# \*\*PUBLIC DISCLOSURE COPY\*\*

Form **990** 

Department of the Treasury

# **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.



A	For th	e 2023 calendar year, or tax year beginning and e	ending				
	Check if	C Name of organization	- Noning	D Employer identifica	ation number		
	applicab	e:					
	Addre	FREE PRESS ACTION FUND					
	Name			04-377159	8		
	Initial		Room/suite	E Telephone number			
	Final	1025 CONNECTION AVE NO	- John Gund	202-265-1	490		
	termi			G Gross receipts \$	1,368,578.		
	Amer	ded WA CHINGTON DC 20026		H(a) Is this a group ret			
	Applition	F Name and address of principal officer: CRAIG AARON		for subordinates?			
	pend	<sup>ng</sup> SAME AS C ABOVE		H(b) Are all subordinates incl			
1	Tax-ex	empt status: 501(c)(3) 🕱 501(c)( 4 ) (insert no.) 4947(a)(1) o	or 527	1	st. See instructions		
J	Webs			H(c) Group exemption			
		f organization: 🔀 Corporation Trust Association Other	L Year	of formation: 2003 M	State of legal domicile: DC		
P	art I	Summary					
	1	Briefly describe the organization's mission or most significant activities: SEE S	SCHEDU	LE O			
nce							
Activities & Governance	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net asse			
evo	3	Number of voting members of the governing body (Part VI, line 1a)		3	9		
9	4	Number of independent voting members of the governing body (Part VI, line 1b)			8		
200	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			39		
vittie	6	Total number of volunteers (estimate if necessary)		250009			
ito.	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.		
_	<u> </u> b	Net unrelated business taxable income from Form 990-T, Part I, line 11		0.			
				Prior Year	Current Year		
0	8	Contributions and grants (Part VIII, line 1h)		784,951.	1,352,976.		
1UB	9	Program service revenue (Part VIII, line 2g)		0.	0.		
Ravanija	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,492.	15,602.		
-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		788,443.	1,368,578.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
90	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		345,134.	611,742.		
	2 16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
-		Total fundraising expenses (Part IX, column (D), line 25) 106,71		249 015	255 004		
	1 11	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		248,015.	355,004.		
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		593,149.	966,746.		
-		Revenue less expenses. Subtract line 18 from line 12	the second party of the se	195,294.	<u>401,832.</u> End of Year		
ts of	Eund Balances			eginning of Current Year 1,020,741.			
SSB	elean 20	Total assets (Part X, line 16)		Card and the second	<u>1,558,486.</u> 320,759.		
et A	g 21	Total liabilities (Part X, line 26)		184,846.	1,237,727.		
	art I	Net assets or fund balances. Subtract line 21 from line 20		835,895.	1,431,141.		
Long			a and state	ania and in the basis of	Includes and ballef. it 's		
Un	uer pe	nalties of perjury, I declare that I have examined this return, including accompanying schedules	s and statem	ents, and to the best of my	knowledge and beliet, it is		

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

	SWILL N	4	151004						
Sign	Signature of officer	Date							
Here	KIMBERLY LONGEY, CHIEF OPERATING OFFICER								
	Type or print name and title								
	Print/Type preparer's name Preparer's signature DA Dat	ite C	heck PTIN						
Paid	Print/Type preparer's name KRISTIN A. JACQUELIN, CPA Hunter (CPA 0	4/10/24	elf-employed P0132	5865					
Preparer	Firm's name CALIBRE CPA GROUP, 'PLLC // //	Firm's E	IN 47-09008	80					
Use Only	Firm's address 7501 WISCONSIN AVENUE, SUITE 1200 WEST								
	BETHESDA, MD 20814 Phone no.202-331-9880								
May the I	May the IRS discuss this return with the preparer shown above? See instructions X Yes No								
LHA For	LHA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)								

al	rt III Statement of Program Service Accomplishments		-
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	[
	Briefly describe the organization's mission:		
	SEE SCHEDULE O		
	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	X
	If "Yes," describe these new services on Schedule O.		
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X
	If "Yes," describe these changes on Schedule O.		
	Describe the organization's program service accomplishments for each of its three largest program services, as n	nessured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others		
	revenue, if any, for each program service reported.	s, the total expenses, al	nu
		ACCESS AND	
	AFFORDABILITY OF BROADBAND INTERNET NATIONWIDE. LAUDED TH		
	EQUITY, ACCESS, AND DEPLOYMENT (BEAD) PROGRAM, WHICH WILL		0
	STATES BUILD HIGH-SPEED INTERNET NETWORKS IN COMMUNITIES		-
	ACCESS. MOBILIZED HUNDREDS OF ORGANIZATIONS FROM ACROSS		<u>.</u>
	SPECTRUM, INCLUDING LEADING CIVIL-RIGHTS, COMMUNITY-MEDIA	•	
	MEDIA-JUSTICE, WORKERS-RIGHTS AND CONSUMER-ADVOCACY GROUP		
	PUBLIC INTEREST-ORIENTED SERVICE AND LEADERS AT THE FEDER		
	COMMUNICATIONS COMMISSION. CONTINUED TO EXPOSE THE CONSEC	-	
	MILLIONS OF PEOPLE LACKING ACCESS TO AFFORDABLE BROADBANI	) SERVICES,	
	WHEN ACCESS TO HEALTH CARE, SCHOOLING, WORK AND SO MUCH M	ORE DEPENDS	10
	A RELIABLE CONNECTION. LOBBIED FOR EQUITABLE USE OF BROAD	BAND RELATE	D
	(Code:) (Expenses \$247,461. including grants of \$) (Revenue)	e\$	
	DEMOCRACY AND DIGITAL CIVIL RIGHTS: CONTINUED HIGHLIGHTIN		OF
	SOCIAL MEDIA COMPANIES IN THE PERPETUATION OF HOAXES, DIS	INFORMATION	,
	AND HATE SPEECH AND THE IMPACT TO SOCIETY AND ESPECIALLY		
	MARGINALIZED COMMUNITIES, WOMEN, AND PEOPLE OF COLOR. PRO		
	INFORMATION TO OUR MEMBERS ON PROPOSED LEGISLATION INCLU		
		ECTIONS FROM	
	•	OVERNMENT	-
	SURVEILLANCE REFORM ACT OF 2023; AND THE ALGORITHMIC JUS		
	ONLINE TRANSPARENCY ACT. LOBBIED FOR PASSAGE OF THE FOUR		·π
	IS NOT FOR SALE ACT, WHICH WOULD PREVENT LAW ENFORCEMENT		1
	INTELLIGENCE AGENCIES FROM OBTAINING SUBSCRIBER OR CUSTON		TNT
	EXCHANGE FOR ANYTHING OF VALUE, TO ADDRESS COMMUNICATIONS		S
	(Code:) (Expenses \$206,975. including grants of \$) (Revenue)		
	FUTURE OF JOURNALISM: CONTINUED TO WORK IN AND WITH COMMU		
	PEOPLE HAVE A STRONG VOICE IN HOW LOCAL NEWS CAN BE REVIV		
	STRENGTHENED AND TRANSFORMED. PROMOTED POLICIES THAT WILL		
	OWNERSHIP AMONG WOMEN AND PEOPLE OF COLOR AND CREATE OPPO		OR
	LOCAL MEDIA OWNERS WHO ARE COMMITTED TO ACTUALLY SERVING	THEIR	
	COMMUNITIES. DEFENDED A FREE PRESS AND URGED PROTECTIONS	FOR	
	JOURNALISTS. PUBLISHED CRUMBS FOR CALIFORNIA: HOW A BILI	J TO 'SAVE	
	JOURNALISM' WOULD ENRICH BIG MEDIA AND HARM COMMUNITY NEW		
	REPORT THAT ANALYZES THE NEGATIVE IMPACT THAT THE PROPOSI		
	JOURNALISM PRESERVATION ACT (CJPA) WOULD CAUSE.		
	Other program services (Describe on Schedule O.)	,	
	(Expenses \$ including grants of \$ ) (Revenue \$       Total program service expenses     791,197.	)	

