- orm 9	90	Under section 501(c), 527, or 4	anization Exempt 947(a)(1) of the Internal Rever			OMB No. 1545-0047
Department of	f the Treasury	Do not enter socia	al security numbers on this for	rm as it may b	e made public.	Open to Public
Internal Reven	And and a state of the state of		ov/Form990 for instructions	and the latest	information.	Inspection
		lar year, or tax year beginning	а	nd ending	T	
B Check if applicable	C Name o	f organization			D Employer identific	cation number
Addres	PRO	PUBLICA, INC.				
Name change	Doing b	usiness as			14-2	007220
Initial return Final return/	155	and street (or P.O. box if mail is not AVE OF THE AMERIC		Room/suite 13 FL	E Telephone number 212-	514-5250
termin- ated Amend	City or t	own, state or province, country, ar	nd ZIP or foreign postal code		G Gross receipts \$	27,237,842
return Applica	INDW	YORK, NY 10013			H(a) Is this a group re	
tion pendin		nd address of principal officer: RI AS C ABOVE	CHARD J. TOFEL		for subordinates H(b) Are all subordinates in	
Tax-exe		X 501(c)(3) 501(c) (	)    (insert no.)	(1) or 527	7	list. (see instructions)
		PROPUBLICA.ORG			H(c) Group exemption	
		X Corporation Trust	Association Other	L Year	in the second	State of legal domicile: D
	Summary	A CONTRACT OF				
0 1 1		e the organization's mission or mo				
- 15		LS OF THE PUBLIC		HEDULE C		the second s
2 0		x  if the organization disc				
3 1		ting members of the governing boo				1
4		lependent voting members of the g				14
		of individuals employed in calenda				14
6 1 7 2 1		of volunteers (estimate if necessar) d business revenue from Part VIII,	y)	*****	7a	63,283
A P		business taxable income from For				131,740
	ter annoiatea				Prior Year	Current Year
. 8 0	Contributions	and grants (Part VIII, line 1h)			43,063,123.	25,576,127
					110,000.	302,000
10 1	nvestment inc	come (Part VIII, column (A), lines 3,			51,451.	288,145
11 0		(Part VIII, column (A), lines 5, 6d, 8			349,464.	519,661
12 T	otal revenue	add lines 8 through 11 (must equ	al Part VIII, column (A), line 12)		43,574,038.	26,685,933
13 0	Brants and sin	nilar amounts paid (Part IX, column	n (A), lines 1-3)		52,825.	455,470
14 E	Benefits paid t	o or for members (Part IX, column	(A), line 4)		0.	0
n 15 S		compensation, employee benefits			13,387,814.	17,360,510
2 16a F		Indraising fees (Part IX, column (A)			0.	6,225
K I		ng expenses (Part IX, column (D), I		Provinues	4 050 160	6 000 056
		s (Part IX, column (A), lines 11a-11			4,850,162.	6,282,256
		s. Add lines 13-17 (must equal Part			18,290,801. 25,283,237.	24,104,461
19 F	evenue less e	expenses. Subtract line 18 from lin	<u>e 12</u>	and the second		2,581,472
20 T 21 T 22 N	otal ocosta (D	art V line 16)		1	inning of Current Year 38,070,942.	End of Year 40,988,939
20 T 21 T		art X, line 16) (Part X, line 26)			746,162.	1,094,094
22 N		und balances. Subtract line 21 from	m line 20		37,324,780.	39,894,845
art II	Signature			maan I		
and a state of the		declare that I have examined this retur	n, including accompanying schedu	lles and stateme	nts, and to the best of my l	knowledge and belief, it is
		Declaration of preparer (other than offi				· · · · · · · · · · · · · · · · · · ·
	and the second second	2			8/8/1	9
yn 📙	Signature	of officer			Date	
ere		ARD J. TOFEL, PRES	SIDENT			
	Type or pr	rint name and title				
1	Print/Type prepa	arer's name	Preparer's signature	D	ate Cneck	PTIN
			1			

5.4

	Print/Type preparer's name	Preparer's signature	Date		
Paid	GARRETT M. HIGGINS	GARRETT M.	HIGGINS 08/06	/19 self-employed P00543	209
Preparer	Firm's name PKF O'CONNOR	DAVIES, LLP		Firm's EIN > 27-1728	945
Use Only	Firm's address 🖕 665 FIF'TH AVE	NUE			
	NEW YORK, NY	10022		Phone no. 212-286-26	00
May the If	RS discuss this return with the preparer show	vn above? (see instructions)		X Yes	No
832001 12-3	1-18 LHA For Paperwork Reduction Ac	t Notice, see the separate i	nstructions.	Form 9	90 (2018)

12 01 10					a a a a a a a a a a a a a a a a a a a		
SEE	SCHEDULE	0	FOR	ORGANIZATION	MISSION	STATEMENT	CONTINUATION

Form **990** (2018)

76		Form <b>990</b> (2018)
4e	20 224 825	
4d	Other program services (Describe in Schedule O.)     (Expenses \$ including grants of \$ ) (Revenue \$	ì
	Carrier Contraction and Contraction and Contraction Contra	
4c	C (Code:) (Expenses \$) (	Revenue \$ )
		and the second
4b	b (Code:) (Expenses \$) (including grants of \$) (	Revenue \$)
		utorenetitations and the second s
		e en
		Served States and Server and S
		renderson and an and an and a second s
	INVESTIGATIVE JOURNALISM IN THE PUBLIC INTEREST - SEE DETAILS	SCHEDULE O FOR
4a		
_	revenue, if any, for each program service reported.	
4	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services	as measured by expenses
3		es? Yes X No
	If "Yes," describe these new services on Schedule O.	
	prior Form 990 or 990-EZ?	
2		e
	INTEREST. OUR WORK FOCUSES EXCLUSIVELY ON TRULY IMPORT "SCHEDULE O" FOR CONTINUATION.	ANT STORIES. SEE
	NEWSROOM THAT PRODUCES INVESTIGATIVE JOURNALISM IN THE	
	PRO PUBLICA IS AN INDEPENDENT, NON-PROFIT, PULITZER PR	
1		
Lee	Check if Schedule O contains a response or note to any line in this Part III	X
	Part III   Statement of Program Service Accomplishments	14-2007220 Page 2
For	PRO PUBLICA, INC.	14-2007220 Page 2

Form 990 (2			PUBLICA,	INC.
Part IV	Checklist of	Require	d Schedules	

14-	200	7220	Page 3

Lancour			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		1	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	-	X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 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			1
	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,			
	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			
	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?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
	as applicable.	226424	New York	19296
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // "Yes," complete Schedule D,		17.1	
	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			
	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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	-	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes, " complete			
	Schedule D, Parts XI and XII	12a	X	-
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?	1.0		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		3	
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
	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			v
	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			v
	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,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
	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,"			v
	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		77	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	

Form 990 (2018)

Form	990	(201	я
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Form 990 (2018) PRO PUBLICA, INC. Part IV Checklist of Required Schedules (continued)

_			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			1.0
	any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	1	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			1
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	1		
	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 Schedule L, Part IV	2150pt		<b>教室</b>
	instructions for applicable filing thresholds, conditions, and exceptions):		30%	
а	A current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	285		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
Ū	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
00	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
<b>.</b>	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			
52	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	UL		
00	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			
34	Part V. line 1	34		x
25-	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			
'n	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		-
00		36		x
27	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
37	• • • •	27		x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		-
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	x	
Par	Note. All Form 990 filers are required to complete Schedule O tV Statements Regarding Other IRS Filings and Tax Compliance	38	42	
1 41	Charle is Cohedula O contains a reporter to smultipe in this Part V			

	*******************		***************************************	*******	***.**	_
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	187			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			Same and the second sec
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	le gaming	理學	1988 A.	的認知
	(gambling) winnings to prize winners?	COLUMN	ama a ponta a sure a	1c		

	n 990 (2018) PRO PUBLICA, INC. 14-2007	220	F	aqe 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
<b>2</b> a	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 140			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	<del>6</del> a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	1935		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
þ	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:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
þ	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	19936		201000
	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	at the second		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		·
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15	in a start	<u>X</u>
	If "Yes," see instructions and file Form 4720, Schedule N.	<u> (1965)</u>		
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	si és és d	X
	if "Yes," complete Form 4720, Schedule O.		000 /	

Form 990 (2018)

Form	n 990 (2018) PRO PUBLICA, INC.	4-2007220	) F	Page 6
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b belo	w. and for a "No"	respon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructio	ns.		
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	14		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
þ	Enter the number of voting members included in line 1a, above, who are independent	13		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any othe	r 🔣		
	officer, director, trustee, or key employee?			X
3	Did the organization delegate control over management duties customarily performed by or under the direct superv			1
	of officers, directors, or trustees, or key employees to a management company or other person?		.l	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			X
6	Did the organization have members or stockholders?			X
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?	<u>7a</u>		X
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	<u> </u>	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the followin			
a	The governing body?	<u>8a</u>	X	<u> </u>
ь	Each committee with authority to act on behalf of the governing body?	<u>8b</u>	X	ļ
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		ĺ	
Sec	organization's mailing address? If "Yes." provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		T	1
40-		<u></u>	Yes	No
iva k	Did the organization have local chapters, branches, or affiliates?	<u>10a</u>		X
U	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes?	1		
119	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the		x	l
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ne form? 11a		alia inte
	Did the organization have a written conflict of interest policy? If "No," go to line 13	10-	X	
h	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
Ū	in Schedule O how this was done	12c	x	:
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?		X	
	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		X	
	If "Yes" to line 15a or 15b, describe the process in 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		X
	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	ion C. Disclosure	and determined to the second secon		
17	List the states with which a copy of this Form 990 is required to be filed <b>SEE</b> SCHEDULE O			
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A if applicable), 990, and 990 T (Section	n 501(c)(3)s only) :	availab	le
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest		al	
	statements available to the public during the tax year.	-		
	State the name, address, and telephone number of the person who possesses the organization's books and records			
	STEPHANIE N. LITTLE, VP, FINANCE & ADMINISTRATION - 212-514	1-5250		
	155 AVE OF THE AMERICAS, NO. 13 FL, NEW YORK, NY 10013			

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	
	Employees, and Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	~~~
Section A	Officers Directors Tructoes Key Employees and Highest Compared Statistics	-

ectors, Trustees, Key Employees, and Highest Compensated Employees

PRO PUBLICA, INC.

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.

Form 990 (2018)

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099 MISC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

