FUND	0	345,134.	ACTUAL COSTS, TIME SHEETS
(3) FREE PRESS ACTION FUND	O	603,894.	894. REIMBURSEMENTS ACTUALLY RECEIVED
. (5)			
(9)			
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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Name, address, and EIN Name, address, addr	Predominant income parlman excluded from tax under one sections 512-514) Yes	Are all Share of total total income income	Share of end-of-year assets	Disproportionate arrangements of Yes No	Obsproportional of the control of th	General or Permanaging Or Ves No	(K) ercentage wmership

Schedule R (Form 990) 2022

Schedule R	(Form 990) 2022	FREE	PRESS	41-2106721	Page 5
Part VII	(Form 990) 2022 Supplemental Infor	mation		,	
78.78	Provide additional inform:	ation for re-	sponses to questions on Schedule R. See instructions.		
	Frovide additional informs	ation for rea	sponses to questions on ochequie 11. Oee instructions.		
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