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00000110	, , ,	/ 0

			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		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		37	
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			37
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			77
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			77
-	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			77
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			77
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			77
	Part VI	<u>11a</u>		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			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			37
	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	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	Х	
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		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	<u>14a</u>		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			37
	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			37
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			37
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			77
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			37
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			77
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			37
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	000	X
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332003 12-21-23

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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			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 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		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"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
	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 noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		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	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	<u> </u>		
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			$\square$
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable <b>1b</b>	1		
- -	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
Ū	(gambling) winnings to prize winners?	1c	х	
33200/	12-21-23			(2023)
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	990 (2023) FREE PRESS ACTION FUND 04-3771	598	P	<sub>age</sub> 5
Par	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			
L.		Oh	Х	
-	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b 3a	<u></u>	x
3a h	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3b		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	30		<u> </u>
48	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	10		x
Ь	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
b	If "Yes," enter the name of the foreign country			
Fo		Fo		х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	50 50		
-	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	60	х	
<b>h</b>	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	Ch	х	
7	Organizations that may receive deductible contributions under section 170(c).	6b	<u></u>	
7		7-		
a L	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 7b		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.		
-I	to file Form 8282?	7c		<u> </u>
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7.		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the	•		
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0.		
a L	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
10-	amounts due or received from them.)	10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	138		
<b>h</b>				
D	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand	44-		x
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	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	40		x
	excess parachute payment(s) during the year?	15		
10	If "Yes," see the instructions and file Form 4720, Schedule N.	40		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
4-	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		
	If "Yes," complete Form 6069.	Г <u>о</u> тт	990	(2023)
332005	12-21-23	rorm	330	(2023)

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Form 990	(2023)
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### FREE PRESS ACTION FUND

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

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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

			Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	9		
	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 1b	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?	2		2
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		2
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		2
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		
6	Did the organization have members or stockholders?	6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		2
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		2
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	Х	
	Each committee with authority to act on behalf of the governing body?	8b		2
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		
Sect	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	N
10a	Did the organization have local chapters, branches, or affiliates?	10a		
	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		
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?			
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	on Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
	Did the organization have a written document retention and destruction policy?	14	Х	
	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
	Other officers or key employees of the organization	15b	37	
	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?	16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sect	tion C. Disclosure			
17	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	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.	,·· <b>,</b> ,		
	X       Own website       Another's website       X       Upon request       Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	nd finar	ncial	
	statements available to the public during the tax year.	.a ma		
20	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, DC 20036			

Form 99	0 (2023)
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Part VII	Co	mpensation of Officers	, Directors,	Trustees,	Key Employees,	Highest	Compensated
	Em	ployees, and Independ	lent Contra	ctors			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

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

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

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

(A)	(B)	l	mea		C)	1001	loure	(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
Name and the	hours per		not cl					compensation	compensation	amount of
	week		cer an					from	from related	other
	(list any	ctor						the	organizations	compensation
	hours for	r dire				eq		organization	(W-2/1099-MISC/	from the
	related	tee o	ustee			ensat		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ll trus	nal tr		loyee	dwo		1099-NEC)		and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	Ind	Inst	Offi	Key	emilia	For			
(1) CRAG AARON	4.00									
CO-CEO	36.00	Х		Х				28,150.	159,518.	33,750.
(2) JESSICA GONZALEZ	4.00									
CO-CEO	36.00					X		29,667.	168,114.	20,462.
(3) KIMBERLY LONGEY	6.00									
COO, ASST TREASURER/SECRETARY	34.00			Х				18,608.	167,468.	20,049.
(4) MISTY PEREZ TRUEDSON	38.00									
CHIEF OF STAFF	2.00					X		24,428.	138,428.	32,722.
(5) MATHEW WOOD	34.00									
VICE PRESIDENT OF POLICY & GENERAL C	6.00					X		32,337.	129,350.	32,654.
(6) VANESSA CARDENAS	1.00									
DIRECTOR	1.00	Х						0.	0.	0.
(7) OLGA DAVIDSON	1.00									
DIRECTOR, SECRETARY	1.00	Х		Х				0.	0.	0.
(8) BRANDI COLLINS DEXTER	1.00									
DIRECTOR, TREASURER	1.00	Х		Х				0.	0.	0.
(9) VICTOR PICKARD	1.00									
DIRECTOR, CHAIR	1.00	Х		Х				0.	0.	0.
(10) D. BENJAMIN SCOTT	1.00									
DIRECTOR	1.00	Х						0.	0.	0.
(11) ASHLEY ALLISON	1.00									
DIRECTOR	1.00	Х						0.	0.	0.
(12) JOAN DONOVAN	1.00									
DIRECTOR	1.00	Х						0.	0.	0.
(13) MARTHA FUENTES-BAUTISTA	1.00									
DIRECTOR	1.00	Х						0.	0.	0.
		L								
		<u> </u>								
										Form <b>990</b> (2023)
332007 12-21-23										Earm <b>MML</b> (2022)

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332007 12-21-23

Form 990 (2023)

#### 08520412 712177 71448

2023.03030 FREE PRESS ACTION FUND

	990 (2023) FREE PRES	SS ACTIO	N	FU	ND	)				04-37	71598 Page <b>8</b>
Par	t VII Section A. Officers, Directors, Trust	tees, Key Emp	oloye	ees,			ghes	t C	ompensated Employee	s (continued)	
	<b>(A)</b> Name and title	<b>(B)</b> Average hours per week	box,	not cl , unles	ss per	ition more rson is	l than c s both r/trust	an	(D) Reportable compensation from	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other
		(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC 1099-NEC)	compensation from the organization and related organizations
									122 100	762.07	0 120 627
с	Subtotal Total from continuation sheets to Part VII Total (add lines 1b and 1c)	, Section A	· · · · · · · ·		· · · · · · · · ·				133,190. 0. 133,190.	762,87	0. 0.
2	Total number of individuals (including but no compensation from the organization	ot limited to the	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable	0 Yes No
3 4	Did the organization list any <b>former</b> officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for se</i> For any individual listed on line 1a, is the su	uch individual									
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes." com	),000? <i>If</i> "Yes, accrue compen	" <i>col</i> satio	<i>mple</i> on fr	ete S om	Sche any	edule unre	<i>J f</i> elate	or such individual	dual for services	4 X
Sec	tion B. Independent Contractors		.0 10	57 50		2070					
1	Complete this table for your five highest con the organization. Report compensation for t (A)	•								, ,	ensation from (C)
	Name and business	address	NC	ONE	2			_	Description of s	ervices	Compensation
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz	•	ot lin	nitec	l to f	thos C		ted	above) who received mo	ore than	Form <b>990</b> (2023)