Name and Tile         Average hours ap weak is any below         Description (weak below         Description (weak below         Reportable (weak below         Reportable (weak below         Reportable (weak below         Estimated (weak below         Samuel (weak below         Estimated (weak below         Samuel (weak below         Estimated (weak below         Samuel (weak below         Reportable (weak below	(A)	(B)	Τ	(C)		(D)	(E)	(F)			
bots per veck         bots per veck         bots per veck         compensation is bots and inform from from from the decision and related organizations (W2/1099-MISC)         compensation organizations (W2/1099-MISC)         amount of other organizations (W2/1099-MISC)           (1) PAUL SAGAM         2.00         X         X         0.         0.         0.           (1) PAUL SAGAM         2.00         X         X         0.         0.         0.           (1) PAUL SAGAM         2.00         X         X         0.         0.         0.           (1) PAUL SAGAM         2.00         X         X         0.         0.         0.           (1) PAUL SAGAM         2.00         X         X         0.         0.         0.           (1) PAUL SAGAM         2.00         X         X         0.         0.         0.           (1) PAUL SAGAM         1.000         X         X         0.         0.         0.           DIRECTOR         1.000	Name and Title	1		Position		1					
Image: Second		-	bo	box, unless person is both an			•				
(1) PAUL SAGAN       2.00       X       X       0.       0.       0.         (2) HERBERT M. SANDLER       3.00       X       X       0.       0.       0.         (3) FAUL E. STETERE       30.00       X       X       0.       0.       0.       0.         (4) DANIELLE ALLEN       1.00       X       X       47,174.       0.       6,283.         (4) DANIELLE ALLEN       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         (5) MARK COLODNY       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.       0.         (6) ANGELA FILO       1.00       X       0.		week	-			from	from related	other			
(1) PAUL SAGAN       2.00       X       X       0.       0.       0.         (2) HERBERT M. SANDLER       3.00       X       X       0.       0.       0.         (3) FAUL E. STETERE       30.00       X       X       0.       0.       0.       0.         (4) DANIELLE ALLEN       1.00       X       X       47,174.       0.       6,283.         (4) DANIELLE ALLEN       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         (5) MARK COLODNY       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.       0.         (6) ANGELA FILO       1.00       X       0.			ector							•	compensation
(1) PAUL SAGAN       2.00       X       X       0.       0.       0.         (2) HERBERT M. SANDLER       3.00       X       X       0.       0.       0.         (3) FAUL E. STETERE       30.00       X       X       0.       0.       0.       0.         (4) DANIELLE ALLEN       1.00       X       X       47,174.       0.       6,283.         (4) DANIELLE ALLEN       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         (5) MARK COLODNY       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.       0.         (6) ANGELA FILO       1.00       X       0.			er dir	به		İ			organization	(W·2/1099-MISC)	from the
(1) PAUL SAGAN       2.00       X       X       0.       0.       0.         (2) HERBERT M. SANDLER       3.00       X       X       0.       0.       0.         (3) FAUL E. STETERE       30.00       X       X       0.       0.       0.       0.         (4) DANIELLE ALLEN       1.00       X       X       47,174.       0.       6,283.         (4) DANIELLE ALLEN       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         (5) MARK COLODNY       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.       0.         (6) ANGELA FILO       1.00       X       0.			ustee	truste		92	suad		(W·2/1099·MISC)		-
(1) PAUL SAGAN       2.00       X       X       0.       0.       0.         (2) HERBERT M. SANDLER       3.00       X       X       0.       0.       0.         (3) FAUL E. STETERE       30.00       X       X       0.       0.       0.       0.         (4) DANIELLE ALLEN       1.00       X       X       47,174.       0.       6,283.         (4) DANIELLE ALLEN       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         (5) MARK COLODNY       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.       0.         (6) ANGELA FILO       1.00       X       0.		1 2	ual tri	ional		ploye	t com				
(1) PAUL SAGAN       2.00       X       X       0.       0.       0.         (2) HERBERT M. SANDLER       3.00       X       X       0.       0.       0.         (3) FAUL E. STETERE       30.00       X       X       0.       0.       0.       0.         (4) DANIELLE ALLEN       1.00       X       X       47,174.       0.       6,283.         (4) DANIELLE ALLEN       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         (5) MARK COLODNY       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.       0.         (6) ANGELA FILO       1.00       X       0.			bivib	slitut	fficer	ey en	ighes	- Hau			organizations
CHAIRPAN         X         X         X         X         0.         0.         0.           (2)         HERBERT M. SANDLER         3.000         X         X         0.         0.         0.         0.           (3)         FAUL E. STEIGER         30.00         X         X         0.         0.         0.           (3)         FAUL E. STEIGER         30.00         X         X         47,174.         0.         6,283.           (4)         DARLEDE ALLEN         1.00         X         0.         0.         0.         0.           DIRECTOR         1.00         X         0.         0.         0.         0.         0.           (5)         MARK COLONY         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           OIRECTOR         X         0.         0.         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           (10)         ROBERT C.S. MONKS         1.000         X         0.	(1) PAUL SAGAN				<u> </u>	- <del>x</del>	τa	<u> </u>			
(2)         HERBERT M. SANDLER         3.00         X         X         X         X         0.         0.         0.           FOUNDING CHAIRMAN         30.00         X         X         X         0.	CHAIRMAN		1 x		x	1			0.	0.	٥.
FOUNDING CHAIRMAN         X         X         X         X         0.         0.         0.           (3) PAUL E. STEIGER         30.00         X         X         X         47,174.         0.         6,283.           EXECUTIVE CHAIRMAN         X         X         X         0.         0.         6,283.           DIRECTOR         X         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           (5) MARK COLODNY         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           DIRECTOR         X         0.	(2) HERBERT M. SANDLER	3.00		<u>†</u>			┢──			· ·	V•
(3) PAUL E. STEIGER       30.00       X       X       47,174.       0.       6,283.         (4) DANIELE ALLEN       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (6) ANGELA FILO       1.00       X       0.       0.       0.       0.         (7) HENRY LOUIS GATES, JR.       1.00       X       0.       0.       0.       0.         (8) CLAIRE HOFFMAN       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (19) KATTE NCGRATH       1.00       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0. </td <td>FOUNDING CHAIRMAN</td> <td></td> <td>x</td> <td></td> <td>x</td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>	FOUNDING CHAIRMAN		x		x				0.	0.	0.
EXECUTIVE CHAIRMAN         X         X         X         47,174.         0.         6,283.           (4) DANIELLE ALEN         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           G1         ANGELA FILO         1.00         X         0.         0.         0.         0.           G1         ANGELA FILO         1.00         X         0. <td0< td=""><td>(3) PAUL E. STEIGER</td><td>30.00</td><td></td><td>†</td><td>†=</td><td><u> </u></td><td>1</td><td></td><td></td><td></td><td><u> </u></td></td0<>	(3) PAUL E. STEIGER	30.00		†	†=	<u> </u>	1				<u> </u>
(4) DANIELLE ALLEN       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (5) MARK COLODNY       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (6) ANGELA FILO       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (7) HENRY LOUIS GATES, JR.       1.00       X       0.       0.       0.         (8) CLAIRE HOFFMAN       1.00       X       0.       0.       0.       0.         (9) KATIE MCGRATH       1.00       X       0.       0.       0.       0.       0.         (10) ROBERT C.S. MONKS       1.00       X       0.       0.       0.       0.         (11) ROBALD OLSON       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (12) JAMES STONE       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X<	EXECUTIVE CHAIRMAN		x		x				47.174.	0.	6.283.
DIRECTOR         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           (11) RONALD OLS	(4) DANIELLE ALLEN	1.00	†=-	1	+=-						
(5) MARK COLODNY       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (6) ANGELA FILO       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (7) HENRY LOUIS GATES, JR.       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       <	DIRECTOR		x						0.	0.	Ο.
DIRECTOR         X         0.         0.         0.         0.           (6) ANGELA FILO         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           (7) HENRY LOUIS GATES, JR.         1.00         X         0.         0.         0.         0.           (8) CLAIRE HOFFMAN         1.00         X         0.         0.         0.         0.           (9) KATIE MCGRATH         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           U10 ROBERT C.S. MONKS         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           (11) ROBERT C.S. MONKS         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           (11) ROBAD GISON         1.00         X         0.         0	(5) MARK COLODNY	1.00									
(6) ANGELA FILO       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (7) HENRY LOUIS GATES, JR.       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (8) CLAIRE HOFFMAN       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (10) ROBERT C.S. MONKS       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.       0.       0.         (11) RONALD OLSON       1.00       X       0. <t< td=""><td>DIRECTOR</td><td></td><td>x</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>	DIRECTOR		x						0.	0.	0.
(7) HENRY LOUIS GATES, JR.       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (8) CLAIRE HOFFMAN       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (10) ROBERT C.S. MONKS       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0. <td>(6) ANGELA FILO</td> <td>1.00</td> <td></td> <td>1</td> <td></td> <td></td> <td> </td> <td></td> <td></td> <td></td> <td><u> </u></td>	(6) ANGELA FILO	1.00		1							<u> </u>
(7) HENRY LOUIS GATES, JR.       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (8) CLAIRE HOFFMAN       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (10) ROBERT C.S. MONKS       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0. <td>DIRECTOR</td> <td></td> <td>x</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>	DIRECTOR		x						0.	0.	0.
(8) CLAIRE HOFFMAN       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (9) KATTE MCGRATH       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (10) ROBERT C.S. MONKS       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (11) ROBALD OLSON       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (12) JAMES STONE       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (13) S. DONALD SUSSMAN       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (14) KAT TAYLOR       1.00       X       0.       0.       0.       0.         DIRECTOR       X       40.00       X       30.,417.       0.       0.       0.         (1	(7) HENRY LOUIS GATES, JR.	1.00		1				····			
(8) CLAIRE HOFFMAN       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (9) KATTE MCGRATH       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (10) ROBERT C.S. MONKS       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (11) ROBALD OLSON       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (12) JAMES STONE       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (13) S. DONALD SUSSMAN       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (14) KAT TAYLOR       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.00       0.       0.       0.       0.       0.         OC-CEO,	DIRECTOR		х						0.	0.	0.
(9)       KATIE MCGRATH       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (10)       ROBERT C.S. MONKS       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (11)       RONALD OLSON       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (12)       JAMES STONE       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (13)       S. DONALD SUSSMAN       1.00       X       0. <td>(8) CLAIRE HOFFMAN</td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(8) CLAIRE HOFFMAN	1.00									
(9) KATIE MCGRATH       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (10) ROBERT C.S. MONKS       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (11) RONALD OLSON       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (12) JAMES STONE       1.00       X       0.       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.	DIRECTOR		х						0.	0.	0.
(10) ROBERT C.S. MONKS       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (11) RONALD OLSON       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (12) JAMES STONE       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (13) S. DONALD SUSSMAN       1.00       X       0.	(9) KATIE MCGRATH	1.00									
(10) ROBERT C.S. MONKS       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (11) RONALD OLSON       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (12) JAMES STONE       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (13) S. DONALD SUSSMAN       1.00       X       0.	DIRECTOR		х						0.	0.	0.
(11) RONALD OLSON       1.00       X       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         (12) JAMES STONE       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (13) S. DONALD SUSSMAN       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (14) KAT TAYLOR       1.00       X       0.       0.       0.       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       14.014.       0.       14.014.       0.       0.       14.014.       0.	(10) ROBERT C.S. MONKS	1.00		Γ							
(11) RONALD OLSON       1.00       X       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         (12) JAMES STONE       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (13) S. DONALD SUSSMAN       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (14) KAT TAYLOR       1.00       X       0.       0.       0.       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       14.014.       0.       14.014.       0.       0.       14.014.       0.	DIRECTOR		Х						0.	0.	Ο.
(12) JAMES STONE       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (13) S. DONALD SUSSMAN       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (14) KAT TAYLOR       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       40.00       X       0.       0.       0.       0.         (15) RICHARD TOFEL, PRESIDENT       40.00       X       406,196.       0.       30,417.         (16) STEPHEN ENGELBERG       40.00       X       394,960.       0.       57,324.         (17) RAGAN RHYNE, VICE PRESIDENT OF       40.00       X       249,004.       0.       14,014.	(11) RONALD OLSON	1.00									
DIRECTOR       X       0.       0.       0.       0.         (13) S. DONALD SUSSMAN       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (14) KAT TAYLOR       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (14) KAT TAYLOR       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.00       0.       0.       0.       0.       0.         (15) RICHARD TOFEL, PRESIDENT       40.00       X       406,196.       0.       30,417.         (16) STEPHEN ENGELBERG       40.00       X       394,960.       0.       57,324.         (17) RAGAN RHYNE, VICE PRESIDENT OF       40.00       X       249,004.       0.       14,014.	DIRECTOR		Х						0.	0.	0.
(13) S. DONALD SUSSMAN       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (14) KAT TAYLOR       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         DIRECTOR       X       40.00       X       0.       0.       0.       0.         (15) RICHARD TOFEL, PRESIDENT       40.00       X       406,196.       0.       30,417.         (16) STEPHEN ENGELBERG       40.00       X       394,960.       0.       57,324.         (17) RAGAN RHYNE, VICE PRESIDENT OF       40.00       X       249,004.       0.       14,014.	(12) JAMES STONE	1.00									
DIRECTOR       X       0.       0.       0.       0.         (14) KAT TAYLOR       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (15) RICHARD TOFEL, PRESIDENT       40.00       X       406,196.       0.       30,417.         (16) STEPHEN ENGELBERG       40.00       X       394,960.       0.       57,324.         (17) RAGAN RHYNE, VICE PRESIDENT OF       40.00       X       249,004.       0.       14,014.	DIRECTOR		Х						0.	0.	0.
(14) KAT TAYLOR       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (15) RICHARD TOFEL, PRESIDENT       40.00       X       406,196.       0.       0.       0.         (15) RICHARD TOFEL, PRESIDENT       40.00       X       406,196.       0.       30,417.         (16) STEPHEN ENGELBERG       40.00       X       394,960.       0.       57,324.         (17) RAGAN RHYNE, VICE PRESIDENT OF       40.00       X       249,004.       0.       14,014.	(13) S. DONALD SUSSMAN	1.00									
DIRECTOR         X         0. <t< td=""><td>DIRECTOR</td><td></td><td>X</td><td></td><td>ļ</td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>Ο.</td></t<>	DIRECTOR		X		ļ				0.	0.	Ο.
(15) RICHARD TOFEL, PRESIDENT       40.00       X       406,196.       0. 30,417.         (16) STEPHEN ENGELBERG       40.00       X       394,960.       0. 57,324.         (17) RAGAN RHYNE, VICE PRESIDENT OF       40.00       X       249,004.       0. 14,014.	(14) KAT TAYLOR	1.00									
CO-CEO, SECRETARY-TREASURER       X       406,196.       0.       30,417.         (16) STEPHEN ENGELBERG       40.00       X       394,960.       0.       57,324.         (17) RAGAN RHYNE, VICE PRESIDENT OF       40.00       X       249,004.       0.       14,014.	DIRECTOR		Х						0.	0.	0.
(16) STEPHEN ENGELBERG       40.00         EDITOR-IN-CHIEF & CO-CEO       X         (17) RAGAN RHYNE, VICE PRESIDENT OF       40.00         DEVELOPMENT, ASS. SECRETARY       X         249,004.       0.	(15) RICHARD TOFEL, PRESIDENT	40.00									
(16) STEPHEN ENGELBERG       40.00         EDITOR-IN-CHIEF & CO-CEO       X         (17) RAGAN RHYNE, VICE PRESIDENT OF       40.00         DEVELOPMENT, ASS. SECRETARY       X         249,004.       0.	CO-CEO, SECRETARY-TREASURER				X				406,196.	0.	30,417.
(17) RAGAN RHYNE, VICE PRESIDENT OF 40.00 X 249,004. 0. 14,014.	(16) STEPHEN ENGELBERG	40.00									
(17) RAGAN RHYNE, VICE PRESIDENT OF 40.00 X 249,004. 0. 14,014.	EDITOR-IN-CHIEF & CO-CEO				X				394,960.	0.	57,324.
	(17) RAGAN RHYNE, VICE PRESIDENT OF	40.00			ſ						
	DEVELOPMENT, ASS, SECRETARY					X			249,004.	0.	14,014.

14-2007220

Form 990 (2018) PRO PUBL	ICA, INC								14-2(	)07	220	Page <b>8</b>
Part VII Section A. Officers, Directors, Trus	tees, Key Emj	ploy	ees,	, and	ł Hig	ghes	st C	Compensated Employees	(continued)			
(A)	(B)			(C	C)			(D)	(E)		(	F)
Name and title	Average	(do	Position (do not check more than one					Reportable	Reportable			nated
	hours per box, unless perso week officer and a dire			rson i	s both	) ап	compensation	compensatio	1		unt of	
	(list any	<u> </u>	1	ΓT			<u> </u>	- from the	from related			her
	hours for	director	1			L.		organization	organizations (W-2/1099-MIS		•	nsation 1 the
	related	ee or	stee			nsate		(W-2/1099-MISC)	(11 2) 1000 Mile	,		ization
	organizations	trust	nal tru		eyee	ompe					-	elated
	below	Individual trustee or	Institutional trustee	Ger	êmpl	Highest compensated employee	Former				organi	zations
	line)	<u><u></u></u>	lnst	Officer	Key	ΞĘ.	For					
(18) ROBIN FIELDS	40.00							0.000 1.000			1.5	
MANAGING EDITOR	40.00					X		275,130.		0.	16,	,553.
(19) JESSE EISINGER SENIOR REPORTER	40.00					x		220 504			50	0.01
(20) CHARLES ORNSTEIN	40.00					^		230,504.		0.	<u> </u>	891.
SENIOR EDITOR	40.00					x		221,417.		0.	E /	025
(21) TRACY WEBER	40.00					^		441,417.		0.	54,	835.
SENIOR EDITOR	40.00					x		218,656.		0.	20	933.
(22) JOSEPH SEXTON	40.00				{	<u>^</u>		210,050.		<u> </u>	50,	
SENIOR EDITOR	40.00					x		218,651.		0.	35	982.
								210,051.		<u> </u>		
					ĺ							
······································									*******			
1b Sub-total						1		2,261,692.		0.	307,	232.
c Total from continuation sheets to Part VII	, Section A							0.		0.		0.
d Total (add lines 1b and 1c)								2,261,692.		0.	307,	232.
2 Total number of individuals (including but no	ot limited to the	ose l	listed	d abo	ove)	who	o re	ceived more than \$100,00	0 of reportable			60
compensation from the organization							_		<u></u>		Ye	60
	<b>.</b>									г	YE	es No
3 Did the organization list any former officer,	-							• · ·	•	ŀ		X
line 1a? If "Yes," complete Schedule J for su										···  -	3	
4 For any individual listed on line 1a, is the sur										F	4 X	689 8688888 7
and related organizations greater than \$150, 5 Did any person listed on line 1a receive or ac			•							⊦		▶ ⊴::::::::::::::::::::::::::::::::::::
rendered to the organization? If "Yes," com	-				-		ale	o organization or individua	II IOI Services	-	5	X
Section B. Independent Contractors	olete Schedule	JIO	r.su	CALDR	erso	<i>W</i> 1	****			المحتني	<u> </u>	
1 Complete this table for your five highest con	npensated inde	ener	nden	t cor	ntrad	ctors	s th	at received more than \$10	0.000 of comp	ensati	on from	
the organization. Report compensation for the	-								-	, içalı	011170111	
(A)	io calorida jo			9			T	(B)			(C)	
Name and business a	address							Description of serv	/ices	Co	ompensa	tion
HAYNES AND BOONE, LLP, 60	0 CONGRI	ESS	57	AVE	Ζ,							
SUITE 1300, AUSTIN, TX 78	701-3285	5					I	LEGAL SERVICES	5		207,	081.
FAIRDINKUM CONSULTING, LL	C, 15 E.		321	1D	SI	Γ,	J	T CONSULTANT				
9TH FLOOR, NEW YORK, NY 1	0016						2	SERVICES			143,	934.
AMAZON WEB SERVICES							V	VEBSITE HOSTIN	IG			
PO BOX 84023, SEATTLE, WA	98124-8	342	23					SERVICES			108,	942.
							_					
0 Total number of independent contracts of		• 11		-الد حرف		. 11-+			then a	Alexa		en al anti-
<ul> <li>2 Total number of independent contractors (ind \$100,000 of compensation from the organiza</li> </ul>	=	เมกา	neu	លព	iose 3	; IISTE	;u 8	anove) who received those	LI ICEL I			
					-							and the second

			(2018) PRO I	PUBLICA,	INC.			14-2007	220 Page 9
Pa	art V	711	I Statement of Rever	nue					
			Check if Schedule O cont	ains a response	or note to any lir	ne in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
vice Contributions, Gifts, Grants		b d e f <u>g</u>	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines <b>Total.</b> Add lines 1a-11 PROGRAM SERVICE FEES EDITORIAL FEES	1b           1c           1d           ions)         1e           ts, and         1f           1a-1f; \$         1	25,576,127. 565,448. ▶ Business Code 519130 519100	25,576,127.	<u>262,000.</u> 40,000.		- 312 - 314
Program Service	1	c d e f	All other program service reve Total. Add lines 2a-2f	nue		302,000.			
	3		Investment income (including	dividends, intere	est, and				
	4		other similar amounts) Income from investment of tax Royalties	oroceeds 📃 🕨	288,025. 	64,425.		288,025.	
		b c	Gross rents Less: rental expenses Rental income or (loss) Net rental income or (loss)		(ii) Personal				
	7	a b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(i) Securities 552,029, 551,909.	(ii) Other				
	'	c	Gain or (loss)	120.					
Other Revenue			Net gain or (ioss) Gross income from fundraising including \$ contributions reported on line Part IV, line 18	) events (not of 1c). See		120.			120.
Oth	9 i 1	c a b	Less: direct expenses Net income or (loss) from fund Gross income from gaming act Part IV, line 19 Less: direct expenses	raising events tivities. See a b	••••••••••••••••••••••••••••••••••••••				
	10 a	a b	Net income or (loss) from gami Gross sales of inventory, less r and allowances Less: cost of goods sold Net income or (loss) from sales	eturns a a b	] [				
Ì			Miscellaneous Revenue		Business Code				See See
		b	REIMBURSEMENT OF LEGAL HONORARIUMS REVENUE ADVERTISING REVENUE	FEES	900099 900099 541800	152,833. 77,346. 63,283.		63,283.	152,833. 77,346.
	C	•			- 241000 B	, CO, CO		05,205.	
			All other revenue		<b></b>	293,462.			
	12		Total revenue. See instructions			26,685,933,	366,425.	63,283.	680,098.

Form 990 (2018)		PUBLICA,	
Part IX Statement of	Functio	onal Expense	S

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

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	nse or note to any line in (A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
	and domestic governments. See Part IV, line 21	389,552.	389,552.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	65,918.	65,918.		
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	1,205,372.	505,741.	436,613.	263,018
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	12,893,421.	11,734,431.	874,928.	284,062
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	508,298.	454,314.	47,148.	6,836
9	Other employee benefits	1,744,993.		184,381.	61,411
10	Payroll taxes	1,008,426.	391,838.	425,541.	191,047
1	Fees for services (non-employees):	······			
	Management				
b		533,946.	346,667.	175,111.	12,168
	Accounting	35,250.		35,250.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	6,225.	o har felenetele		6,225
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
Ŭ	column (A) amount, list line 11g expenses on Sch O.)	474,854.	468,813.		6,041
2	Advertising and promotion	261,410.	177,704.	73,253.	10,453
3	Office expenses	493,067.	237,729.	27,081.	228,257
4	Information technology	1,193,466.	975,359.	127,552.	90,555
5	Royalties				
6	Оссиралсу	1,233,532.	1,081,972.	101,863.	49,697
7	Travel	940,460.	905,828.	20,638.	13,994
, 8	Payments of travel or entertainment expenses				
Ŭ	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	93,235.	83,322.	5,810.	4,103
õ	Interest			3,0200	
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	265,553.	238,998.	26,555.	
23	Insurance	128,596.	107,424.	17,555.	3,617
4	Other expenses, Itemize expenses not covered				~ / ~ ~ /
•	above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	UBIT TAX EXPENSE	28,300.		28,300.	
	PUBLIC REC. COP. & SUBS	387,649.	387,649.		
	REPAIRS AND MAINTENANCE	90,523.	77,947.	8,479.	4,097
	RECRUITMENT/PROF DEVEL.	83,367.	69,275.	4,303.	9,789
	All other expenses	39,048.	35,143.	3,905.	
	Total functional expenses. Add lines 1 through 24e	24,104,461.	20,234,825.	2,624,266.	1,245,370
	Joint costs. Complete this line only if the organization			2/023/2001	<u></u>
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	concerning cemparyn and runni aising sonordaurit.				

PRO PUBLICA, INC.	
Balance Sheet	
Check if Schedule O contains a response or note to any line in this Part X	
	(A)
	Beginning of year
Cash · non-interest-bearing	3,172,453.
Savings and temporary cash investments	15,224,452.
Pledges and grants receivable, net	18,687,901.
Accounts receivable, net	3,661.
Loans and other receivables from current and former officers, directors,	

trustees, key employees, and highest compensated employees. Complete Part II of Schedule L

Loans and other receivables from other disgualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary

employees' beneficiary organizations (see instr). Complete Part II of Sch L

Notes and loans receivable, net

Inventories for sale or use

Investments - publicly traded securities

Investments - other securities. See Part IV, line 11

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

.....

10a

10b

Prepaid expenses and deferred charges

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

b Less: accumulated depreciation

basis. Complete Part VI of Schedule D

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10c

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12

13

286,215.

677,235.

14,765.

(B)

End of year

5,317,242.

21,331,856.

13,042,094.

8.912.

464,032.

<u>739,263.</u>

28,305.

and demonto programmolated, obort art in, and the		10	
Intangible assets		14	
Other assets. See Part IV, line 11	4,260.	15	57,235.
Total assets. Add lines 1 through 15 (must equal line 34)	38,070,942.	16	40,988,939.
Accounts payable and accrued expenses	372,471.	17	659,311.
Grants payable		18	
Deferred revenue	373,691.	19	434,783.
Tax-exempt bond liabilities		20	
Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Loans and other payables to current and former officers, directors, trustees,			
key employees, highest compensated employees, and disqualified persons.			
Complete Part II of Schedule L		22	
Secured mortgages and notes payable to unrelated third parties		23	
Unsecured notes and loans payable to unrelated third parties		24	
Other liabilities (including federal income tax, payables to related third			
parties, and other liabilities not included on lines 17-24). Complete Part X of			
Schedule D		25	
Total liabilities. Add lines 17 through 25	746,162.	26	1,094,094.
Organizations that follow SFAS 117 (ASC 958), check here 🕨 [X] and			
complete lines 27 through 29, and lines 33 and 34.			
Unrestricted net assets	14,828,565.	27	21,132,503.
Temporarily restricted net assets	22,496,215.	28	<u>18,762,342.</u>
Permanently restricted net assets		29	
Organizations that do not follow SFAS 117 (ASC 958), check here 🕨 📃			
and complete lines 30 through 34.		1998) 1998)	
Capital stock or trust principal, or current funds		30	
Paid-in or capital surplus, or land, building, or equipment fund		31	
Retained earnings, endowment, accumulated income, or other funds		32	
Total net assets or fund balances	37,324,780.	33	39,894,845.
Total liabilities and net assets/fund balances	38,070,942.	34	40,988,939.
			Form <b>990</b> (2018)

1,379,132.

639,869.

Form 990 (2018) Part X | Bal

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Liabilities

Net Assets or Fund Balances

Assets

For	n 990 (2018) PRO PUBLICA, INC.	14-	2007220	Page	e 12
Pa	art XI Reconciliation of Net Assets				
<u></u>	Check if Schedule O contains a response or note to any line in this Part XI			[	X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	26,68	5,93	3.
2	Total expenses (must equal Part IX, column (A), line 25)	2	24,104	1,46	1.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,58:	L,47	2.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	37,324	1,78	0.
5	Net unrealized gains (losses) on investments	5		-26	1.
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 in Schedule O)	9	-11	L,14	6.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	39,894	1,84	5.
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 in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	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				
Ь	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Aud	t		
	Act and OMB Circular A-133?		<u>3a</u>		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audi	t   [		
-	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			200	

Form 990 (2018)

SCHEDU	JLE A
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Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www irs gov/Form990 for instructions and the latest information

	OMB No. 1545-0047
	2018
	Open to Public
I	Inspection

Name of the organization	p do to minimologi			ale latest	information.	Employe	er identification number			
PRO	PUBLICA, D	INC.					14-2007220			
Part I Reason for Public	Charity Status	(All organizations must (	complete t	his part.) S	See instructions	5,				
The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)										
1 A church, convention of c										
2 A school described in see										
3 📃 A hospital or a cooperativ	e hospital service or	anization described in	section 17	'0(b)(1)(A)(	(iii).					
4 📃 A medical research organ										
city, and state:	city, and state:									
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
section 170(b)(1)(A)(iv).	section 170(b)(1)(A)(iv). (Complete Part II.)									
6 🔄 A federal, state, or local g	overnment or govern	mental unit described in	section 1	170(b)(1)(A	.)(v).					
7 X An organization that norm	ally receives a subst	antial part of its support	from a gov	ernmental	unit or from th	ne general	public described in			
section 170(b)(1)(A)(vi). (	Complete Part II.)									
8 A community trust descrit										
9 An agricultural research o										
or university or a non-land	grant college of agrid	culture (see instructions)	. Enter the	name, city	y, and state of	the colleg	e or			
university:							·····			
10 An organization that norm	ally receives: (1) mor	e than 33 1/3% of its sup	port from	contributio	ons, membersh	nip fees, a	nd gross receipts from			
activities related to its exe		•	- ,				•			
income and unrelated bus		e (less section 511 tax) fr	om busine	sses acqu	ired by the org	anization	after June 30, 1975.			
See section 509(a)(2). (C	, ,									
11 An organization organized			-				_			
12 An organization organized										
more publicly supported a							Check the box in			
lines 12a through 12d that	• ·			•		•	_:			
a Type I. A supporting org		•	•							
the supported organizat organization. <b>You must</b>		• • • •	a majoniy	or the piret	clors or trustee	is of the s	upporting			
	•		tion with it	te support	od organization		vine			
b Type II. A supporting on control or management					-		•			
organization(s). You mu			ame perso		sittor or manag	le ule sub	ported			
c Type III functionally into			in connec	tion with	and functionall	vinteorati	ad with			
its supported organizatio	•					ymegiad	ja mili,			
d Type III non-functional					-	ed organi	zation(s)			
that is not functionally in						-				
requirement (see instruc						an attorne				
e Check this box if the org		-				l. Type III				
functionally integrated, c						, . ,				
f Enter the number of supported										
g Provide the following information	•									
(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) is the org	anization listed ing document?	(v) Amount of	monetary	(vi) Amount of other			
organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see in:	structions)	support (see instructions)			
				Ι	1					
			<u> </u>							
		· · · · ·			L					
			-							
			L							
Total				્યુપ્લક્ષ્ય સંસ			l			

### Schedule A (Form 990 or 990 EZ) 2018 PRO PUBLICA, INC.

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support							
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	
1	Gifts, grants, contributions, and						1	
	membership fees received. (Do not				1		1	
	include any "unusual grants.")	10169976.	16882164.	13765153.	43063123.	25576127.	109456543	
2	Tax revenues levied for the organ-					1		
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities						······································	
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	10169976.	16882164.	13765153.	43063123.	25576127.	109456543	
5	The portion of total contributions							
-	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the			[1] 일 : 1 : 1 : 2 : 2 : 3 [2] : 2 : 2 : 2 : 3 : 3 : 3 : 3				
	amount shown on line 11,							
	column (f)						26483706.	
6	Public support. Subtract line 5 from line 4.	n an					82972837.	
	ction B. Total Support							
	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	
	Amounts from line 4	10169976	16882164	13765153.	43063123.	25576127	109456543	
8	Gross income from interest,		200012011		100001101	000/010/1	107420242	
Ų	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	47,898.	23,875.	105,365.	91,606.	449,799.	718,543.	
9	Net income from unrelated business			100,000,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	110,700	/10/0101	
5	activities, whether or not the							
	business is regularly carried on	12,775.	10,286.	8,230.	52,755.	36,395.	120,441.	
10	Other income. Do not include gain			0,2001				
10	or loss from the sale of capital							
	assets (Explain in Part VI.)	23,379.	10,092.	245 214	108,258.	230,179.	617,122.	
44	Total support. Add lines 7 through 10			213,013.	100,200.		110912649	
	Gross receipts from related activities,	ote /soo instructio					,188,605.	
	First five years. If the Form 990 is for			fourth or fifth to			,100,005.	
10	organization, check this box and stop	hava			-			
Sec	tion C. Computation of Publi	c Support Per	centage					
	Public support percentage for 2018 (li		_	blumn (fi)		14	74.81 %	
	Public support percentage from 2017					15	68.01 %	
	33 1/3% support test - 2018. If the c							
	stop here. The organization qualifies	-					<b>२</b> जि	
Ь	33 1/3% support test - 2017. If the o		~					
	and stop here. The organization quali							
	10% -facts-and-circumstances test		•••		13 16a or 16b a			
	and if the organization meets the "fact	-						
	meets the "facts-and-circumstances" t			•	•	•		
	10% -facts-and-circumstances test							
		-					070 01	
	more, and if the organization meets th							
	organization meets the "facts-and-circl							
18	18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions							

Schedule A (Form 990 or 990-EZ) 2018

#### Schedule A (Form 990 or 990-EZ) 2018 PRO PUBLICA, INC.

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

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

Se	cuon A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		-				
3	Gross receipts from activities that						
	are not an unrelated trade or bus						
	iness under section 513						
4	Tax revenues levied for the organ						
•	ization's benefit and either paid to						
	or expended on its behalf						
~							
5	The value of services or facilities						
	furnished by a governmental unit to			1			
	the organization without charge		-				
	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
_	amount on line 13 for the year	, <del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>					
	Add lines 7a and 7b		Li sta te desta a te tetto	Augusta e successão a successão a composição da composição da composição da composição da composição da composi			
	Public support. (Subtract line 7c from line 6.)			a na nina karia. Birebija,	<ul> <li>A contractive exercts each</li> </ul>		1
				I			
	ndar year (or fiscal year beginning in) 🕨 📘	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for t	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiza	ition,
	check this box and stop here				-		
Sec	tion C. Computation of Public						
15	Public support percentage for 2018 (lin	e 8. column (f). c	livided by line 13. c	:oiumn (fi)		15	%
	Public support percentage from 2017 S		•		*********	16	%
	tion D. Computation of Invest					.1. 19.1	70
	Investment income percentage for 201			no 13. column (fi)		17	
							%
	Investment income percentage from 20						%
	<b>33 1/3% support tests - 2018.</b> If the c						is not
	more than 33 1/3%, check this box and	•	- ,	• •			
	33 1/3% support tests - 2017. If the o						nd
	line 18 is not more than 33 1/3%, check					-	▶∟_
20	20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions						

Schedule A (Form 990 or 990-EZ) 2018

## Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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



			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
<u> </u>	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI.	110		
Sec	ction B. Type I Supporting Organizations			
		r	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1939.95		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	1000	9499) -	
	supervised, or controlled the supporting organization.	2		L
Sec	tion C. Type II Supporting Organizations		~~~~~	r
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed		98,935	명화가
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	1		
000	ton b. An type in oupporting organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth meab of the	- <u>A</u> -2009	Yes	No
•	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	10:499;	1000000000
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	100000	-	
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.	-		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions).		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	За		
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	NERSON (		383 Y
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b	[	

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018		
Part V   Type III Non-Function	onally Integrated 50	9(a)(3) Supporting Organizations

1

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

Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior year distributions	2		
3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Secti	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		······································
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally	integra	ted Type III supporting organ	ization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2018

, ,	rt V   Type III Non-Functionally Integrated 509	9(a)(3) Supporting Org	anizations (continued)	
Sec	tion D - Distributions	Current Year		
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exern			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	IS	
4	Amounts paid to acquire exempt-use assets		· · · · · · · · · · · · · · · · · · ·	
5	Qualified set-aside amounts (prior IRS approval required)	·····		
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	the organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	tion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
c	From 2015			
d	From 2016			
e	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

#### Schedule A (Form 990 or 990 EZ) 2018 PRO PUBLICA, INC. Part VI Supplemental Information. Provide the explanations

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

HONORARIUMS REVENUE
2014 AMOUNT: \$ 23,379.
2015 AMOUNT: \$ 10,092.
2016 AMOUNT: \$ 26,750.
2017 AMOUNT: \$ 90,734.
2018 AMOUNT: \$ 77,346.
REIMBURSEMENT OF LEGAL FEES
2016 AMOUNT: \$ 218,464.
2017 AMOUNT: \$ 17,524.
2018 AMOUNT: \$ 152,833.

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2018

Employer identification number

PRO	PUBLICA,	INC.

14-2007220

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

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

#### General Rule

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

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 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).

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

Name of organization

Employer identification number

PRO PUBLICA, INC.

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	EMERSON COLLECTIVE /SILICON VALLEY COMMUNITY FDN 2440 WEST EL CAMINO REAL MOUNTAIN VIEW, CA 94040-1498	\$4,600,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	THE SANDLER FOUNDATION 121 STEUART STREET SAN FRANCISCO, CA 94105	\$3,000,000.	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
3	KERFUFFLE FOUNDATION / FIDELITY CHARITABLEPO BOX 770001CINCINNATI, OH 45277	\$1,000,000.	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
4	ROBERT WOOD JOHNSON FOUNDATION 50 COLLEGE ROAD EAST PRINCETON, NJ 08540	\$749,900.	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
5	TRELLIS FUND 3150 SOUTH STREET NW WASHINGTON, DC 20007	\$ <u> </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
6	KERN FAMILY C/O BPM LLP         600 CALIFORNIA STREET         SAN FRANCISCO, CA 94108	\$450,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

PRO PUBLICA, INC.

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	WELLSPRING PHILANTHROPIC FUND 10 TIMES SQUARE NEW YORK, NY 10018	\$450,000.	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
8	THE JOYCE FOUNDATION 321 NORTH CLARK STREET CHICAGO, IL 60654	\$400,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	MARISLA FOUNDATION 668 NORTH COAST HIGHWAY LAGUNA BEACH, CA 92651	\$400,000.	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
10	DEBORAH SIMON 950 LAURELWOOD CARMEL, IN 46032	\$400,000.	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
	THE LORANA SULLIVAN FOUNDATION 551 FIFTH AVENUE NEW YORK, NY 10176	\$345,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	ANONYMOUS / CURBSTONE FINANCIAL MANAGEMENT CORPORATION 741 CHESTNUT STREET MANCHESTER, NH 03104	\$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Part I

(a) No.

13

(a) No. Employer identification number

PRO PUBLICA, INC

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BLICA, INC.		14-2007220
Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
S. DONALD SUSSMAN		Person
888 EAST LAS OLAS BLVD	\$280,100	
FORT LAUDERDALE, FL 33301		(Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
ABRAMS FOUNDATION, INC.		Person X
222 BERKELEY STREET	\$ <u>255,000</u>	Payroll Noncash
BOSTON, MA 02116		(Complete Part II for noncash contributions.)
(b)	(c)	(d)
Name, address, and ZIP + 4 ANONYMOUS / GREATER WASHINGTON COMMUNITY FOUNDATION	Total contributions	Type of contribution

14_	ABRAMS FOUNDATION, INC. 222 BERKELEY STREET BOSTON, MA 02116	\$     255,000.     Person     X       \$     255,000.     Noncash     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
15	ANONYMOUS / GREATER WASHINGTON COMMUNITY FOUNDATION	_ Person X Payroll
	1325 G STREET, NW	\$ 250,000. Noncash (Complete Part II for
	WASHINGTON, DC 20005	noncash contributions.)
(a) No	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
16	CRAIG NEWMARK PHILANTHROPIC FUND / FIDELITY CHARITABLE	_ Person X Payroli
	<u>PO BOX 770001</u>	\$\$ Noncash
	CINCINNATI, OH 45277	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
17	PAUL AND ANN SAGAN FAMILY FUND / FIDELITY CHARITABLE	Person X Payroll \$ 250,000, Noncash
	<u>РО ВОХ 770001</u> <u>CINCINNATI, ОН 45277</u>	S 250,000. Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
18	JAMES M. AND CATHLEEN D. STONE FOUNDATION/ BOSTON FOUNDATION	Person X Payroll
	75 ARLINGTON STREET BOSTON, MA 02116	\$ 250,000. Noncash (Complete Part II for noncash contributions.)
823452 11-08		Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

EZ, or 990 F) (2018) υ,

Name of organization

Employer identification number

PRO PUBLICA, INC.