	<u>1 990 (</u>			ACTION FUN	D		04-3771	598 Page <b>9</b>
Pa	rt VII	I Statement of Re	venue					
		Check if Schedule O c	contains a respor	ise or note to any lir		(5)	(A)	
						(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
					Total revenue		business revenue	from tax under
								sections 512 - 514
ts	1 a	Federated campaigns	1a					
ran.	b		1b	89,205.				
Contributions, Gifts, Grants and Other Similar Amounts	с				1			
ifts ar A	d			100,000.	1			
s, G	е	Government grants (contri		100,000. 3,771.	1			
Sir	f	All other contributions, gifts,	,	•				
her	-	similar amounts not included		1,160,000.				
oti	g				1			
no' Ind	9 b	Total. Add lines 1a-1f			1,352,976.			
0.0				Business Code	1,002,0100			
	• •			Business Code				
vice	2 a							
er,	b							
n S /en	с							
grai Bev	d							
Program Service Revenue	е							
<u>a</u>	•	All other program service						
	g							
	3	Investment income (incluc						
					15 (0)			15 600
	4	Income from investment of	-	-	15,602.			15,602.
	5	Royalties						
			(i) Real	(ii) Personal	-			
	6 a	Gross rents	6a		-			
	b	Less: rental expenses $\dots$	6b		-			
	С	Rental income or (loss)	6c					
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securitie	es (ii) Other				
		assets other than inventory	7a					
	b	Less: cost or other basis						
ne		and sales expenses	7b					
evenue	с	Gain or (loss)	7c					
	d	Net gain or (loss)						
Other R	8 a	Gross income from fundraisir	ng events (not					
đ		including \$	of					
		contributions reported on						
		Part IV, line 18		8a				
	b			8b				
	с			s				
	9 a	Gross income from gamin	-					
		Part IV, line 19		9a				
	b			9b				
		Net income or (loss) from						
		Gross sales of inventory, I						
		and allowances		10a				
	b	Less: cost of goods sold		10b				
		Net income or (loss) from						
				Business Code				
sni	11 a							
neo	b							
ilai ven	с С							
Miscellaneous Revenue	с С							
Ϊ	d							
		Total. Add lines 11a-11d			1,368,578.	0.	0.	15,602.
0005	12	Total revenue. See instructio	פווע		<u>+,500,570.</u>	. 0.		Form <b>990</b> (2023)
33200	9 12-21	-23			•			(2023)

Form 990 (2023)
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FREE PRESS ACTION FUND Part IX Statement of Functional Expenses

D-	at include amounts reported on lines Ob	(A)	his Part IX	(C)	(D)
	ot include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	86,562.	56,882.	14,703.	14,977.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	382,155.	321,388.	17,987.	42,780.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	20,790.	16,841.	1,418.	2,531.
9	Other employee benefits	67,656.	54,607.	4,711.	2,531. 8,338.
10	Payroll taxes	54,579.	44,779.	3,849.	5,951.
11	Fees for services (nonemployees):		,	. ,	.,
	Management				
	Legal				
	Accounting	10,400.		10,400.	
	-	10/1000			
	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	123,674.	102,558.	7,649.	13 167
	column (A), amount, list line 11g expenses on Sch 0.)	13,796.	13,045.	260.	<u>13,467</u> 491.
12	Advertising and promotion	5,121.	1,742.	351.	3,028.
13	Office expenses	158,793.	148,364.	3,704.	6,725.
14	Information technology	100,795.	140,304.	3,704.	0,723.
15	Royalties	07 061	10 000	1 050	
16	Occupancy	27,061.	18,068.	1,258.	7,735.
17	Travel	4,158.	3,933.	82.	143.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		- 40.6		
19	Conferences, conventions, and meetings	5,508.	5,496.	4.	8.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	-			
23	Insurance	2,860.	564.	2,207.	89.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	PROF DEV & TRAINING	1,836.	1,470.	128.	238.
b	SUBSCRIPTIONS	1,797.	1,460.	126.	211.
c		_,	_,,		
d					
	All other expenses				
	· · · · · · · · · · · · · · · · · · ·	966,746.	791,197.	68,837.	106,712.
2 <u>5</u>	Total functional expenses. Add lines 1 through 24e	500,740.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	00,057.	100,1120
26	<b>Joint costs</b> . Complete this line only if the organization				
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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Form 990 (2023)

#### FREE PRESS ACTION FUND

\_\_\_\_\_10a

Investments - publicly traded securities

Investments - other securities. See Part IV, line 11

Investments - program-related. See Part IV, line 11

Intangible assets

Other assets. See Part IV, line 11

Accounts payable and accrued expenses

Grants payable

Deferred revenue Tax-exempt bond liabilities

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Net assets without donor restrictions Net assets with donor restrictions

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

X

Loans and other payables to any current or former officer, director,

Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X

controlled entity or family member of any of these persons

Organizations that follow FASB ASC 958, check here

Organizations that do not follow FASB ASC 958, check here

Total liabilities. Add lines 17 through 25

and complete lines 27, 28, 32, and 33.

and complete lines 29 through 33.

Total liabilities and net assets/fund balances

trustee, key employee, creator or founder, substantial contributor, or 35%

(2023) FREE PRESS ACTION FUND		04-	3//1598 Page 11
Balance Sheet			
Check if Schedule O contains a response or note to any line in this Part X			
	<b>(A)</b> Beginning of year		<b>(B)</b> End of year
Cash - non-interest-bearing	62,810.	1	154,808.
Savings and temporary cash investments	735,013.	2	523,912.
Pledges and grants receivable, net		3	
Accounts receivable, net	50,000.	4	650,000.
Loans and other receivables from any current or former officer, director,			
trustee, key employee, creator or founder, substantial contributor, or 35%			
controlled entity or family member of any of these persons		5	
Loans and other receivables from other disqualified persons (as defined			
under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
Notes and loans receivable, net		7	
Inventories for sale or use		8	
Prepaid expenses and deferred charges	1,515.	9	1,563.

171,403.

131,938.

52,908.

184,846.

820,895.

835,895.

020,741.

15,000.

1,020,741.

10c

11

12

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Form 990 (2023) Part X Balance Sheet

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32

33

of Schedule D

Liabilities

Net Assets or Fund Balances

Assets

b Less: accumulated depreciation 10b

Total assets. Add lines 1 through 15 (must equal line 33)

**10a** Land, buildings, and equipment: cost or other

basis. Complete Part VI of Schedule D

1,558,486. Form 990 (2023)

1,237,727.

228,203.

258,907.

61,852.

10,000.

320,759.

1,227,727.

1,558,486.

Form	1990 (2023) FREE PRESS ACTION FUND	04-	-3771598	Pa	ge 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	1,36	8,5	78.
2	Total expenses (must equal Part IX, column (A), line 25)	2	96	6,7	46.
3	Revenue less expenses. Subtract line 2 from line 1	3	40	1,8	32.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	83	5,8	95.
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	1,23	7,7	27.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
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,			
	consolidated basis, or both:				
	Separate basis Consolidated basis X Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?			X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule C	).		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		<u>3a</u>		<u> </u>
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	000	

Form **990** (2023)

\*\* PUBLIC DISCLOSURE COPY \*\*

# **Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

# 2023

Employer identification number

04-3771598

Department of the Treas	ury
Internal Revenue Service	)

(Form 990)

Schedule B

Name of the organization

# FREE PRESS ACTION FUND

Organization type (check or	ne):
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 4) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

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

#### **General Rule**

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

#### **Special Rules**

Г

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

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

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

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

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

Name of organization

Employer identification number

04-3771598

#### FREE PRESS ACTION FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>100,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>85,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>975,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

08520412 712177 71448

Name of organization

Page 3 Employer identification number

04-3771598

# FREE PRESS ACTION FUND

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

		if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		—	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

15

2023.03030 FREE PRESS ACTION FUND

71448\_\_1

Name of o	rganization				Employer identification number
REE 1	PRESS ACTION FUND				04-3771598
Part III		a) through (e) and the following charitable, etc., contributions of \$1,	line entry. For or	panizations	at total more than \$1,000 for the year
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gif	t	(d) Desc	cription of how gift is held
		(e) Transfer	r of gift		
	Transferee's name, address,	and ZIP + 4	Re	elationship of tra	nsferor to transferee
(a) No. from					wintion of how sift is hold
Part I	(b) Purpose of gift	(c) Use of gif	·	(a) Desc	ription of how gift is held
		(e) Transfer	r of gift		
	Transferee's name, address,	and ZIP + 4	Re	elationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gif	t	(d) Desc	cription of how gift is held
		(e) Transfer	r of gift		
	Transferee's name, address,	and ZIP + 4	Re	elationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gif	t	(d) Desc	cription of how gift is held
		(e) Transfei	r of gift		
	Transferee's name, address,	and ZIP + 4	Re	elationship of tra	nsferor to transferee
23454 12-26	5-23				Schedule B (Form 990) (202

SC	HE	DU	JLE	С

Department of the Treasury

Internal Revenue Service

(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.

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:

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Nar						byer identification number
		RESS ACTION FUND				04-3771598
Pa	art I-A Complete if the or	ganization is exempt unde	r section 501(c) o	or is a section 52	?/ org	janization.
2	Provide a description of the organ Political campaign activity expend Volunteer hours for political camp	litures				
Pa	art I-B Complete if the or	ganization is exempt unde	r section 501(c)(3	3).		
1	Enter the amount of any excise ta	x incurred by the organization unde	r section 4955		\$	
2	Enter the amount of any excise ta	x incurred by organization manager				
3	If the organization incurred a section	ion 4955 tax, did it file Form 4720 fo	or this year?			Yes No
4a	a Was a correction made?					Yes No
	If "Yes," describe in Part IV.					(A)
	-	ganization is exempt unde				
1	Enter the amount directly expende	ed by the filing organization for sect	ion 527 exempt functi	ion activities	\$	
2	Enter the amount of the filing orga	nization's funds contributed to othe	er organizations for se	ction 527		
					\$	
3	Total exempt function expenditure	es. Add lines 1 and 2. Enter here an	d on Form 1120-POL,			
4		n 1120-POL for this year?				
5		employer identification number (EIN		-		
		ation listed, enter the amount paid				
	-	promptly and directly delivered to a f additional space is needed, provic			eparate	segregated fund or a
			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					
			1			

LHA 332041 11-06-23

OMB No. 1545-0047

2023 Open to Public Inspection

Schedule C (Form 990) 2023	FREE PRESS	ACTION FUND	1		771598 Page 2
Part II-A Complete if the org	anization is exe	empt under section	n 501(c)(3) and file	ed Form 5768 (ele	ection under
section 501(h)).	tion belonge to on a	filiated aroun (and list i	- Dort IV apph offiliated	arous mombor's som	
		ffiliated group (and list i	n Part IV each amiliateo	group member's nam	e, address, Elin,
expenses, and shar	, ,	and "limited control" pr	oviciono opply		
<b>B</b> Check if the filing organiza		and imited control pr	ovisions apply.	(a) Filing	(b) Affiliated group
	ts on Lobbying Exp litures" means amo	enditures ounts paid or incurred.	)	<b>(a)</b> Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ience public opinion	(grassroots lobbying)			
<b>b</b> Total lobbying expenditures to influ	ience a legislative b	ody (direct lobbying)			
c Total lobbying expenditures (add li	nes 1a and 1b)				
d Other exempt purpose expenditure	s				
e Total exempt purpose expenditure	s (add lines 1c and 1	d)			
f Lobbying nontaxable amount. Ente	r the amount from t	he following table in bot	h columns.		
If the amount on line 1e, column (a) o	r (b) is: The lo	bbying nontaxable an	nount is:		
not over \$500,000,	20% c	f the amount on line 1e			
over \$500,000 but not over \$1,000	,000, \$100,	000 plus 15% of the exc	cess over \$500,000.		
over \$1,000,000 but not over \$1,50	00,000, \$175,	000 plus 10% of the exc	cess over \$1,000,000.		
over \$1,500,000 but not over \$17,0	000,000, \$225,	000 plus 5% of the exce	ess over \$1,500,000.		
over \$17,000,000,	\$1,00	0,000.			
g Grassroots nontaxable amount (en	ter 25% of line 1f)				
h Subtract line 1g from line 1a. If zero	o or less, enter -0-				
i Subtract line 1f from line 1c. If zero	or less, enter -0-				
j If there is an amount other than zer	o on either line 1h c	r line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this	year?				Yes No
		veraging Period Under	• •		_
(Some organizations the		501(h) election do not arate instructions for li	•	of the five columns b	elow.
	•				
	Lobbying Exp	enditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2020	<b>(b)</b> 2021	(c) 2022	( <b>d)</b> 2023	(e) Total
2a Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2023

332042 11-06-23

# 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 each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
	o lobbying activity.	Yes	No	Amo	ount
1 a	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)?				
с	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	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?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
с	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?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5),	or sec	tion	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the		3		Х
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ' answered "Yes."				3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
	Total		2c		
3			3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions	<u></u>	5		
Par	t IV Supplemental Information				
Prov	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list): Part II-A.	lines 1 ar	nd 2 (see	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990) 2023