 14-2007220

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
19	TOMKAT FUND / WELLS FARGO 111 SUTTER STREET SAN FRANCISCO, CA 94111	\$ <u>250,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b)	(c)	(d)
20	Name, address, and ZIP + 4         DONALD A. PELS CHARITABLE TRUST /         FIDUCIARY TRUST COMPANY INTERNATIONAL         280 PARK AVENUE	Total contributions           \$250,000.	Type of contribution       Person     X       Payroll
	NEW YORK, NY 10017	······································	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21	SCRIPPS HOWARD FOUNDATION 312 WALNUT STREET CINCINNATI, OH 45202	\$246,000.	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
22	CHARLES H. REVSON FOUNDATION       55 EAST 59TH STREET, 23RD FLOOR       NEW YORK, NY 10022	\$240,000.	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
23	CARNEGIE CORPORATION 437 MADISON AVENUE NEW YORK, NY 10022	\$200,000.	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
24	KLARMAN FAMILY FOUNDATION         PO BOX 171627         BOSTON, MA 02117	\$200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

PRO PUBLICA, INC.

Employer identification number

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part 1 if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25_	HENRY L. KIMELMAN FAMILY FOUNDATION / FOUNDATION SOURCE 55 WALLS DRIVE FAIRFIELD, CT 06824-5163	\$200,000.	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
26	STEPHEN M. SILBERSTEIN FOUNDATION29 EUCALYPTUS ROADBELVEDERE, CA 94920-2435	\$200,000.	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
27	FOUNDATION TO PROMOTE OPEN SOCIETY 224 WEST 57TH STREET NEW YORK, NY 10019	\$200,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28	THE GOLDHIRSH FOUNDATION, INC. C/O RINET COMPANY, LLC 101 FEDERAL STREET, FLOOR #14 BOSTON, MA 02110	\$200,000.	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
29	JOHN S. AND JAMES L. KNIGHT FOUNDATION 200 SOUTH BISCAYNE BLVD., SUITE 3300 MIAMI, FL 33131-2349	\$189,000.	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
30	THE PETER AND CARMEN LUCIA BUCK FOUNDATION 633 THIRD AVENUE, 16TH FLOOR NEW YORK, MA 10017	\$ <u>170,000.</u>	Person X Payroli Noncash (Complete Part II for noncash contributions.)

# Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Name of organization

Employer identification number

14-2007220

PRO PUBLICA, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	l space is nee <b>ded</b> .	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	HEISING-SIMONS FOUNDATION 400 MAIN STREET LOS ALTOS, CA 94022	\$160,000.	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
32	ROBERT R. MCCORMICK FOUNDATION 205 NORTH MICHIGAN AVENUE CHICAGO, IL 60601	\$ <u> </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
33	CRANKSTART FOUNDATION 2626 VALLEJO STREET SAN FRANCISCO, CA 94123	\$ <u>150,000.</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
34	SOLIDARITY GIVING / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$150,000.	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
35	RICK AND RHONA THOMPSON / SCHWAB       CHARITABLE       PO BOX 628298       ORLANDO, FL 32862	\$125,000.	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
36	PARK FOUNDATION 140 SENECA WAY ITHACA, NY 14850	\$125,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

PRO PUBLICA, INC.

Employer identification number

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	331 ROSES TRUST / MERRILL LYNCH 2029 CENTURY PARK EAST LOS ANGELES, CA 90067	\$112,566.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
38	RIVERA V GRAND PACIFIC RESORT FUND C/O <u>CPT GROUPS, INC.</u> <u>50 CORPORATE PARK</u> <u>IRVINE, CA 92606</u>	\$107,391.	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
39	CRAIGSLIST CHARITABLE FUND 222 SUTTER STREET, 9TH FLOOR SAN FRANCISCO, CA 94108	\$ <u>100,300.</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
40	GERALDINE R. DODGE FOUNDATION 14 MAPLE AVENUE, SUITE 400 MORRISTOWN, NJ 07960	\$ <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
41	GOLD BAY FOUNDATION 1917 LOGAN AVENUE SOUTH MINNEAPOLIS, MN 55403	\$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
42	BRIGHT HORIZON FUND / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Part I

PRO PUBLICA, INC.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>43</u>	SPINNAKER TRUST 123 FREE STREET PORTLAND, ME 04101	\$ 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
44	THE KOHLBERG FOUNDATION 111 RADIO CIRCLE MT KISCO, NY 10549	\$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
<u>45</u>	GLOBAL VILLAGE CHARITABLE TRUST / NORTHERN TRUST COMPANY 600 BRICKELL AVENUE MIAMI, FL 33131	\$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
46	START SMALL FOUNDATION / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$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
47	ANONYMOUS / BMO CHARITABLE FUND PROGRAM / NATIONAL PHILANTHROPIC TRUST 165 TOWNSHIP LINE ROAD JENKINTOWN, PA 19046-3594	\$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
48	CHARLES E. SCHEIDT FAMILY FOUNDATION C/O FOUNDATION SOURCE 501 SILVERSIDE ROAD WILMINGTON, DE 19809	\$ <u>75,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
	WIDMINGTON, DE 13003	1 1	HUNCASH CURRIDURIONS.

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Page 2

Employer identification number

14 - 2007220

Name of organization

#### PRO PUBLICA, INC.

Employer identification number

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	Il space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	WUNDERKINDER FOUNDATION 11400 W. OLYMPIC BLVD LOS ANGELES, CA 90064	\$75,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
50	LICT CORPORATION 401 THEODORE FREMD AVENUE RYE, NY 10580	\$74,600.	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
51	THE SELZ FOUNDATION 121 EAST 73RD STREET NEW YORK, NY 10021	\$73,000.	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
52	THE WARBURG PINCUS FOUNDATION       450 LEXINGTON AVENUE       NEW YORK, NY 10017	\$ <u>66,500.</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
53	M. BRIAN MAHER 7 COLUMBIA TURNPIKE FLORHAM PARK, NJ 07932	\$ <u>62,500.</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
54	BASIL MAHER 7 COLUMBIA TURNPIKE FLORHAM PARK, NJ 07932	\$ <u>62,500.</u>	Person X Payroli Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

PRO PUBLICA, INC.

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additionate	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55	SELECT EQUITY GROUP, L.P. 380 LAFAYETTE STREET NEW YORK, NY 10003	\$ <u>55,835.</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
56	STEVENS/MURPHY FAMILY FOUNDATION / BANK OF AMERICA CHARITABLE GIFT FUND 100 FEDERAL STREET BOSTON, MA 02110	\$ <u>55,000.</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
57	LEON LEVY FOUNDATION ONE ROCKEFELLER PLAZA NEW YORK, NY 10020	\$ <u>50,000.</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
58	THE VERMONT COMMUNITY FOUNDATION 3 COURT STREET MIDDLEBURY, VT 05753	\$ <u>50,000.</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
59	SUNRISE FOUNDATION / VANGUARD CHARITABLE PO BOX 9509 WARWICK, RI 02889	\$50,000.	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
60	THE JEANNIE TSENG AND COLIN RUST CHARITABLE FUND / VANGUARD CHARITABLE PO BOX 9509 WARWICK, RI 02889-9510	\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

PRO PUBLICA, INC.

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
61	JOAN AND IRWIN JACOBS FUND / JEWISH <u>COMMUNITY FOUNDATION</u> <u>4950 MURPHY CANYON ROAD</u> <u>SAN DIEGO, CA 92123</u>	\$ <u>50,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(ď) Type of contribution
62	MELLODY HOBSON C/O THE MOSAIC FINANCIAL GROUP LLC 330 N WABASH AVENUE CHICAGO, IL 60611	\$50,000.	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
<u>63</u>	SKOLL GLOBAL THREATS FUND 1808 WEDEMEYER STREET SAN FRANCISCO, CA 94129	\$50,000.	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
64	THE FALIK PHILANTHROPIC FUND / JEWISH         FEDERATION OF GREATER PHILADELPHIA         2100 ARCH STREET         PHILADELPHIA, PA 19103	\$50,000.	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
65	PINION STREET FOUNDATION / JEWISH         COMMUNITY FEDERATION         121 STEUART STREET         SAN FRANCISCO, CA 94105	\$ <u>50,000.</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
66	MAXIMILIAN AND DEBORAH STONE 122 FARM ROAD SARATOGA SPRINGS, NY 12866	\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

PRO PUBLICA, INC.

Employer identification number

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>    67</u>	ANONYMOUS FOUNDATION C/O NUTTER, MCCLENNEN & FISH 155 SEAPORT BOULEVARD BOSTON, MA 02210	\$50,000.	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
<u>    68  </u>	MARIPOSA FOUNDATION <u>31 WEST 27TH STREET</u> <u>NEW YORK, NY 10001</u>	\$50,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>    69</u>	THE DELLOAKES FOUNDATION / FOUNDATION SOURCE 501 SILVERSIDE ROAD WILMINGTON, DE 19809	\$50,000.	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
70	BRIAN M. MCINERNEY 304 COUNTY ROAD 438 ROCHEPORT, MO 65279	\$45,000.	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
	MARTY AND DOROTHY SILVERMAN FOUNDATION 130 EAST 59TH STREET NEW YORK, NY 10022	\$45,000.	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
72	EMILY KAISER AND GENE BULMASH / TULSA COMMUNITY FOUNDATION 7030 SOUTH YALE AVENUE TULSA. OK 74136	\$45,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

PRO PUBLICA, INC.

Employer identification number

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) <u>No</u> ,	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
73	BRUCE WINTMAN AND JONNA GABERMAN 100 ASHFORD ROAD LONGMEADOW, MA 01106	\$40,000.	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
74	ANONYMOUS/SCHWAB CHARITABLE 211 MAIN STREET SAN FRANCISCO, CA 94105	\$40,000.	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
75	THE GREEN STREET FOUNDATION OF SAN FRANCISCO 7726 WINDY HILL DRIVE KENT, OH 44240	\$ <u>35,295.</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
76	ANONYMOUS/ SCHWAB CHARITABLE 211 MAIN STREET SAN FRANCISCO, CA 94105	\$35,000.	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
77	MARK COLODNY GIVING FUND / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$33,500.	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
78	ANONYMOUS/ BESSEMER TRUST COMPANY 100 WOODBRIDGE CENTER DRIVE WOODBRIDGE, NJ 07095-1191	\$33,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

PRO PUBLICA, INC.

14-2007220

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a)	(b)	(c)	(d)	
No.	Name, address, and ZiP + 4	Total contributions	Type of contribution	
79	ZEGAR FAMILY FOUNDATION         240 RIVERSIDE BLVD         NEW YORK, NY 10069	\$30,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4 EDWARDS FAMILY FUND / SILICON VALLEY	Total contributions	Type of contribution	
80	EDWARDS FAMILI FOND / SILICON VALLET         COMMUNITY FDN         2440 w EL CAMINO REAL         MOUNTAIN VIEW, CA 94040	\$30,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c) Total contributions	(d) Type of contribution	
<u>81</u>	Name, address, and ZIP + 4          ANONYMOUS / VANGUARD CHARITABLE         PO BOX 9509         WARWICK, RI 02889-9509	\$ <u>30,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c) Total contributions	(d)	
<u> </u>	Name, address, and ZIP + 4 ALLEN BLUE AND KIRA SNYDER FUND / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$26,200.	Type of contribution         Person       X         Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>83</u>	JAMES MABIE       135 S LASALLE STREET       CHICAGO, IL 60603	\$25,129.	Person Payroll Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>84</u>	GOLDEN MERCER CHARITABLE GIVING FUND / NATIONAL PHILANTHROPIC TRUST 165 TOWNSHIP LINE ROAD JENKINTOWN, PA 19046-3594	\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	

Employer identification number

PRO PUBLICA, INC.

14-2007220

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
85	POLAKOF AND OSHER CHARITABLE FAMILY FUND / FIDELITY CHARITABLE		Person X Payroli	
	<u>PO BOX 770001</u> <u>CINCINNATI, OH 45277</u>	\$25,000.	Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
86	THE LA FETRA FOUNDATION		Person X Payroll	
	2001 E. FINANCIAL WAY	\$25,000.	Noncash (Complete Part II for	
	GLENDORA, CA 91741		noncash contributions.)	
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
87	THE KARP-HAAHR FAMILY FUND / SCHWAB CHARITABLE 211 MAIN STREET	\$ 25,000.	Person X Payroll Noncash	
	SAN FRANCISCO, CA 94105		(Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
88	THE HARTZBAND FAMILY CHARITABLE FUND / NATIONAL PHILANTHROPIC TRUST 165 TOWNSHIP LINE ROAD	\$ 25,000.	Person X Payroli Noncash	
	JENKINTOWN, PA 19046		(Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
<u>    89</u>	DONGJU SONG 51 WEST 52ND STREET	\$ 25,000.	Person X Payroll Noncash	
	NEW YORK, NY 10019		(Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
	Name, address, and ZIP + 4 RONALD AND JANE OLSON / SCHWAB CHARITABLE	Total contributions	Type of contribution	
	211 MAIN STREET	\$25,000.	Payroli Noncash (Complete Part II for	
	SAN FRANCISCO, CA 94105		noncash contributions.)	
Name of organization

PRO PUBLICA, INC.

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
91	THE TOM AND JANET UNTERMAN FAMILY GIFT FUND / CALIFORNIA COMMUNITY FOUNDATIO 221 S. FIGUEROA STREET LOS ANGELES, CA 90012	\$25,000.	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
92	THE MARC HAAS FOUNDATION C/O MAZARS         USA LLP         135 WEST 50TH STREET         NEW YORK, NY 10020	\$25,000.	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
93	FIELD FOUNDATION OF ILLINOIS 200 SOUTH WACKER DRIVE CHICAGO, IL 60606	\$25,000.	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
94	DJ MCMANUS FOUNDATION INC. 420 WEST BROADWAY NEW YORK, NY 10012	\$25,000.	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
95	CHIS AND LISA KANEB FUND / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$25,000.	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
96	THEODORE CROSS FAMILY CHARITABLE FOUNDATION C/O CROSS ASSOCIATES, LLC 100 MERRICK ROAD ROCKVILLE CENTER, NY 11570	\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

PRO PUBLICA, INC.

14-2007220

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
97	FUND FOR NONPROFIT NEWS / THE MIAMI         FOUNDATION         40 NW 3RD STREET         MIAMI, FL 33128	\$25,000.	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
98	CHANGE OF TACK / BESSEMER TRUST 630 FIFTH AVENUE NEW YORK, NY 10111	\$ <u>25,000.</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
99	ANONYMOUS / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$25,000.	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
100	NICHOLAS WHYTE AND ANNE WHYTE PO BOX 5945 BERKELEY, CA 94705	\$24,997.	Person Payroll Doncash X Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
101	SUSAN BALFOUR 119 BOLDLEAF COURT CARY, NC 27513	\$20,150.	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
102	JEFFREY AND SOPHIE DRUBNER 500 CHASE PARKWAY WATERBURY, CT 06708-3346	\$20,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

PRO PUBLICA, INC.

Employer identification number

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Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additiona	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
103	SCHUH-NGUYEN FAMILY FUND/ VANGUARD CHARITABLE PO BOX 9509 WARWICK, RI 02889	\$20,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
104	A & J SAKS FOUNDATION, INC. PO BOX 471 NEW YORK, NY 10021-0033	\$20,000.	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
105	ELIZABETH LIEBMAN 910 N. LAKESHORE DRIVE CHICAGO, IL 60611	\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b) Name address and 710 - 4	(c) Total contributions	(d)
<u>No.</u>	Name, address, and ZIP + 4 ROSEHILL CHARITABLE FUND / VANGUARD CHARITABLE PO BOX 9509 WARWICK, RI 02889	\$ 20,000.	Type of contribution         Person       X         Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
107	CRANALEITH FOUNDATION INC. 5910 S. WATSON LANE LITTLETON, CO 80123	\$20,000.	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
108	JAMES FOUNDATION INC. PO BOX 456 HADDONFIELD, NJ 08033	\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

14-2007220

PRO PUBLICA, INC.