						OMB No. 1545-0047
		Supplementa				<b>NND 140: 1043-0047</b>
(Forr	n 990)	Complete if the orga Part IV, line 6, 7, 8, 9, 10				2023
	ment of the Treasury I Revenue Service	A Go to www.irs.gov/Form99	ttach to Form 990. 0 for instructions and	the latest information.		Open to Public Inspection
_	e of the organizatio					identification number
	-	FREE PRESS ACTION FUND 04				
Pa		tions Maintaining Donor Advise answered "Yes" on Form 990, Part IV, lin		Similar Funds or A	counts.	Complete if the
	organization	answered Tes On Form 350, Farthy, in	e o. (a) Donor advi	ised funds	(h) Funds and	d other accounts
1	Total number at en	d of year				
2		contributions to (during year)				
3		grants from (during year)				
4		end of year				
5		n inform all donors and donor advisors in v		held in donor advised fun	ds	
	are the organization	's property, subject to the organization's	exclusive legal control	?		Yes No
6	Did the organization	n inform all grantees, donors, and donor a	dvisors in writing that	grant funds can be used o	only	
	for charitable purpo	ses and not for the benefit of the donor o	r donor advisor, or for	any other purpose confer	ring	
De	impermissible priva				<u></u>	Yes No
Pa		tion Easements. Complete if the org			, line 7.	
1		ervation easements held by the organization	· · · ·	··		tant land avec
		of land for public use (for example, recrea natural habitat	tion or education)	Preservation of a hist	• •	
		of open space	L		med historie :	structure
2		hrough 2d if the organization held a qualif	ied conservation contr	ribution in the form of a co	nservation ea	esement on the last
-	day of the tax year.					at the End of the Tax Year
а	Total number of cor	nservation easements			2a	
b					2b	
с	Number of conservation	ation easements on a certified historic stru	ucture included on line	e 2a	2c	
d	Number of conservation	ation easements included on line 2c acqu	ired after July 25, 2006	6, and not		
	on a historic structu	re listed in the National Register			2d	
3	Number of conservative year	ation easements modified, transferred, rel	eased, extinguished, c	or terminated by the organ	ization during	the tax
4	Number of states w	here property subject to conservation eas	ement is located			
5	Does the organizati	on have a written policy regarding the per	iodic monitoring, inspe	ection, handling of		
	,	rcement of the conservation easements it				
6	Staff and volunteer	hours devoted to monitoring, inspecting,	nandling of violations,	and enforcing conservation	on easements	during the year
7	Amount of expense	s incurred in monitoring, inspecting, hand	lling of violations, and	enforcing conservation ea	sements duri	ng the year
-		<u> </u>				
8		ation easement reported on line 2d above			-	
0	and section 170(h)(					Yes No
9		e how the organization reports conservation include, if applicable, the text of the footn		-		the
		unting for conservation easements.	iote to the organization		at describes	
Pa	t III Organiza	tions Maintaining Collections of	Art, Historical T	reasures, or Other S	Similar Ass	ets.
	Complete if	the organization answered "Yes" on Form	990, Part IV, line 8.			
<b>1</b> a	If the organization e	elected, as permitted under FASB ASC 95	8, not to report in its re	evenue statement and bal	ance sheet w	orks
	of art, historical trea	asures, or other similar assets held for put	olic exhibition, education	on, or research in furthera	nce of public	
	service, provide in F	Part XIII the text of the footnote to its finar	ncial statements that d	lescribes these items.		
b	-	elected, as permitted under FASB ASC 95				
		ires, or other similar assets held for public	exhibition, education,	, or research in furtherance	e of public se	rvice,
		g amounts relating to these items.			<u>.</u>	
		ed on Form 990, Part VIII, line 1			•	
•	.,			r acceto for financial acin		
2		eceived or held works of art, historical trea hts required to be reported under FASB A			provide	
	ano renowing amoul	AND A SUBJECT OF A SUBJECT AND A	So oco rolating to the	00 A0110.		

	······································		 	 
á	Revenue included on Form 990, Part	VIII, line 1	 	 
t	Assets included in Form 990. Part X		 	 

b	Assets	included	l in	Forn	n 990	, Part	Х
			_				

 $\mbox{LHA}~$  For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-28-23

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2023.03030 FREE PRESS ACTION FUND

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Sche		ESS ACTION						04-37	71598	3 р	age <b>2</b>
Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	easures, o	r Other :	Similar	Assets	contir	nued)	
3	Using the organization's acquisition, accession	on, and other record	s, checl	c any of the f	following that	t make sig	nificant u	ise of its			
	collection items (check all that apply).										
а	Public exhibition	c	1 🗌 k	Loan or exc	hange progra	am					
b	Scholarly research	e	•	Other							
с	Preservation for future generations										
4	Provide a description of the organization's co	pllections and explain	n how th	ney further th	ne organizatio	on's exemp	ot purpos	se in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations of	of art, hi	storical treas	sures, or othe	er similar a	ssets				
	to be sold to raise funds rather than to be ma	aintained as part of t	he orga	nization's co	llection?				Yes		No
Par	t IV Escrow and Custodial Arrang	gements Comple	ete if the	organizatior	n answered "'	Yes" on Fo	orm 990,	Part IV, li	ne 9, or		
	reported an amount on Form 990, Par	rt X, line 21.									
1a	Is the organization an agent, trustee, custodi	an, or other intermed	diary for	contribution	ns or other as	sets not ir	ncluded		_		_
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	able:							
									Amoun	t	
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
	Did the organization include an amount on Fo						/?		Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Par	t V Endowment Funds Complete if								() [		h a ali
		(a) Current year	(d) I	Prior year	(c) Two yea	rs back (e	a) Three y	ears back	(e) Four	years	раск
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr		e (line 1	g, column (a)	)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С		%									
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.									
3a	Are there endowment funds not in the posse	ssion of the organiza	ation tha	it are held ar	nd administer	red for the			ſ		
	organization by:									Yes	No
	(i) Unrelated organizations?								3a(i)		
									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								3b		
	Describe in Part XIII the intended uses of thet VILand, Buildings, and Equipm		wment	unds.							
Fai	Complete if the organization answered		) Dart IV	/ lino 110 S	oo Eorm 000	Dort V liv	no 10				
								al			-
	Description of property	(a) Cost or c basis (investr		• •	t or other (other)	. ,	cumulate reciation	a	<b>(d)</b> Boo	k valu	e
10	Land		nong	02313		depi	Solution				
-	Land										
b	Buildings										
	Leasehold improvements										
d	Equipment										
	Other		V Ľ								0.
Total	. Add lines 1a through 1e. (Column (d) must e	quai ⊢orm 990, Part	<u>X, line 1</u>	<u>uc, column</u>	<u>(B))</u>				D (Carro		
								Schedule	rorn) ע	1 990)	2023

Schedule D (Form 990)	<u>2023</u>	FREE	PRESS	ACTION	FUND

### Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

#### Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990. Part X. line 13. col. (B))		

#### Part IX Other Assets

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

(a) Description	(b) Book value
(1) ADVANCE TO RELATED ORGANIZATION	175,000.
(2) ROU ASSET	53,076.
(3) UNDEPOSITED FUNDS	127.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	228,203.
Part X Other Liabilities	

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

1. (a) Description of liability		(b) Book value
(1) Federal income taxes		
(2) LEASE LIABILITY		61,852.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)	)	61,852.

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

Schedule D (Form 990) 2023

Sche	dule D (Form 990) 2023 FREE PRESS ACTION FUND		04-3	771598 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial State	ments With Revenu		<u> </u>
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.		
1	Total revenue, gains, and other support per audited financial statements			1,368,578.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	1,368,578.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines <b>4a</b> and <b>4b</b>			0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			1,368,578.
Pa	t XII Reconciliation of Expenses per Audited Financial Stat	ements With Expen	ises per Return	l
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.		
1	Total expenses and losses per audited financial statements		1	966,746.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
с	Other losses			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			966,746.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines <b>4a</b> and <b>4b</b>		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.	)		966,746.
Pa	rt XIII Supplemental Information			

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

PART X, LINE 2:

THE ORGANIZATION ACCOUNTS FOR INCOME TAXES IN ACCORDANCE WITH THE
ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC INCOME TAXES. THESE
PROVISIONS PROVIDE CONSISTENT GUIDANCE FOR THE ACCOUNTING FOR UNCERTAINTY
IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND
PRESCRIBE A THRESHOLD OF "MORE LIKELY THAN NOT" FOR RECOGNITION AND
DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX
RETURN. THE ORGANIZATION PERFORMED AN EVALUATION OF UNCERTAIN TAX
POSITIONS FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022, AND DETERMINED
THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL
STATEMENTS OR THAT MAY HAVE AN EFFECT ON ITS TAX-EXEMPT STATUS.

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#### EXPLANATION

THE ORGANIZATION ACCOUNTS FOR INCOME TAXES IN ACCORDANCE WITH THE ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC INCOME TAXES. THESE PROVISIONS PROVIDE CONSISTENT GUIDANCE FOR THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PRESCRIBE A THRESHOLD OF "MORE LIKELY THAN NOT" FOR RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE ORGANIZATION PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022. AND DETERMINED THAT THERE WERE NO MATTER THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE AN EFFECT ON ITS TAX EXEMPT STATUS.

Schedule D (Form 990) 2023

SC	HEDULE J	Compensation Information	1	OMB No. 1	1545-004	47
	(Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		0000			
•			20	Ľ٦	j –	
-		Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic
	rtment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nan	me of the organization Employer identi					mber
		FREE PRESS ACTION FUND	04-3	77159	8	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a	Check the appropri	ate 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 c	harter travel Housing allowance or residence for perso	nal use			
	Travel for com	panions Payments for business use of personal re	sidence			
		ation and gross-up payments Health or social club dues or initiation fee	S			
	Discretionary s	spending account Personal services (such as maid, chauffer	ur, chef)			
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or				
	reimbursement or p	rovision of all of the expenses described above? If "No," complete Part III to explain		1b		
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
_						
3		y, of the following the organization used to establish the compensation of the organization's				
		ctor. Check all that apply. Do not check any boxes for methods used by a related organizati	on to			
	·	tion of the CEO/Executive Director, but explain in Part III.				
	Compensation					
		ompensation consultant				
	X Form 990 of o	ther organizations	ommittee			
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re					
а	0	e payment or change-of-control payment?		4a		X
b		eive payment from a supplemental nonqualified retirement plan?				X
	-	eive payment from an equity-based compensation arrangement?				x
-	-	es 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501(c	)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5		n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n			
	contingent on the re					
а	The organization?			5a		X
		ation?				X
		r 5b, describe in Part III.				
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	on			
	contingent on the n	et earnings of:				
а	The organization?			6a		X
		ation?				X
		r 6b, describe in Part III.				
7		n Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
		es 5 and 6? If "Yes," describe in Part III		7		X
8	Were any amounts	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th	ne			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III			8		X
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in						
		53.4958-6(c)?				
For	Paperwork Reducti	on Act Notice, see the Instructions for Form 990.	Sched	ule J (Forn	n 990)	2023

LHA 332111 11-06-23

### 04-3771598

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	<b>(F)</b> 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) CRAG AARON	(i)	28,150.	0.	0.	1,405.	3,657.		0.
	(ii)	159,518.	0.	0.	7,962.	20,726.		0.
(2) JESSICA GONZALEZ	(i)	29,667.	0.	0.	1,405.	1,664.	32,736.	0.
	(ii)	168,114.	0.	0.	7,962.	9,431.	185,507.	0.
(3) KIMBERLY LONGEY	(i)	18,608.	0.	0.	893.	1,112.		0.
	(ii)	167,468.	0.	0.	8,036.	10,008.		0.
(4) MISTY PEREZ TRUEDSON	(i)	24,428.	0.	0.	1,251.	3,657.	29,336.	0.
	(ii)	138,428.	0.	0.	7,088.	20,726.		0.
(5) MATHEW WOOD	(i)	32,337.	0.	0.	1,654.	4,877.	38,868.	0.
VICE PRESIDENT OF POLICY & GENERAL C	(ii)	129,350.	0.	0.	6,617.	19,506.	155,473.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:

EACH POSITION AT FREE PRESS (A RELATED ORGANIZATION) HAS A PAY RANGE.

RANGES ARE DETERMINED AFTER REVIEW OF COMPARABILITY DATA, INCLUDING

COMPENSATION INFORMATION RECEIVED DIRECTLY FROM PEER ORGANIZATIONS,

COMPENSATION DATA FROM THE FEDERAL GOVERNMENT PAY SCALE, AND RESEARCH ON

NON-PROFIT COMPENSATION CONDUCTED BY GUIDESTAR, REGIONAL EMPLOYER

ASSOCIATIONS, AND JOB POSTINGS. MANAGEMENT INCLUDES COMPENSATION DATA FOR

ALL STAFF, INCLUDING THE CO-CEOS AND KEY EMPLOYEES, IN THE ANNUAL BUDGET

THAT IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS IN ADVANCE OF EACH

FISCAL YEAR. A DETAILED MEMO OUTLINING THE ORGANIZATION'S VALUES AROUND

COMPENSATION, THE HIGHEST AND LOWEST PAID EMPLOYEE AND HOW COMPENSATION

CHANGES WITHIN ANY FISCAL YEAR IS PROVIDED ALONG WITH THE BUDGET. THE BOARD

APPROVES THE BUDGET IN ADVANCE OF EACH FISCAL YEAR. COMPENSATION CHANGES

DURING ANY FISCAL YEAR ARE AT THE DISCRETION OF MANAGEMENT, AND MUST REMAIN

WITHIN THE BOARD APPROVED BUDGET. MID-YEAR CHANGES TO THE CEO'S

COMPENSATION, IF ANY, MUST BE REVIEWED AND APPROVED BY THE BOARD OF

DIRECTORS.

SCHEDULE O (Form 990)

Name of the organization

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.



04-3771598

FREE PRESS ACTION FUND

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

FREE PRESS ACTION FUND IS A NATIONAL, NONPARTISAN ORGANIZATION WORKING

TO REFORM THE MEDIA. FREE PRESS ACTION FUND EDUCATES ITS MEMBERS AND

THE GENERAL PUBLIC ON HOW A DIVERSE AND PUBLIC SERVICE-ORIENTED MEDIA

SYSTEM CAN STRENGTHEN AMERICAN DEMOCRACY.

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

FREE PRESS ACTION FUND FIGHTS FOR YOUR RIGHTS TO CONNECT AND

COMMUNICATE. WE FIGHT TO SAVE THE FREE AND OPEN INTERNET, CURB RUNAWAY

MEDIA CONSOLIDATION, PROTECT PRESS FREEDOM, AND PROMOTE DIGITAL CIVIL

RIGHTS. WE BELIEVE THAT CHANGE HAPPENS WHEN PEOPLE HAVE A REAL VOICE IN

THE POLITICAL PROCESS. TO THAT END, WE MOBILIZE OUR GROWING BASE OF

ACTIVISTS TO SIGN PETITIONS, MEET WITH THEIR ELECTED OFFICIALS, AND

ATTEND RALLIES AND TOWN-HALL MEETINGS, TO LOBBY IN SUPPORT OF POLICIES

THAT SERVE THEIR INTERESTS AND AGAINST THOSE THAT DON'T. WE ARE ACTIVE

IN ALL EFFORTS TO EXPOSE THE IMPACT OF PUBLIC POLICY ON THE MOST

VULNERABLE AMONG US, INCLUDING PEOPLE OF COLOR AND LOW INCOME

COMMUNITIES.