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 109 GILBERT FUND/ THE BOSTON FOUNDATION X Person Payroli 75 ARLINGTON STREET 20,000. Noncash (Complete Part II for BOSTON, MA 02116 noncash contributions.) (a) (d) (P) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 110 DANIEL AND COLEEN SLOSBERG X Person Pavroll 2560 EMERALD AVENUE Noncash 20,000. (Complete Part II for ANN ARBOR, MI 48104 noncash contributions.) (a) (b) (c) (d)No. Name, address, and ZIP + 4 **Total contributions** Type of contribution THE DAVID R. AND PATRICIA D. ATKINSON 111 FOUNDATION X Person Payroll **100 OVERLOOK CENTER** 20,000. Noncash (Complete Part II for PRINCETON, NJ 08540 noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution ANONYMOUS/ NORTHERN TRUST CHARITABLE 112GIVING PROGRAM X Person Payroli 225 NORTH MICHIGAN AVENUE 20,000. Noncash \$ (Complete Part II for CHICAGO, IL 60601 noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 113 ESTATE OF GEORGE E. BUKER X Person Payroll 564 CRIMSON OAK LANE 18,000. Noncash \$ (Complete Part II for FUQUAY VARINA, NC 27526 noncash contributions.) (c) (d) (a) (b) Total contributions No. Name, address, and ZIP + 4 Type of contribution BRAD AND KATHRYN KERCHOF 114 X Person Payrol! 17,769. Noncash 641 WHITE OAK RD SW \$ (Complete Part II for ROANOKE, VA 24014 noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

PRO PUBLICA, INC.

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_115	<u>A &amp; C FUND / SCHWAB CHARITABLE</u> 211 MAIN STREET SAN FRANCISCO, CA 94105	\$17,500.	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
	TIDES FOUNDATION 1014 TORNEY AVENUE SAN FRANCISCO, CA 94129	\$17,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
117	THE SHAYNE FOUNDATION 3201 FERNWOOD AVENUE LOS ANGELES, CA 90039	\$16,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
<u></u> <u>118</u>	Name, address, and ZIP + 4         PECHET FOUNDATION / STREAMLINE FAMILY         PO BOX 174         PO BOX 174         DOVER, MA 02030	Total contributions           \$16,000.	Type of contribution         Person       X         Payroll       Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	THE ABER D. UNGER FOUNDATION ONE SOUTH STREET BALTIMORE, MD 21202	\$15,000.	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
120	MANAAKI FOUNDATION / JPMORGAN CHASE BANK, N.A. PO BOX 227237 DALLAS, TX 75222	\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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Employer identification number

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Name of organization

PRO PUBLICA, INC.

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
121	DICK AND DIANA BEATTIE FUND/ NORTHERN TRUST CHARITABLE GIVING PROGRAM AT THE 225 NORTH MICHIGAN AVENUE CHICAGO, IL 60601	\$15,000.	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
122	SHUCHMAN LESSER FOUNDATION / SILICON         VALLEY COMMUNITY FOUNDATION         2440 WEST EL CAMINO REAL         MOUNTAIN VIEW, CA 94040	\$15,000.	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
123	EMILY & GREGORY WALDORF FAMILY FUND / SILICON VALLEY COMMUNITY FDN 2440 WEST EL CAMNO REAL MOUNTAIN VIEW, CA 94040	\$15,000.	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
124	ELBAZ FAMILY FOUNDATION 9663 SANTA MONICA BLVD. LOS ANGELES, CA 90210-4303	\$ <u>15,000.</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
125	LONGHILL CHARITABLE FOUNDATION 200 OAK HILL ROAD ITHACA, NY 14850	\$ <u>15,000.</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
126	ROBERT AND MAURINE ROTHSCHILD FUND, INC. 59 EAST 54TH STREET NEW YORK, NY 10022-9208	\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

14-2007220

PRO PUBLICA, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	I space is needed.	
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution
_127	CENGAGE LEARNING 5191 NATORP BLVD MASON, OH 45040	\$15,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
128	Name, address, and ZiP + 4       THE LU FOUNDATION       820 S. MONACO PARKWAY       DENVER, CO 80224	\$15,000.	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
129	DENCKLA/REBER FAMILY FUND / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$15,000.	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
130	ARDEA FUND PO BOX 29155 SAN FRANCISCO, CA 94129-0155	\$15,000.	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
131	PHILIP R. JONSSON FOUNDATION PO BOX 251304 LITTLE ROCK, AR 72225	\$ <u>15,000.</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
132	BENJAMIN AND ALICE GOLDMAN REITER / SCHWAB CHARITABLE 211 MAIN STREET SAN FRANCISCO, CA 94105	\$15,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
1			· · · /

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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PRO PUBLICA, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>133</u>	ANONYMOUS/ FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$15,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
134	IVAN PYZOW 57 LOWDEN AVENUE SOMERVILLE, MA 02144	\$14,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
135	MJ CHELSEA FUND 7 COLUMBIA TURNPIKE FLORHAM PARK, NJ 07932	\$ <u>14,000.</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
_136	HANNAH LUKE FENIMORE COOPER/ THE NATIONAL PHILANTHROPIC TRUST 165 TOWNSHIP LINE ROAD JENKINTOWN, PA 19046	\$13,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
137	SKL FAMILY FOUNDATION 8500 NORMANDALE LAKE BLVD MINNEAPOLIS, MN 55437	\$12,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
138	PALITZ CHARITABLE LEAD TRUST 4520 N. DROMEDARY ROAD PHEONIX, AZ 85018-2938	\$11,000.	Person X Payroll Noncash (Complete Part Il for noncash contributions.)

Name of organization

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14 - 2007220

#### PRO PUBLICA, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_139	RAMP FOUNDATION 301 OLIVE HILL LANE WOODSIDE, CA 94062	\$ <u>    11,000.</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
140	DALE TAYLOR 2314 N LINCOLN PARK WEST CHICAGO, IL 60614	\$ <u>    10,350.</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
<u>141</u>	JANET LEWIS 1226 N PEGRAM STREET ALEXANDRIA, VA 22304	\$10,220.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
142	BARBETTA FAMILY FOUNDATION 4201 WILSON BOULEVARD ARLINGTON, VA 22203	\$10,150.	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
_143	MICHAEL ROTHMAN 394 BROADWAY NEW YORK, NY 10013	\$10,058.	Person Payroli Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_144	PETER WELCH 1919 CLARENDON BLVD ARLINGTON, VA 22201	\$10,022.	Person Payroll Noncash X (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

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PRO PUBLICA, INC.

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(ď) Type of contribution
_145	CHRISTINE BOURDETTE C/O U.S. BANK PO BOX 3168 PORTLAND, OR 97208	\$10,014.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
146	JESSICA CASE / ARETE ADVISORS 115 BROADWAY NEW YORK, NY 10006	\$10,014.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(ď) Type of contribution
147	ARJUN BHAGAT 459 TRAVERSO AVE LOS ALTOS, CA 94022	\$10,001.	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
148	COXE FUND / SILICON VALLEY COMMUNITY FDN 2440 W EL CAMINO REAL #300 MOUNTAIN VIEW, CA 94040	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(ď) Type of contribution
149	GOLDMAN SACHS GIVES PO BOX 15203 ALBANY, NY 12212	\$10,000.	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
<u>150</u>	ALICE UNDERWOOD CHARITABLE FUND / SCHWAB CHARITABLE 211 MAIN STREET SAN FRANCISCO, CA 94105	\$10,000.	Person X Payroll Noncash (Complete Part II for nencash contributions.)

Name of organization

Employer identification number

PRO PUBLICA, INC.

14-2007220

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additiona	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
151	THE S. DECKER AND SHERRON ANSTROM FAMILY FOUNDATION / THE NATIONAL PHILA 165 TOWNSHIP LINE ROAD JENKINTOWN, PA 19046	\$10,000.	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
<u>152</u>	THE POLANER FAMILY CHARITABLE FUND / VANGUARD CHARITABLE PO BOX 9509 WARWICK, RI 02889-9509	\$10,000.	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
	DHANAM FOUNDATION C/O CTC MYCFO LLC PO BOX 10195 - DEPT. 480 PALO ALTO, CA 94303	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4         THE BLUE BICYCLE FUND / BANK OF         AMERICA CHARITABLE GIFT FUND         100 FEDERAL STREET         BOSTON, MA 02110	Total contributions           \$10,000.	Type of contribution         Person       X         Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
155	THE NARARO FOUNDATION 30TH STREET TRAIN STATION, PO BOX 38613 PHILADELPHIA, PA 19104	\$10,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
156	HILARY MASON AND ADAM MAYER / NORTHERN TRUST CHARITABLE GIVING PROGRAM 225 NORTH MICHIGAN AVENUE	\$10,000.	Person X Payroll Noncash (Complete Part II for
	CHICAGO, IL 60601	1	noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

PRO PUBLICA, INC.

Employer identification number

14 - 2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
157	THE TIMOTHY M. ANDREWS CHARITABLE FUND / SCHWAB CHARITABLE PO BOX 628298 ORLANDO, FL 32862	\$10,000.	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
158	THE FERRON FAMILY CHARITABLE FUND / SCHWAB CHARITABLE 211 MAIN STREET SAN FRANCISCO, CA 94105	\$ <u> </u>	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
159	HOSHINO-QUIGLEY / MORGAN STANLEY GLOBAL IMPACT FUNDING TRUST, INC. C/O 1177 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2714	\$10,000.	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
160	LEAH AND BENJAMIN SPERO / AMERICAN ENDOWMENT FOUNDATION 5700 DARROW ROAD HUDSON, OH 44236	\$10,000.	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
161	EDELMAN 250 HUDSON STREET NEW YORK, NY 10013	\$ <u> </u>	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
162	IRVING & ROBERTA LEWIS CHARITABLE FOUNDATION 2640 GREY OAKS DR. N NAPLES, FL 34105	\$ <u>10,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Part I

Employer identification number

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PRO PUBLICA, INC.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
163	RICHARD RAVITCH FOUNDATION          1115 FIFTH AVENUE         NEW YORK, NY 10128	\$10,000.	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
164	BENJAMIN EISLER 25 CENTRAL PARK WEST NEW YORK, NY 10023	\$10,000.	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
165	HAWLEY FAMILY FUND / COMMUNITY FOUNDATION OF SANTA CRUZ 7807 SOQUEL DRIVE APTOS, CA 95003	\$10,000.	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
166	DAVID B. EDWARDS FUND C/O FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$10,000.	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
167	THE LLEWELLYN FOUNDATION          116 UPLAND ROAD         CAMBRIDGE, MA 02140	\$10,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
168	SANDPIPER FUND, INC. 640 PELHAM ROAD NEW ROCHELLE, NY 10805	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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

Name of organization

PRO PUBLICA, INC.

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Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a)	(b)	(c)	(d)	
<u>No.</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution	
<u>169</u>	ROBERTS FAMILY FOUNDATION2542 12TH AVENUE WSEATTLE, WA 98119	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
<u>No.</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution	
170	DEREK AND LEORA KAUFMAN CHARITABLE FUND / JEWISH COMMUNAL FUND		Person X	
	575 MADISON AVENUE         NEW YORK, NY 10022	\$10,000.	Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
<u>No.</u>	Name, address, and ZIP + 4 LUCIUS T. HILL III AND WENDY Y. HILL	Total contributions	Type of contribution	
_171	FUND / BOSTON FOUNDATION       75 ARLINGTON STREET       BOSTON, MA 02116	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c) Total contributions	(d) Type of contribution	
<u>No.</u>	Name, address, and ZIP + 4         CAVALI FOUNDATION         327 CENTRAL PARK WEST         NEW YORK, NY 10025	\$10,000.	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	
173	JEREMY MINDICH 838 WEST END AVENUE NEW YORK, NY 10025	\$10,000.	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	
174	THE KOIVU FUND / VANGUARD CHARITABLE         PO BOX 9509         WARWICK, RI 02889-9509	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

PRO PUBLICA, INC.

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Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
175	CONANT FAMILY FOUNDATION 445 N. WELLS STREET CHICAGO, IL 60654	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
176	THE LUCIUS N. LITTAUER FOUNDATION, INC./ JEWISH COMMUNAL FUND 575 MADISON AVENUE	\$10,000.	Person X Payroll Noncash (Complete Part II for
	NEW YORK, NY 10022		noncash contributions.)
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution
177	MARILYN LIPMAN 21 OLD BELLE MONTE ROAD CHESTERFIELD, MO 63107	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4 THE WITTRUP AND RHODES FAMILY CHARITABLE FUND/ VANGUARD CHARITABLE PO BOX 9509 WARWICK, RI 02889	Total contributions         \$       10,000.	Type of contribution         Person       X         Payroll
(a)	(b)	(c) Total contributions	(d) Type of contribution
<u>No.</u>	Name, address, and ZIP + 4          DAS CHARITABLE FOUNDATION         3961 COBBLESTONE DRIVE         DALLAS, TX 75229	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d) Type of contribution
<u>No.</u>	Name, address, and ZIP + 4 THE TURNBULL-BURNSTEIN FAMILY CHARITABLE FUND / VANGUARD CHARITABLE	10.000	Person X Payroll Noncash
	<u>PO BOX 9509</u>	\$	(Complete Part II for
	WARWICK, RI 02889		noncash contributions.)

Name of organization

Employer identification number

PRO PUBLICA, INC.

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Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_181	CAROLYN S. BUCKSBAUM REVOCABLE TRUST / <u>MB INVESTMENTS, LLC</u> <u>1 NORTH FRANKLIN STREET</u> <u>CHICAGO, IL 60606</u>	\$10,000.	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
182	CLAUDIA MARSEILLE / SCHWAB CHARITABLE PO BOX 628298 ORLANDO, FL 32862	\$10,000.	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
183	DROR BAR-ZIV 2443 FILLMORE STREET SAN FRANCISCO, CA 94115	\$10,000.	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
184	HOLZER FAMILY FOUNDATION 23 NORTH SADDLE BROOKE DRIVE HO HO KUS, NJ 07423	\$10,000.	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
1.85	RENEE B. FISHER FOUNDATION / SILICON VALLEY COMMUNITY FOUNDATION 2440 W EL CAMINO REAL MOUNTAIN VIEW, CA 94040	\$10,000.	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
186	THOMAS AND MARY GALLAGHER FNDTN 2700 HORSESHOE DRIVE LAS VEGAS, CA 89120	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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PRO PUBLICA, INC.

(a) No,	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
187	ANONYMOUS/ BANK OF AMERICA 100 FEDERAL STREET BOSTON, MA 02110	\$ <u>10,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4         ANONYMOUS/ JOHNSON CHARITABLE GIFT         FUND         3777 WEST FORK ROAD         CINCINNATI, OH 45247	Total contributions           \$10,000.	Type of contribution         Person       X         Payroll
(a) No,	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
189	ANONYMOUS/ THE U.S. CHARITABLE GIFT TRUST 1100 N MARKET STREET WILMINGTON, DE 19890	\$10,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
190	PETER WIRINGA AND AMANDA HUMPAGE 1927 JAMES AVENUE SAINT PAUL, MN 55105	\$9,108.	Person Payroli Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>191</u>	HOLLY GRAY 25 RIVER DRIVE NORWALK, CT 06855-2518	\$9,105.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
192	SURVEYMONKEY ONE CURIOSITY WAY SAN MATEO, CA 94403	\$9,019.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

PRO PUBLICA, INC.

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	Il space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
193	THE JOSEPHINE M. SIMON FUND 1988 C/O CETERA ADVISORS, LLC 4600 SOUTH SYRACUSE STREET DENVER, CO 80237	\$8,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
194	DAVID AND JENNIFER MICHAEL FAMILY FUND / VANGUARD CHARITABLE PO BOX 9509 WARWICK, RI 02889	\$8,000.	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
<u>195</u>	THE SLOAN FAMILY FOUNDATION 5 HATHAWAY LANE MANHASSET, NY 10030	\$7,500.	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
196	GIBSON, DUNN & CRUTCHER LLP 333 SOUTH GRAND AVENUE LOS ANGELES, CA 90071	\$ <u>7,500.</u>	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>No.</u>	LESLIE C. AND LEONARD A. SHAPIRO FAMILY FOUNDATION / STOCK YARDS BANK A 11450 NORTH MERIDIAN STREET CARMEL, IN 46032	\$7,500.	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
198	THE COULTER/WEEKS CHARITABLE FOUNDATION OF THE AYCO CHARITABLE FOUN PO BOX 15203	\$7 <u>,500.</u>	Person X Payroll Noncash (Complete Part II for
	ALBANY, NY 12212-5203		noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

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PRO PUBLICA, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> 199</u>	THE VMWARE FOUNDATION / VANGUARD CHARITABLE PO BOX 9509 WARWICK, RI 02889	\$7,386.	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
200	EDWARD AND MARJORIE GOLDBERGER FOUNDATION C/O KINZEL & CO., LLC 195 FAIRFIELD AVENUE WEST CALDWELL, NJ 07006	\$7,000.	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
201	TAMARA KILLION 19230 PEACH TREE ROAD DICKERSON, MD 20842	\$6,675.	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
202	THE TUDOR FAMILY FOUNDATION 121 GARFIELD AVENUE CHERRY HILL, NJ 08002	\$6,250.	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
203	YALE AND IRENE GOTSDINER FAMILY / JEWISH FEDERATION OF OMAHA FOUNDATION 333 SOUTH 132ND STREET OMAHA, NE 68154	\$6,000.	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
204	HARRIS ABRAM GILBERT / CHARLES SCHWAB 211 MAIN STREET SAN FRANCISCO, CA 94105	\$6,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)

Employer identification number

PRO PUBLICA, INC.