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

FUNDING CONTAINED IN THE 2021 INFRASTRUCTURE ACT, AND URGED CONGRESS TO

PASS THE AFFORDABLE CONNECTIVITY PROGRAM (ACP) EXTENSION ACT, WHICH

WOULD KEEP 23 MILLION US FAMILIES CONNECTED THROUGH THE END OF 2024.

URGED LAWMAKERS TO INVEST IN THE PROGRAM LONG TERM AND MAKE THE ACP

PERMANENT. WORKED WITH MORE THAN 170 SOCIAL-JUSTICE, ENVIRONMENTAL,

 FAITH, HEALTH AND LABOR GROUPS TO URGE KEY POLICYMAKERS TO IMPLEMENT

 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990) 2023

 LHA
 332211 11-14-23

LIFESAVING BANS ON UTILITY DISCONNECTIONS, RAMP UP RENEWA	
	BLE ENERGY AND
RESILIENT WATER SYSTEMS, AND PHASE OUT FOSSIL FUELS, THE	ROOT CAUSE OF
EXTREME HEAT.	
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHME	INTS:
IN THE POSSESSION OF INTERMEDIARY INTERNET SERVICE PROVID	ERS.
CELEBRATED A MAJOR LEGAL VICTORY WHEN THE SUPREME COURT F	EJECTED
ARGUMENTS THAT COULD HAVE INVALIDATED SECTION 230, A LAW	THAT SHIELDS
PLATFORMS FROM LIABILITY FOR CONTENT THEIR USERS CREATE A	ND POST.
ISSUED MAJOR REPORT: INSATIABLE: THE TECH INDUSTRY'S QUES	T FOR ALL OUR
DATA, THAT LOOKS AT HOW THE GROWTH OF NEW SOCIAL-MEDIA PI	ATFORMS IS
HIGHLIGHTING THE NEED FOR MORE ROBUST CONSUMER PROTECTION	IS TO SAFEGUARD
DATA PRIVACY IN THE UNITED STATES. HOSTED A CAPITOL HILL	BRIEFING THAT
FOCUSED ON THE HARMS THAT PRIVACY VIOLATIONS, DIGITAL REE	LINING, HATE
SPEECH AND DISINFORMATION POSE FOR PEOPLE OF COLOR AND OT	HERS WHO
EXPERIENCE ONLINE DISCRIMINATION. ORGANIZED A DELEGATION	OF
ORGANIZATIONS TO MEET WITH SIX CONGRESSIONAL OFFICES IN W	ASHINGTON AND
INVITED ALLIES TO DISCUSS ISSUES RELATED TO SOCIAL-MEDIA	PLATFORMS,
INCLUDING RAMPANT DISINFORMATION, LANGUAGE DISPARITIES IN	CONTENT
MODERATION, GOVERNMENT SURVEILLANCE REFORM, THE CIVIL-RIG	HTS
IMPLICATIONS OF AI AND THE NEED FOR DATA-PRIVACY LEGISLAT	'ION.
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHME	NTS:

TESTIFIED BEFORE THE CALIFORNIA SENATE JUDICIARY COMMITTEE TO OPPOSE

PASSAGE OF THE CJPA WHICH WOULD REWARD THE MEDIA CONGLOMERATES AND

HEDGE FUNDS THAT HAVE DESTROYED LOCAL NEWS AND MAKE IT HARDER FOR SMALL

COMMUNITY-CENTERED NEWSROOMS TO SURVIVE. URGED LAWMAKERS TO CONSIDER

BETTER OPTIONS SUCH AS A PUBLICLY FUNDED NONPROFIT MODELED ON THE NEW
332212 11-14-23
Schedule O (Form 990) 2023
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FREE PRESS ACTION FUND	04-3771598
JERSEY CIVIC INFORMATION CONSORTIUM WHICH W	·
THE CREATION OF A NEW \$25-MILLION STATE-FUN	NDED PROGRAM AT THE
UNIVERSITY OF CALIFORNIA, BERKELEY DESIGNE	ED TO STRENGTHEN LOCAL
REPORTING IN UNDERSERVED AND UNDERREPRESENT	TED AREAS ACROSS THE STATE.
SUPPORTED THE CALIFORNIA REPARATIONS TASK F	FORCE RECOMMENDATIONS THAT
THE STATE CREATE A BLACK MEDIA REPARATIVE F	FUND. THIS RECOMMENDATION
DREW ON FREE PRESS ACTION RESEARCH AND ADVO	CACY. THIS TASK FORCE'S
HISTORIC REPORT IS THE FIRST STATE-LEVEL ST	TUDY OF REPARATIONS.
FORM 990, PART III, LINE 4D, OTHER PROGRAM	SERVICES:
FREE PRESS ACTION FUND CONDUCTS EDUCATION,	ORGANIZING AND MOBILIZING
EFFORTS TO SUPPORT OUR MEMBERS TO ADVOCATE	FOR BETTER MEDIA, OPEN
TECHNOLOGY AND A HEALTHIER DEMOCRACY. AREAS	5 OF FOCUS INCLUDE NETWORK
NEUTRALITY, AFFORDABLE CONNECTIONS, ONLINE	PRIVACY, CORPORATE AND
GOVERNMENT SURVEILLANCE, JOURNALISM, PUBLIC	C MEDIA, MEDIA CONSOLIDATION
AND MEDIA DIVERSITY, AND GOVERNMENT TRANSPA	ARENCY AND ACCOUNTABILITY. IN
2023 FREE PRESS ACTION CONTINUED TO BUILD A	A STRONG CITIZEN MOVEMENT FOR
BETTER MEDIA IN THE U.S BY PROVIDING EDUCAT	TION, RESOURCES AND
NETWORKING OPPORTUNITIES FOR OUR MEMBERS. C	OUR MEMBERS ACTED MORE THAN
250,000 TIMES TO SIGN PETITIONS AND MAKE PH	HONE CALLS TO THEIR LOCAL,
STATE AND FEDERAL ELECTED LEADERS. FREE PF	RESS ACTION FILED PUBLIC
COMMENTS, PARTICIPATED IN SEVERAL FEDERAL C	COMMUNICATIONS COMMISSION AND
FEDERAL TRADE COMMISSION PROCEEDINGS AND PU	JBLISHED RECOMMENDED POLICIES
RELATED TO INTERNET, JOURNALISM, PUBLIC MEI	DIA AND DISINFORMATION. WE
GARNERED 700 HITS IN OUTLETS INCLUDING THE	ASSOCIATED PRESS, CNN, THE
GUARDIAN, NBC, THE NEW YORK TIMES, NPR, REU	JTERS, TIME AND THE
WASHINGTON POST. WE SECURED FINANCIAL SUPP	PORT FROM 1,417 UNIQUE
DONORS. TOTAL PROGRAM EXPENDITURES ARE DET	TAILED IN THE THREE CORE

Name of the organization

FREE PRESS ACTION FUND

Employer identification number 04 - 3771598

PROGRAM AREAS ABOVE:

FORM 990, PART VI, SECTION A, LINE 8B:

NO COMMITTEE HAS AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

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

GENERALLY, AN ELECTRONIC COPY OF THE FORM 990 IS DISTRIBUTED TO ALL MEMBERS OF THE AUDIT OVERSIGHT COMMITTEE (CHAIR, TREASURER, AND ASSISTANT TREASURER) WHICH REVIEWS IT AND THE ORGANIZATION'S FINANCIAL STATEMENTS DURING 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 TO DISCUSS THE FINANCIAL MANAGEMENT PRACTICES OF THE ORGANIZATION. THIS IS AN OPTIONAL MEETING DESIGNED TO ALLOW THE GOVERNING BODY DIRECT ACCESS TO THE CPA.