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
205	ALEXANDRA SIMONE GEORGE MEMORIAL FUND / CALIFORNIA COMMUNITY FOUNDATION 221 S. FIGUEROA STREET LOS ANGELES, CA 90012	\$6,000.	Person X Payroll Noncash (Complete Part It for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
206	THE JIM COX, JR. FOUNDATION 3414 PEACHTREE ROAD, N.E. ATLANTA, GA 30326	\$6,000.	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
207	MULLER FAMILY FOUNDATION         12938 GREENLEAF STREET         STUDIO CITY, CA 91604	\$6,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
208	MARY STEELE MCS FOUNDATION / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$5,900.	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
209	THOMAS DURST 1071 VALLEJO STREET SAN FRANCISCO, CA 94133	\$ <u> </u>	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
210	GPK FOUNDATION 1400 KINGSBURY DRIVE CASPER, WY 82609	\$5,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule 8 (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

PRO PUBLICA, INC.

Employer identification number

14-2007220

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
211	CIRCLE OF SERVICE FOUNDATION 30 S. WACKER DRIVE, SUITE 2500 CHICAGO, IL 60606	\$ <u>5,480.</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
212	JORDAN SWARTZ 241 ATLANTIC AVENUE BROOKLYN, NY 11201	\$ <u> </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
213	CHRISTOPHER AND CAROLYN BRANSON 7 TIDEWATER COVE FALMOUTH, ME 04105	\$5,345.	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
_214	MCMASTER-CARR SUPPLY COMPANY PO BOX 150 ELMHURST, IL 60126	\$ <u>5,325.</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
_215	PAUL ASENTE AND RON JENKS 2538 BREWSTER AVENUE REDWOOD CITY, CA 94062	\$5,220.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
216	ASHLEY TIMMER 245 W 99TH STREET NEW YORK, NY 10025	\$ <u> </u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Part I

Employer identification number

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(Complete Part II for noncash contributions.)

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14-2007220

#### (a)(b) (c) Total contributions Type of contribution No. Name, address, and ZIP + 4 217 MARIA GOTSCH Person Pavroll Noncash ONE BATTERY PARK PLAZA, 5TH FL 5,175. \$ (Complete Part II for noncash contributions.) NEW YORK, NY 10004 (b) (c) (a) Type of contribution **Total contributions** No. Name, address, and ZIP + 4 ERIC LEHMAN Person 218 Payroll Noncash 5,175. 2061 CAROL AVENUE (Complete Part II for noncash contributions.) MOUNTAIN VIEW, CA 94040 (c)(b) (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person 219 STERLING SODERLIND Payroll 5,000. Noncash \$ **459 PASSAIC AVENUE** (Complete Part II for noncash contributions.) WEST CALDWELL, NJ 07006 (c) (b) (a)**Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person THE EISNER FOUNDATION, INC. 220 Payroli Noncash 5,000. 9401 WILSHIRE BLVD. \$ (Complete Part II for noncash contributions.) BEVERLY HILLS, CA 90212-2946 (c) (b) (a)Type of contribution **Total contributions** Name, address, and ZIP + 4 No. Person THE CAMPBELL FAMILY FOUNDATION 221 Payroll Noncash 5,000. 3530 WILLIAMSBURG ROAD \$ (Complete Part II for noncash contributions.) DAVIDSONVILLE, MD 21035 (c) (b) (a) Type of contribution Total contributions Name, address, and ZIP + 4 No. KUTNICK FOUNDATION /U.S. TRUST BANK OF Person AMERICA 222 Payroli 5,000. Noncash 1300 AMERICAN BOULEVARD, MSC 0303 \$

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

#### PRO PUBLICA, INC.

823452 11-08-18

PENNINGTON, NJ 08534-4127

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

PRO PUBLICA, INC.

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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
_223	BETTY MILLARD FOUNDATION 360 WEST 22ND STREET STREET NEW YORK, NY 10011	\$ <u> </u>	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
224	TARA DWYER317 W 89TH STREETNEW YORK, NY 10024	\$5,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
225	THE SHERWOOD FAMILY TRUST C/O KESSLER, SCHNEIDER & SCHELTINGA 15260 VENTURA BOULEVARD SHERMAN OAKS, CA 91403	\$ <u>5,000.</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
226	GALEN FAMILY FOUNDATION 27791 HALPER LAKE DRIVE RANCHO MIRAGE, CA 92270	\$ <u> </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
227	ELSAM FUND / NEW YORK COMMUNITY TRUST 909 THIRD AVENUE NEW YORK, NY 10022	\$5,000.	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
228	LAKE ROAD FOUNDATION          839 ORIENTA AVENUE         MAMARONECK, NY 10543	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

#### Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Name of organization

Employer identification number

PRO PUBLICA, INC.

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
229	ELLEN P. TYKESON & KEN HIDAY / SCHWAB CHARITABLE 211 MAIN STREET SAN FRANCISCO, CA 94105	\$5,000.	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
230	DIANE HALLMAN		Person X
	644 17TH STREET BROOKLYN, NY 11218	\$5,000.	Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
231	CYNTHEA GEERDES AND TODD MARTINEZ         26040 ELENA ROAD         LOS ALTOS HILLS, CA 94022	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d) Type of contribution
<u>No.</u>	Name, address, and ZIP + 4 HEYWOOD CHARITABLE FUND / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$5,000.	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
233	ANN CHERNICOFF 4409 RIDGE STREET CHEVY CHASE, MD 20815	\$ <u>5,000.</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
234	ROSENBERG/SLAFSKY FAMILY FUND TRUST / AMERICAN ENDOWMENT FOUNDATION 5700 DARROW ROAD HUDSON, TX 44236	\$ <u> </u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

#### Schedule B (Form 990, 990 EZ, or 990 PF) (2018) Name of organization

Employer identification number

PRO PUBLICA, INC.

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	l space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
235	ROBERT TRIPP 1 RIDGLEY ROAD CHIDDINGFOLD, SURREY, UNITED KINGDOM GU8 4QQ	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	THE RICHARD S. MCKINLEY FUND / SCHWAB		Person X
	CHARITABLE 211 MAIN STREET SAN FRANCISCO, CA 94105	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	a ype or contribution
_237	LAUREN WECK 4800 EXCELSIOR BLVD. MINNEAPOLIS, MN 55416	\$ <u> </u>	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
238	VHF FOUNDATION         126 OAKDALE ROAD         NEWTOWN, MA 02461	\$5,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
239	JOANNA STONE HERMAN AND LAURENCE R. HERMAN 150 E 77TH STREET NEW YORK, NY 10075-1927	\$ <u>5,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution
240	TWIG FOUNDATION, INC. PO BOX 876 CAMDEN ME 04843	\$5,000.	Person X Payroil Noncash (Complete Part II for noncash contributions.)

#### Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Name of organization

Employer identification number

PRO PUBLICA, INC.

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
241	ZANKEL CHARITABLE LEAD TRUST 333 GRANT AVENUE SAN FRANCISCO, CA 94108	\$5,000.	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
242	KRELL FAMILY FOUNDATION          1 CENTRAL PARK WEST         NEW YORK, NY 10023	\$5,000.	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
243	CARYL RATNER       8     WEST 40TH STREET       NEW YORK, NY 10018	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d) Type of contribution
<u> </u>	Name, address, and ZIP + 4 THE BEN WILLIAMS RI/MBC FUND #3 / VANGUARD CHARITABLE PO BOX 9509 WARWICK, RI 02889	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>	MCINTYRE FAMILY FUND C/O THE COMMUNITY FOUNDATION BOULDER COUNTY 1123 SPRUCE STREET BOULDER, CO 80302	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>	CRAIG ZIMMERMAN 13303 LENOX WAY LOS ALTOS HILL, CA 94022-3510	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

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PRO PUBLICA, INC.

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
247	SS210 DONOR ADVISED FUND / TRIANGLE COMMUNITY FOUNDATION PO BOX 12729 DURHAM, NC 27709	\$5,000.	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
248	JAMES HOLMES          19 EDDLEWOOD PLACE         MOUNT LAUREL, NJ 08054	\$ <u>5,000.</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
249	THE SKOLL FUND 250 UNIVERSITY AVENUE PALO ALTO, CA 94301	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>No.</u>	HILARY DONOVAN AND SKEF WHOLEY FUND /VANGUARD CHARITABLE PO BOX 9509 WARWICK, RI 02889	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>No.</u>	ALETTA AND RICHARD TIBBETTS /SCHWAB <u>CHARITABLE</u> <u>PO BOX 628298</u> <u>ORLANDO, FL 32862</u>	\$5,000.	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
252	ANNE PETERSON BARRY/ MORGAN STANLEY GLOBAL IMPACT FUNDING TRUST, INC. 1177 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2714	\$ <u>5,000.</u>	Person X Payroli Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

PRO PUBLICA, INC.

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#### Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (d) (c) (a) (b) Total contributions Type of contribution No. Name, address, and ZIP + 4 LEMPP KERBIS TRUST / UBS DONOR-ADVISED X 253 FUND Person Payroll Noncash 5,000. 165 TOWNSHIP LINE ROAD (Complete Part II for noncash contributions.) JENKINTOWN, PA 19046 (d) (c) (a) (b) Type of contribution **Total contributions** No. Name, address, and ZIP + 4 X BEATRICE LIU Person 254 Payroll Noncash 5,000. 360 EAST 88TH STREET (Complete Part II for noncash contributions.) NEW YORK, NY 10128 (d) (c) (b) (a) Type of contribution Total contributions Name, address, and ZIP + 4 No. X Person 255 ROGER AND MARGOT MILLIKEN Payroll 5,000. Noncash \$ **157 PINE STREET** (Complete Part II for noncash contributions.) PORTLAND, ME 04102 (d) (c) (b) (a) Type of contribution **Total contributions** Name, address, and ZIP + 4 No. SUSAN S. & KENNETH L. WALLACH Х Person 256 FOUNDATION Payroll Noncash 5,000. THREE MANHATTANVILLE ROAD \$ (Complete Part II for noncash contributions.) PURCHASE, NY 10577 (c) (d) (b) (a) Type of contribution **Total contributions** Name, address, and ZIP + 4 No. SUTTON FAMILY CHARITABLE FUND / VANGUARD CHARITABLE Person 257 Payroll 5,000. Noncash PO BOX 9509 \$ (Complete Part II for noncash contributions.) WARWICK, RI 02889 (d) (c) (b) (a) Type of contribution **Total contributions** Name, address, and ZIP + 4 No. THE BETTNER FAMILY FUND / GOLDMAN X SACHS PHILANTHROPY FUND Person 258 Payroll 5,000. Noncash \$ PO BOX 15203 (Complete Part II for

ALBANY, NY 12212-5203

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

noncash contributions.)

Name of organization

PRO PUBLICA, INC.

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Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution
259	THE GREAT ISLAND FOUNDATION          115 EAST 69TH STREET         NEW YORK, NY 10021	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
260	JANET E. TRAUB GIFT FUND / SCHWAB CHARITABLE 211 MAIN STREET SAN FRANCISCO, CA 94105	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
<u>No.</u> 261	Name, address, and ZIP + 4         RHODES CHARITABLE FUND / FIDELITY         CHARITABLE         PO BOX 770001         CINCINNATI, OH 45277	Total contributions	Type of contribution Person Payroli Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4 BERNARD LEWIS FUND / JEWISH COMMUNITY FOUNDATION 4950 MURPHY CANYON ROAD SAN DIEGO, CA 92123	Total contributions	Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(C)	(d) Type of contribution
<u> </u>	Name, address, and ZIP + 4 <u>SILVIO CHIANESE</u> <u>17520 FAYSMITH AVE.</u> <u>TORRANCE, CA 90504</u>	Total contributions	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
<u>264</u>	Name, address, and ZIP + 4 KEET FAMILY FUND / ADIRONDACK FOUNDATION PO BOX 288	Total contributions           \$5,000.	Type of contribution Person X Payroll Noncash (Complete Part II for
	LAKE PLACID, NY 12946		noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

PRO PUBLICA, INC.

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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
_265	HELIANTHUS FUND / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$5,000.	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
266	BILL DONAHUE / SCHWAB CHARITABLE PO BOX 628298 ORLANDO, FL 32862	\$5,000.	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
267_	DIANA STARK 1325 HOWARD AVENUE BURLINGAME, CA 94010	\$5,000.	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
268	HOLLYWOOD FOREIGN PRESS ASSOCIATION 646 NORTH ROBERTSON BOULEVARD WEST HOLLYWOOD, CA 90069	\$5,000.	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
269	GREGORY AND KATHRYN SOLOMON 899 LEXINGTON AVENUE NEW YORK, NY 10065	\$5,000.	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
<u>270</u>	ROCKER FAMILY FOUNDATION / JEWISH COMMUNITY FOUNDATION OF GREATER METROW 901 ROUTE 10 PO BOX 929 WHIPPANY, NJ 07981	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

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PRO PUBLICA, INC.

(d) (c) (a)(b) Total contributions Type of contribution Name, address, and ZIP + 4 No. ROSENBERG / BOL FAMILY GIVING / X FIDELITY CHARITABLE Person 271Payroll Noncash 5,000. PO BOX 770001 (Complete Part II for noncash contributions.) CINCINNATI, OH 45277 (c) (d) (b) (a) Total contributions Type of contribution No. Name, address, and ZIP + 4 ETTINGER FOUNDATION / ROCKEFELLER Person X CAPITAL MGMT 272 Payroll 5,000. Noncash 10 ROCKEFELLER PLAZA \$ (Complete Part II for noncash contributions.) NEW YORK, NY 10020 (d) (c) (h)(a) Type of contribution **Total contributions** Name, address, and ZIP + 4 No. DAVID RADER AND JANELLE LAUDONE / Χ Person PAYPAL GIVING FUND 273 Payroli Noncash 5,000. \$ 1250 I ST NW (Complete Part II for noncash contributions.) WASHINGTON, DC 20005 (c) (d) (b) (a) Type of contribution **Total contributions** Name, address, and ZIP + 4 No. [X] Person THE ZANKEL FUND 274Payroll 5,000. Noncash 70 WASHINGTON STREET \$ (Complete Part II for noncash contributions.) BROOKLYN, NY 11201 (d) (c) (b) (a) Total contributions Type of contribution Name, address, and ZIP + 4 No. WATERSTON FAMILY FOUNDATION, INC. C/O ZEIDERMAN MANAGEMENT CORPORATION Person X 275 Payroll 5,000. Noncash \$ 170 AVERY ROAD (Complete Part II for noncash contributions.) GARRISON, NY 10524 (d) (c) (b) (a) Type of contribution Total contributions Name, address, and ZIP + 4 No. X Person TIGER BARON FOUNDATION 276 Payroll Noncash 5,000. \$ 233 BROADWAY (Complete Part II for noncash contributions.) NEW YORK, NY 10279

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

Schedule B	(Form 990,	990-EZ,	or 990-PF	-) (2018)
Name of org	anization			

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PRO PUBLICA, INC.

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Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(b)	(c)	(d)
Name, address, and ZIP + 4	Total contributions	Type of contribution
WILLIAM AND DEBBIE BECKER FUND / THE U.S. CHARITABLE GIFT TRUST 8910 PURDUE ROAD INDIANAPOLIS, IN 46268	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(b)	(c)	(d)
Name, address, and ZIP + 4	Total contributions	Type of contribution
		Person X
<u>PO BOX 770001</u> <u>CINCINNATI, OH 45277</u>	\$ <u> </u>	Payroll Noncash (Complete Part II for noncash contributions.)
(b)	(c)	(d)
Name, address, and ZIP + 4	Total contributions	Type of contribution
FINLEY FAMILY CHARITABLE FOUNDATION 631 SOQUILI TRAIL JASPER, GA 30143	\$ <u> </u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(b)	(c)	(d)
Name, address, and ZIP + 4	Total contributions	Type of contribution
HART GIVING FUND / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
{b}	(c)	(d)
Name, address, and ZIP + 4	Total contributions	Type of contribution
LINCOLN HEALTHCARE FOUNDATION 838 KENMORE DRIVE CHAPEL HILL, NC 27514	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(b)	(c)	(d)
Name, address, and ZIP + 4	Total contributions	Type of contribution
CHRIS WOODBURY           CHRIS WOODBURY           155 AVENUE OF THE AMERICAS           NEW YORK, NY 10013	\$ <u> </u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
	(b) Name, address, and ZIP + 4 WILLIAM AND DEBBIE BECKER FUND / THE U.S. CHARITABLE GIFT TRUST 8910 PURDUE ROAD INDIANAPOLIS, IN 46268 (b) Name, address, and ZIP + 4 SHERMAN FAMILY FOUNDATION / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277 (b) Name, address, and ZIP + 4 FINLEY FAMILY CHARITABLE FOUNDATION 631 SOQUILI TRAIL JASPER, GA 30143 (b) Name, address, and ZIP + 4 HART GIVING FUND / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277 (b) Name, address, and ZIP + 4 LINCOLN HEALTHCARE FOUNDATION 838 KENMORE DRIVE CHAPEL HILL, NC 27514 (b) Name, address, and ZIP + 4 CHRIS WOODBURY 155 AVENUE OF THE AMERICAS	(b)     (c)       Name, address, and ZIP + 4     Total contributions       WILLIAM AND DEBLE BECKER FUND / THE     \$       U.S. CHARITABLE GIFT TRUST     \$       8910 FURDUE ROAD     \$       INDIANAPOLIS, IN 46268     (c)       Name, address, and ZIP + 4     Total contributions       SHERMAN FAMILY FOUNDATION / FIDELITY     (c)       CINCINNATI, OH 45277     \$       (b)     (c)       Name, address, and ZIP + 4     Total contributions       FINLEY FAMILY CHARITABLE FOUNDATION     \$       G1 SOQUILI TRAIL     \$       JASPER, GA 30143     (c)       (b)     (c)       Name, address, and ZIP + 4     Total contributions       HART GIVING FUND / FIDELITY CHARITABLE     \$       PO BOX 770001     \$     \$       (b)     (c)       Name, address, and ZIP + 4     Total contributions       HART GIVING FUND / FIDELITY CHARITABLE     \$       PO BOX 770001     \$     \$       (c)     (c)     Total contributions       HART GIVING FUND / FIDELITY CHARITABLE     \$       PO BOX 770001     \$     \$       (b)     (c)     Total contributions       LINCOLN HEALTHCARE FOUNDATION     \$     \$       838 KENMORE DRIVE     \$     \$

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)
Name of organization

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Employer	identification r	umber

PRO PUBLICA, INC.

14-2007220

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
283	JESSE AND JOAN KUPFERBERG FOUNDATION / FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	\$5,000.	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.)
(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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Payroli Payroli Poncash Payroli Poncash Part II for poncash contributions.

Schedule B (Form 990, 990 EZ, or 990 PF) (2018)	Page <b>3</b>
Name of organization	Employer identification number

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### PRO PUBLICA, INC.

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditio	nal space is needed.	
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions.)	(d) Date received
	10,000 SHARES OF FANH STOCK			
<u> </u>				
-		\$_	280,100.	10/12/18
(a) No.	(b)		(c)	(d)
from Part I	Description of noncash property given		FMV (or estimate) (See instructions.)	Date received
	200 SHARES OF XME STOCK AND 400 SHARES OF TMO STOCK AND			
37 4	135 SHARES OF CISIX STOCK			
-		\$_	112,566.	09/14/18
(a) No.	/L \		(c)	(d)
from Part I	(b) Description of noncash property given		FMV (or estimate) (See instructions.)	Date received
	L68 SHARES OF VISA INC (V) STOCK	-		
83				
-		\$_	25,129.	09/25/18
(a)			(c)	(d)
No. from	(b) Description of noncash property given		FMV (or estimate) (See instructions.)	Date received
Part I	L60 SHARES OF APPLE INC (AAPL) STOCK	-		
100   ]				
		\$_	24,997.	12/31/18
(a)			(c)	
No. from	(b) Description of noncash property given		FMV (or estimate) (See instructions.)	(d) Date received
Part I	100 SHARES OF NORFOLK SOUTHERN CORP (NSC) STOCK		· · · · · · · · · · · · · · · · · · ·	
114				
-		\$_	17,269.	08/10/18
(a)				
No.	(b)		(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given		(See instructions.)	Date received
6	534 SHARES OF DENNY'S STOCK (DENN)			
141   -				
-		\$_	10,220.	06/21/18

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Name of organization

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#### PRO PUBLICA, INC.

14-2007220

Part II	Noncash Property (see instructions). Use duplicate copies of Part II	if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	188 SHARES OF PUBLIC SERVICE ENTERPRISE GROUP (PEG)		
143		namen n	
		\$10,058.	11/26/18
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Parti	Description of noncash property given	(See instructions.)	Date received
	142 SHARES OF VANGUARD (VTSMX) STOCK		
144			
	· · · · · · · · · · · · · · · · · · ·	\$ 10,022.	07/30/18
		- <u>\$ 10,022.</u>	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
Fails	88 SHARES OF CHEVRON (CVX) STOCK		
145			
			10,00,110
		\$9,979.	10/23/18
(a)			·····
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(See instructions.)	Date received
Part I	147 SHARES OF EXXON MOBIL (XOM)		
146		—	
		\$10,014.	12/20/18
(a)			*****
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(See instructions.)	Date received
Part I	151 SHARES OF HAGIX STOCK		
190	IJI BIRRED OF INGIN GLOCK	-	
<u> </u>			
		\$9,108.	11/30/18
(a) No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(See instructions.)	Date received
Parti			
191	150 SHARES OF C S X CORP (CSX) STOCK	-	
<u>+ - +  </u>			
		\$\$,105.	12/26/18

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)	Page 3
Name of organization	Employer identification number

#### PRO PUBLICA, INC.

14-2007220 Part II Noncash Property (see instructions) Lise duplicate copies of Part II if additional space is needed.

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	25 SHARES OF ADOBE (ADBE) STOCK		
215			
		\$5,220.	12/21/18
(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
		\$	
	3 (Form 990, 990-EZ, or 990-PF) (2018)		Page 4
-----------------	--	---	--
Name of or	rganization		Employer identification number
PRO PU	JBLICA, INC.		14-2007220
Part III	from any one contributor. Complete columns is	through (e) and the following line ent	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the year ry. For organizations
	completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	charitable, etc., contributions of \$1,000 or I	ess for the year. (Enter this info. once.) > \$
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<u> </u>		
Γ		(e) Transfer of gift	
	<b>T</b>	- 1 77175 - 4	
	Transferee's name, address, a		Relationship of transferor to transferee
	<u></u>		
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		······	
Γ		(e) Transfer of gift	
			Relationship of transferor to transferee
	Transferee's name, address, a		
		······	
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I		(0) 000 01 give	
		· · · · · · · · · · · · · · · · · · ·	
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
F			

.

sc	HEDULE D	Supplement	al Financial Statements		OMB No. 1545-0047
	m 990)	Complete if the org	anization answered "Yes" on Form 990,		2018
• •	in and the Transmit	Part IV, line 6, 7, 8, 9, 10	, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.		Open to Public
	Iment of the Treasury at Revenue Service		90 for instructions and the latest informatic	<u>n.</u>	Inspection
Nam	e of the organizati			Em	ployer identification number
0-		PRO PUBLICA, INC.	d Funds or Other Similar Funds or	<u> </u>	14-2007220
Ра	*	-		ACCOU	itts. Complete if the
	organizatio	n answered "Yes" on Form 990, Part IV, lir	le 6. (a) Donor advised funds	(b) Eur	nds and other accounts
	Tetel sumber of a	ad of year		(0) 1 0	
1		nd of year f contributions to (during year)			
3		f grants from (during year)			
4		t end of year			
5			writing that the assets held in donor advised f	unds	
-	•		exclusive legal control?		Yes No
6			dvisors in writing that grant funds can be used		
			r donor advisor, or for any other purpose conf		
	impermissible priva				Yes No
Pa	rt II Conserv	ation Easements. Complete if the or	ganization answered "Yes" on Form 990, Part	IV, line 7	•
1	Purpose(s) of cons	ervation easements held by the organization			
	Preservation	of land for public use (e.g., recreation or e		• •	
	Protection o	f natural habitat	Preservation of a certified	l historic	structure
		of open space			
2	Complete lines 2a	through 2d if the organization held a qualit	ied conservation contribution in the form of a	conserva	
	day of the tax year			_5-3-64 	Held at the End of the Tax Year
а					
þ	•	-			······
с			ucture included in (a)	20	
d			after 7/25/06, and not on a historic structure		
	listed in the Nation	al Register		2d	
3		vation easements modified, transferred, rel	eased, extinguished, or terminated by the org	anization	during the tax
	year 🕨				
4		where property subject to conservation eas			
5		tion have a written policy regarding the per			Yes No
		orcement of the conservation easements it	holds? holds? handling of violations, and enforcing conserva		
6	Stan and volunteer	r nours devoted to morntoving, inspecting,	harding of violations, and emotoring conserve		smonte dannig the year
7	Amount of expons	as incurred in monitoring inspecting hand	Iling of violations, and enforcing conservation	easemer	ts during the year
7	► \$	a meaned in monitoring, inspecting, nare			5 .
8		vation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)(4)	(B)(i)	
0					Yes No
9	In Part XIII describ	be how the organization reports conservation	on easements in its revenue and expense stat	ement, a	nd balance sheet, and
Ū			tion's financial statements that describes the o		
	conservation ease	ments			
Pa	rt III   Organiza	ations Maintaining Collections of	Art, Historical Treasures, or Other	Simila	ır Assets.
5		the organization answered "Yes" on Form			······································
1a	If the organization	elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statement	and bala	nce sheet works of art,
			nibition, education, or research in furtherance	of public	service, provide, in Part XIII,
		note to its financial statements that descri			
b	If the organization	elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement and	balance	sheet works of art, historical
	treasures, or other	similar assets held for public exhibition, eq	ducation, or research in furtherance of public :	service, p	rovide the following amounts
	relating to these ite	əms:			
					\$
	(ii) Assets include	d in Form 990, Part X			\$
2	If the organization	received or held works of art, historical tre	asures, or other similar assets for financial gai	n, provid	e
		ints required to be reported under SFAS 1		•	•
а					\$
	Assets included in				
LHA	For Paperwork Re	eduction Act Notice, see the Instructions	s for Form 990.		Schedule D (Form 990) 2018

		LICA, INC.						4-20			age 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	asures, of	r Other	Similar	Assets	contir	ued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the f	ollowing that	are a sigr	nificant us	e of its c	ollection	items	
	(check all that apply):		<b>ر</b>								
а	Public exhibition	c			hange progra						
b	Scholarly research	e	• [] •	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	how th	ey further th	le organizatio	n's exemp	ot purpos	e in Part i	XIII.		
5	During the year, did the organization solicit o	r receive donations (	of art, his	storical treas	sures, or othe	er similar a	ssets				
_	to be sold to raise funds rather than to be ma								Yes		] No
Par	t IV Escrow and Custodial Arran								ine 9, or		
Lanconations	reported an amount on Form 990, Pa			•							
19	Is the organization an agent, trustee, custodi		liary for c	contributions	s or other ass	ets not in	cluded				
10	on Form 990, Part X?							[	Yes		No
6	If "Yes," explain the arrangement in Part XIII								_		-
b		and complete the los	notting a						Amoun		
_							10				
	Beginning balance						1d				
	Additions during the year										
е	Distributions during the year						<u>1e</u>				
f	Ending balance								٦		7
	Did the organization include an amount on F						<i>YY</i> Y	I	_ Yes		j No T
	If "Yes," explain the arrangement in Part XIII.										
Par	t V Endowment Funds. Complete	1	swered	"Yes" on Fo	2						
		(a) Current year	(b) P	rior year	(c) Two yea	rs back   (e	d) Three ye	ears back	(e) ⊦ou	years	Dack
<b>1</b> a	Beginning of year balance										
b	Contributions										
с	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities										
	and programs										
	Administrative expenses										
f	· · · · · · · · · · · · · · · · · · ·										
g	End of year balance Provide the estimated percentage of the curr	L	a (lina 1 c	u column (a'	)) held as:				<u></u>		
2			% %	<b>μ</b> , σοιατιτί (α,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
а	Board designated or quasi-endowment	%	~~								
b	Permanent endowment										
c	Temporarily restricted endowment										
	The percentages on lines 2a, 2b, and 2c sho							4°			
3a	Are there endowment funds not in the posse	ession of the organiza	ation that	t are held ar	na administer	ed for the	organiza	uon		Vee	N.
	by:									Yes	No
	(i) unrelated organizations								<u>3a(i)</u>		
	(ii) related organizations						••••••		3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza					· · · · · · · · · · · · · · · · · · ·	. ,		<u>_3b</u> _		
4	Describe in Part XIII the intended uses of the	organization's endo	wment f	unds.							
Pa	t VI Land, Buildings, and Equipm	nent.									
1	Complete if the organization answere	d "Yes" on Form 990	), Part IV	, line 11a. S	See Form 990	, Part X, li	ne 10.				
	Description of property	(a) Cost or o			or other		cumulate	d	(d) Boo	k valu	e
		basis (investi	ment)	basis	(other)	dep	reciation				
10	Land										
	Buildings										
		l		24	0,348.		66,95	55.	17	3,3	93.
	Leasehold improvements				8,814.	4	04,90	)2.		3,9	
	Equipment	1			9,970.		68,01			1,9	
	Other		Y colum							9,2	
Tota	I. Add lines ta arrough te. (Column id) must e	auai runn 330. Fan	<u>n. souuu</u>	<u>и. и. ин</u> с. I	with the second second			in the second			

Schedule D (Form 990) 2018

chedule D (F	- Form 990)	2018		PRO	PUB	LICA,	r

# Schedule D (Form 990) 2018 PRO PUBLI Part VII Investments - Other Securities.

(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		
) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) >		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes" or	Form 990, Part IV, line	
(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)		
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) 🕨		
Part IX Other Assets.		
Complete if the organization answered "Yes" or		e 11d. See Form 990, Part X, line 15.
(a) De	escription	(b) Book value
(1)		
(2)		
(3)		

INC.

(5)	
(6)	
(7)	
(8)	

(4)

(9)

Total. (Column (b) must equal Form 990. Part X. col. (B) line 15.)

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)			
(3)			_
(4)			_
(5)			_
(6)			_
(7)			
(8)			_
(9)			
	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	>	

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the 2. organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2018 PRO PUBLICA, INC.			14-	2007220 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents With I	Revenue per Re	eturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ι,			
1	Total revenue, gains, and other support per audited financial statements			1	26,521,693.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-261		
b	Donated services and use of facilities				
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)				
е				2e	-261.
з	Subtract line 2e from line 1			3	26,521,954.
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	163,979		
c	Add lines 4a and 4b			4c	163,979.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.)			5	26,685,933.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements			1	23,951,628.
1 2				1	23,951,628.
	Total expenses and losses per audited financial statements			1	23,951,628.
2	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	. 2a			23,951,628.
2 a	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b			23,951,628.
2 a	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b 2c		1	23,951,628.
2 a b c	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c 2d		1 2e	0.
2 a b c d	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d			
2 a b c d e	Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d	2a 2b 2c 2d			0.
2 b c d e 3	Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1	2a 2b 2c 2d		 	0.
2 b c d e 3 4	Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d 4a		 	0. 23,951,628.
2 b c d e 3 4	Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 2d 4a 4b	152,833.	2e 3	0. 23,951,628. 152,833.
2 9 0 9 0 4 3 4 9 5	Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a 2b 2c 2d 2d 4a 4b	152,833.		0. 23,951,628.

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 RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF

THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED. MANAGEMENT

HAS DETERMINED THAT THE ORGANIZATION HAD NO UNCERTAIN TAX POSITIONS THAT

WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION OR DISCLOSURE. THE

ORGANIZATION IS NO LONGER SUBJECT TO EXAMINATIONS BY THE APPLICABLE TAXING

JURISDICTIONS FOR PERIODS PRIOR TO 2015.

### PART XI, LINE 4B - OTHER ADJUSTMENTS:

### REIMBURSEMENTS OF LEGAL DEFENSE EXPENSES REPORTED ON PART

152,833.

11,098.