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 ACTION FUND HAS A PAY RANGE. RANGES ARE

DETERMINED AFTER REVIEW OF COMPARABILITY DATA, INCLUDING COMPENSATION
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Schedule O (Form 990) 2023
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Schedule O (Form 990) 2023	Page <b>2</b>
Name of the organization FREE PRESS ACTION FUND	Employer identification number $04 - 3771598$
INFORMATION RECEIVED DIRECTLY FROM PEER ORGANIZATIONS, COM	PENSATION DATA
FROM THE FEDERAL GOVERNMENT PAY SCALE, AND RESEARCH ON NON	-PROFIT
COMPENSATION CONDUCTED BY GUIDESTAR, REGIONAL EMPLOYER ASS	OCIATIONS, AND
JOB POSTINGS. MANAGEMENT INCLUDES COMPENSATION DATA FOR AL	L STAFF,
INCLUDING THE EXECUTIVE DIRECTOR AND KEY EMPLOYEES, IN THE	ANNUAL BUDGET
THAT IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS IN	ADVANCE OF EACH
FISCAL YEAR. A DETAILED MEMO OUTLINING THE ORGANIZATION'S	VALUES AROUND
COMPENSATION, THE HIGHEST AND LOWEST PAID EMPLOYEE AND HOW	COMPENSATION
CHANGES WITHIN ANY FISCAL YEAR IS PROVIDED ALONG WITH THE	BUDGET. THE BOARD
APPROVES THE BUDGET IN ADVANCE OF EACH FISCAL YEAR. COMPEN	SATION CHANGES
DURING ANY FISCAL YEAR ARE AT THE DISCRETION OF MANAGEMENT	, AND MUST REMAIN
WITHIN THE BOARD APPROVED BUDGET. MID-YEAR CHANGES TO THE	CEO'S
COMPENSATION, IF ANY MUST BE REVIEWED AND APPROVED BY THE	BOARD OF
DIRECTORS.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AL, AK, AR, CA, CT, FL, GA, IL, KS, KY, ME, MD, MA, MN, MS, NC, NH, NJ, NY, O	K, OR, PA, RI, SC, TN
UT, VA, VT, WA, WV, WI, HI	
FORM 990, PART VI, SECTION C, LINE 19:	
FREE PRESS ACTION FUND WILL PROVIDE COPIES OF GOVERNING DO	CUMENTS, CONFLICT
OF INTEREST POLICY AND FINANCIAL STATEMENTS UPON REQUEST A	ND WITHIN 10
BUSINESS DAYS OF ANY REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
OTHER PROFESSIONAL SERVICES:	
PROGRAM SERVICE EXPENSES	102,558.
MANAGEMENT AND GENERAL EXPENSES	7,649.
332212 11-14-23	Schedule O (Form 990) 2023

08520412 712177 71448

ame of the organization FREE PRESS ACTION FUND	Employer identification numb 04-3771598
UNDRAISING EXPENSES	13,467.
OTAL EXPENSES	123,674.
OTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	123,674.
ORM 990, PART XII, LINE 2C:	
HIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	

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SCHEDULE R	ł
(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.

OMB No. 1545-0047

2023 Open to Public Inspection

Employer identification number 04 - 3771598

Department of the Treasury Internal Revenue Service

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

Name of the organization

#### FREE PRESS ACTION FUND

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

<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	<b>(f)</b> Direct controlling entity

# Part II 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.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	<b>(e)</b> Public charity status (if section	<b>(f)</b> Direct controlling entity	contr	<b>g)</b> 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
FREE PRESS - 41-2106721							
1025 CONNECTICUT AVE NW	RESEARCH AND EDUCATION ON						
WASHINGTON, DC 20036	MEDIA REFORM	DISTRICT OF COLUMBIA	501(C)(3)	509(A)(1)	N/A		х

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

Schedule R (Form 990) 2023

## Schedule R (Form 990) 2023 FREE PRESS ACTION FUND

Part III 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.

organizations treated as a pa	i i i i i i i i i i i i i i i i i i i			1								
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets		ortionate itions?	amount in box	manag partn	l or Percent <sup>ing</sup> owners <u>r?</u>	age hip
		country)		sections 512-514)			Yes	No		Yes	lo	
	-											
	-											
										+		
	-											
	-											
	1											
	1											
	4											

Part IV 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.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(C) Legal domicile (state or foreign	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
		country)				400010		Yes	No

## Schedule R (Form 990) 2023 FREE PRESS ACTION FUND

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

ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Ye	s N
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?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		2
<b>b</b> Gift, grant, or capital contribution to related organization(s)			
c Gift, grant, or capital contribution from related organization(s)			
d Loans or loan guarantees to or for related organization(s)			
e Loans or loan guarantees by related organization(s)			
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)	1g		
h Purchase of assets from related organization(s)			
Exchange of assets with related organization(s)			
Lease of facilities, equipment, or other assets to related organization(s)			_
Lease of facilities, equipment, or other assets from related organization(s)	1k		
Performance of services or membership or fundraising solicitations for related organization(s)			
n Performance of services or membership or fundraising solicitations by related organization(s)	-		
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	:
Sharing of paid employees with related organization(s)		X	:
Reimbursement paid to related organization(s) for expenses		X	:
Reimbursement paid by related organization(s) for expenses			_
Other transfer of cash or property to related organization(s)			
s Other transfer of cash or property from related organization(s)			

<b>(a)</b> Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1) FREE PRESS	P	762,240.	ACTUAL REIMBURSEMENTS PAID
(2) FREE PRESS	N	352,376.	ACTUAL COSTS, TIME SHEETS
(3) FREE PRESS	0	469,096.	ACTUAL COSTS, TIME SHEETS
<u>(4)</u>			
(5)			
<u>(6)</u>			

### Schedule R (Form 990) 2023 FREE PRESS ACTION FUND

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.

(a)	(b)	(c)	(d)	1.	~	(f)	(g)	(۲		(i)	(j)	(k)
(a) Name, address, and EIN	Primary activity	Legal domicile	Predominant income	Are	<b>∋)</b> e all				•/ opor-	Code V-LIBI	(J) Genera	
of entity	T Timary activity	(state or foreign	(related, unrelated,	partne 501( org	c)(3)	total	end-of-year	Dispr tior allocat	iate	amount in box 20	manag	
,		country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Yes				Yes	No		Yes N	
				165	NU			165	NU	(1011111000)	Test	

Schedule R (Form 990) 2023

#### FREE PRESS ACTION FUND

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Schedule R (Form 990) 2023