#### LOSS ON DISPOSAL OF ASSET

Schedule D (Form 990) 2018 PRO PUBLICA, INC. Part XIII Supplemental Information (continued)	14-2007220	Page 5
LOSS ON FOREIGN CURRENCY EXCHANGE		48.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	163,9	979.
PART XII, LINE 4B - OTHER ADJUSTMENTS:		
REIMBURSEMENTS OF LEGAL DEFENSE EXPENSES REPORTED ON PART		
VIII	152,8	333.
	· · · · · · · · · · · · · · · · · · ·	
		<u> </u>
		***

SCHEDULE I (Form 990)	0 Q (	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	Other Assistance to Organizations, , and Individuals in the United State	e to Organi in the Unit	zations, ed States		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service		Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.	the organization answered "Yes" on Form 990, Part IV, li Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.	on Form 990, Part 1 990. the latest inform:	. IV, line 21 or 22. ation.		Open to Public Inspection
Name of the organization PRO PUBLICA,	CA, INC.						Employer identification number $14-2007220$
Part I General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the orants or assistance?	to substantiate the	amount of the grants o	or assístance, the g	rantees' eligibility l	or the grants or assis	tance, and the selectio	۲۵ میں اور
2 Describe in Part IV the organization's procedures for monitoring the use of	ocedures for monito	oring the use of grant f	grant funds in the United States.	States.	4		]
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Domestic Organiz	ations and Domestic	Governments. Co	omplete if the orga	nization answered *Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if	55,000. Part II can	be duplicated if additio	additional space is needed	d.			
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CAPITAL CITY PRESS, JUL							PARTICIPATION IN LOCAL
							REPORTING NETWORK
BATON ROUGE, LA 70810	72-0146160		73,200.	.0			INITIATIVE
CHARLESTON NEWSPAPERS							PARTICIPATION IN LOCAL
IUUI VIRGINIA ST E							REPORTING NETWORK
CHARLESTON, WV 25301	55-0676079		53,218.	.0			INITIATIVE
COMMUNITY COMMUNICATIONS, INC. (WMFE) - 11510 E COLONIAL DR -							PARTICIPATION IN LOCAL REPORTING NETWORK
о, FL 32817	59-6155012	501(C)(3)	62,220	0.			INITIATIVE
MALHEUR MEDIA, LLC							PARTICIPATION IN LOCAL
142 CHEMAWA RD N							REPORTING NETWORK
KEIZER, OR 97303	47-5030251		46,652.	.0			INITIATIVE
SOUTH BEND TRIBUNE							PARTICIPATION IN LOCAL
225 W COLFAX AVE SOUTH BEND, IN 46601	35-1381571		53,734.	.0			REPORTING NETWORK INITIATIVE
SOUTHERN ILLINOISAN							PARTICIPATION IN LOCAL
710 N ILLINOIS AVE							
CARBONDALE, IL 62901	42-0823980		50,752.	o.			INITIATIVE
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	ind government or	janizations listed in the	e line 1 table				▲
3 Enter total number of other organizations listed in the line 1 table	s listed in the line 1	l table					• • • • • • • • • • • • • • • • • • • •
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instructi	ons for Form 990.					Schedule I (Form 990) (2018)

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632101 11-02-18

Page 1								(066
14-2007220 Pé		(h) Purpose of grant or assistance	PARTICIPATION IN LOCAL REPORTING NETWORK INITIATIVE					Schedule I (Form 990)
	t II.)	(g) Description of non-cash assistance						
	Organizations in the United States (Schedule I (Form 990), Part II.)	(f) Method of valuation (book, FMV, appraisal, other)						
	ited States (Sch	(e) Amount of non-cash assistance	0.					
	izations in the Un	(d) Amount of cash grant	49,776.					
	ernments and Organ	<b>(c)</b> IRC section if applicable						
CA, INC.	ssistance to Gove	(b) EIN	85-0095953					_
Schedule I (Form 990) PRO PUBLICA,	Part II Continuation of Grants and Other Assistance to Governments and	(a) Name and address of organization or government	THE NEW MEXICAN, INC. 202 E. Marcy St. Santa FE, NM 87501					

832241 04-01-18

	C					
Schedule (Form 990) (2018) エバリ エリムエース、 エハビ Part III Grants and Other Assistance to Domestic Individuals. ( Part III can be duplicated if additional space is needed.	16	organization answe	• Complete if the organization answered "Yes" on Form 990, Part IV, line 22	90, Part IV, line 22.	14-200/220 Page	Page 2
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(1) Description of noncash assistance	φ
	Ç		C			
UNATING ABTURN ABTURN ANTERNA			, 			
LOCAL REPORTING NETWORK GRANT		6,218.				
Part IV Supplemental Information. Provide the information required in		e 2; Part III, column	Part I, line 2; Part III, column (b); and any other additional information.	ditional information.		
PART I, LINE 2: A) STIPEND NARRATIVE FOR INDIVIDUALS	LS RECEIVING	TNG ASTSTANCE	ANCE :			
	1 1	1 1				
STIPEND PAYMENTS REPRESENT A FORM O	OF GRANT	ASSISTANCE	PROVIDED	ТО		
PARTICIPANTS IN VARIOUS PROPUBLICA	OUTREACH	I PROGRAMS.	PARTICIPANTS	NTS IN THE		
PROGRAMS ARE SELECTED VIA COMPETITIVE		APPLICATION PRC	PROCESS IN WHICH	ICH THE		
APPLICANTS ARE CHOSEN BASED ON THEIR		QUALIFICATIONS 1	AND CAREER	CAREER PROSPECTS IN		
THE FIELD OF INVESTIGATIVE JOURNALISM		FUNDING IS OFT	OFTEN PROVIDED	D AS A PART		
OF A GRANT RECEIVED BY PROPUBLICA.	IN SUCH	INSTANCES,	THE GRANT		Schedule   (Form 990) (20-	01B)
2 11-02-18					Sche	Schedule I (Form 990) (2018)

REQUIREMENTS DETERMINE THE AMOUNT OF FUNDING AVAILABLE AND MAY INFORM THE STIPEND PAYMENT PROCESS. IF THE FUNDING IS PROVIDED THROUGH PROPUBLICA'S GENERAL OPERATING BUDGET, FUNDING AVAILABILITY IS DETERMINED BASED ON OVERALL BUDGETARY CONCERNS. BASED ON THESE PARAMETERS, PROGRAM DIRECTORS DETERMINE WHICH OF THE FOLLOWING SITUATIONS APPLY:

- ALL PARTICIPANTS RECEIVE EQUAL STIPEND AMOUNTS.

- ALL PARTICIPANTS RECEIVE SOME STIPEND, WITH THE AWARD AMOUNT VARYING BASED ON DETERMINATION OF NEED.

- SOME PARTICIPANTS RECEIVE STIPENDS, WITH THE AWARD AMOUNT VARYING BASED ON DETERMINATION OF NEED. IN THIS INSTANCE, APPLICANTS MUST APPLY FOR ASSISTANCE AS A SEPARATE PROCEDURE FROM THE GENERAL APPLICATION PROCESS AND ARE NOTIFIED THE AMOUNT OF THE TOTAL ASSISTANCE AVAILABLE BASED ON GRANT FUNDS AVAILABLE. APPLICATIONS FOR ASSISTANCE REQUIRE APPLICANTS TO ADDRESS THE FOLLOWING:

- EXPLICITLY ANSWER THE QUESTION OF WHETHER OR NOT THEY NEED FINANCIAL ASSISTANCE.

- PROVIDE THE AMOUNT OF ASSISTANCE THAT THEY ARE REQUESTING BASED ON PRE-DETERMINED FUND AVAILABILITY.

- EXPLAIN HOW THE FUNDING WOULD MAKE IT POSSIBLE FOR THEM TO ATTEND THE PROGRAM WHEN THEY OTHERWISE WOULD NOT BE ABLE TO.

IF THE CASE IS COMPELLING, THE REQUEST FOR ASSISTANCE IS GRANTED UP TO THE LIMITS OF THE FUNDS AVAILABLE. IF THE EXPLANATION OF NEED INCLUDES THE COST OF EXPENSES THAT ARE ALREADY COVERED FOR ALL ATTENDEES, THE AMOUNT OF THE GRANT MAY BE REDUCED ACCORDINGLY. FOR EXAMPLE, THE DATA INSTITUTE PROGRAM COVERS THE COST OF LODGING AND TRAVEL FOR ALL ATTENDEES. IF LODGING/TRAVEL ARE INCLUDED IN THE EXPLANATION OF NEED, THE AMOUNT AWARDED MAY BE REDUCED. Schedule I (Form 990) WHEN FUNDING IS PROVIDED VIA PASS-THROUGH GRANTS FROM OTHER ORGANIZATIONS, MONITORING OF FUND USAGE AND FOLLOW-UP ARE BASED UPON ONGOING VERBAL DIALOGUE, GRANT REPORTING REQUIREMENTS, AND WRITTEN GRANT REPORTS PROVIDED TO GRANTING ORGANIZATIONS AT THE END OF THE GRANT PERIOD. WHEN FUNDING IS PROVIDED THROUGH GENERAL OPERATING BUDGET DESIGNATION, PROPUBLICA MAINTAINS RECORDS OF INDIVIDUALS RECEIVING AND BENEFITTING FROM GRANT FUNDS, INCLUDING COMPLETED W-9 FORMS. AS THESE GRANTS ARE NEED-BASED, SUCH FUNDS MAY BE USED FOR ANY PURPOSE.

B) NARRATIVE FOR ORGANIZATIONS & INDIVIDUALS RECEIVING ASSISTANCE THROUGH LOCAL REPORTING NETWORK:

THE OTHER TYPE OF FUNDING PROPUBLICA PROVIDES IS THROUGH REGRANTING FOR ORGANIZATIONS AND INDIVIDUAL PARTICIPATING IN THE LOCAL REPORTING NETWORK INITIATIVE. THROUGH THIS INITIATIVE, PROPUBLICA PARTNERS WITH LOCAL NEWSROOMS THROUGHOUT THE UNITED STATES TO PROVIDE FUNDING FOR A REPORTER TO WORK ON AN INVESTIGATIVE JOURNALISM PROJECT FOR ONE YEAR. MOST OFTEN, THE GRANTEE IS THE NEWSROOM ORGANIZATION ITSELF; HOWEVER, OCCASIONALLY, FUNDING MAY BE PROVIDED DIRECTLY TO A REPORTER WITH AN AFFILIATION TO THE SELECTED NEWSROOM. NEWSROOMS ARE SELECTED TO PARTICIPATE IN LRN VIA A COMPETITIVE APPLICATION PROCESS, AND IN ADDITION TO FUNDING, LRN PARTNERS RECEIVE ACCESS TO PROPUBLICA RESOURCES INCLUDING EDITORS, TRAINING SESSIONS, AND CO-PUBLISHING OPPORTUNITIES.

LRN GRANT AMOUNTS ARE DETERMINED BASED ON EACH REPORTER'S ANNUAL SALARY AND A STANDARD BENEFITS PERCENT ALLOCATION, WHICH WAS 22% FOR 2018, AND AMOUNTS ARE AGREED TO IN WRITING BY BOTH THE PARTICIPATING NEWSROOM AND PROPUBLICA. Schedule | (Form 990) 832291 04-01-18

Schedule   (Form 990) PRO_PUBLICA, INC. Part IV Supplemental Information	14-2007220 Page	<u>e 2</u>
Part IV Supplemental Information		
FUND USAGE FOR LRN IS MONITORED BY THE PROPUBLICA EDITORS N	WHO OVERSEE THE	
PROGRAM AND WORK DIRECTLY WITH THE REPORTERS. ULTIMATELY,	THE REPORTERS ARE	E
EXPECTED TO PUBLISH A FULL-LENGTH INVESTIGATIVE PIECE IN CO	OORDINATION WITH	
PROPUBLICA. ALSO, PARTICIPATING ORGANIZATIONS MUST PROVIDE	A WRITTEN	
ACCOUNTING FOR FUNDS USAGE AT THE END OF THE GRANT PERIOD,	WHICH MOST OFTED	N
INCLUDES A COPY OF THE FUNDED REPORTER'S W2 FOR THE FUNDED	GRANT YEAR.	

SCH	EDULE J	Compensation Information	1	OMB No. 1	545-004	17
(For	m 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest	ſ	20	10	Į
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.				
	ment of the Treasury	Attach to Form 990.		Open to Inspe		iC
	Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.	Employer i			nher
Name	of the organization	PRO PUBLICA, INC.		2007220		HDC:
Par	t I Question	s Regarding Compensation	<u> </u>	100722	<u> </u>	
L. <u></u>	tri duodon				Yes	No
1a (	Check the annropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	990.		0.00	
		line 1a. Complete Part III to provide any relevant information regarding these items.	,			
ĺ	First-class or c		nal use			
[	 Travel for com					
Ε	Tax indemnification and gross-up payments Health or social club dues or initiation fees		6			
[	Discretionary spending account Personal services (such as maid, chauffeur, chef)					
_						
bl	f any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
		rovision of all of the expenses described above? If "No," complete Part III to explain		<u>1b</u>		
2 8	Did the organization	require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
t	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?			2		
3	ndicate which, if ar	ay, of the following the filing organization used to establish the compensation of the organizat	ion's			
(	CEO/Executive Dire	ctor. Check all that apply. Do not check any boxes for methods used by a related organization	on to			
		ation of the CEO/Executive Director, but explain in Part III.				
-	X Compensation					
	X       Independent compensation consultant       X       Compensation survey or study					
-	X Form 990 of o		ommittee			
-		<b>.</b>				
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					
a f	Receive a severanc	e payment or change-of-control payment?		<u>4a</u>		X
bi	Participate in, or re	ceive payment from, a supplemental nonqualified retirement plan?		4b		X
		ceive payment from, an equity-based compensation arrangement?				X
		nes 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.				
		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
c	contingent on the r	evenues of:				
а	The organization?			<u>5</u> a		X
b/	Any related organiz	ation?		<u>5</u> b		X
		or 5b, describe in Part III.				
6 1	For persons listed o	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
C	contingent on the n	et earnings of:			1948 (A)	2003 V (
а	The organization?			<u>6a</u>		X
b/	Any related organiz	ation?		<u>6b</u>		X
		or 6b, describe in Part III.				
7 1	For persons listed o	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			80.830d	
ſ	not described on lir	nes 5 and 6? If "Yes," describe in Part III		7	An is an a	X
8 \	Were any amounts	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th	e			18898 
i	nitial contract exce	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III			Sec. Sec. 1	X
		id the organization also follow the rebuttable presumption procedure described in			933963	
		53.4958-6(c)?	····			

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

Schedule J (Form 990) 2018

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.	orm 9 orm 9 or ind	orted on Schedule J 90, Part VII. Mirtual must equal th	l, report compensati ne total amount of Fr	on from the organiza wm 990, Part VII, Se	compensation from the organization on row (i) and from related organizations, described in the instruction amount of Form 990. Part VII. Section A line 1a applicable column (D) and (F) amounts for that individual	related organizations the column (D) and (F	, described in the instr amounts for that indiv	uctions, on row (ii). wrtual
		(B) Breakdown of W-2 an		d/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(n).(i)(n)	o le
(1) RICHARD TOFEL, PRESIDENT	Ξ	403,464.	.0	2,732.	13,750.	16,667.	436,613.	•
CO-CEO, SECRETARY-TREASURER	(ii)		0.	0.				.0
(2) STEPHEN ENGELBERG	Ξ	392,228.	•0	2,732.	13,750.	43,574.	452,284.	.0
EDITOR-IN-CHIEF & CO-CEO	(ij)		•0	•				0.
(3) RAGAN RHYNE, VICE PRESIDENT OF	Ξ	248,548.	.0	456.	12,500.	1,514.	263,018.	.0
DEVELOPMENT, ASS. SECRETARY	(11)		•	•	•0		·	0.
(4) ROBIN FIELDS	ε	274,178.	0	952.	6,875.	9,678.	291,683.	0.
MANAGING EDITOR	(1)	0.	.0	0.	•0		- 1	.0
(5) JESSE EISINGER	Ξ	229,883.	•	621	11,967.	40,924.	283,395.	.0
SENIOR REPORTER	(1)		.0	•		- 1		0.
(6) CHARLES ORNSTEIN	Ξ	221,003.	.0	414.	11,250.	43,585.	276,252.	0.
SENIOR EDITOR	(ij)	.0	• 0	.0	•0			• 0
(7) TRACY WEBER	Ξ	216,876.	.0	1,780.	11,287.	27,646.	257,589.	0.
SENIOR EDITOR	(ii)		.0	.0				0.
(8) JOSEPH SEXTON	Ξ	216,871.	•	1,780.	10,950.	25,032.	254,633.	0.
SENIOR EDITOR	0	.0	.0	.0	.0	0.	0.	.0
	Ξ							
	()							
	Ξ							
	(ii)							
	Ξ							
	3			-				
	(0)							
	0							
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	₿	-						
	Ξ							
	(iii)							
							Schedi	Schedule J (Form 990) 2018

14 - 2007220

PRO PUBLICA, INC.

Schedule J (Form 990) 2018

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Schedule J (Form 990) 2018

Page 2

Schedule J (Form 990) 2018 PRO PUBLICA, INC.	14-2007220	Page 3
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 for any additional information.	
	Schedule J (Form 990) 2018	990) 2018

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#### SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

**Open to Public** 

Inspection

8

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Employer identification number 14-2007220

20

			PRO	P	$\mathbf{UBL}$	I	CA
Ì	Part I	Types of	Property	V			

<b>UBLI</b>	CA,	INC	,

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of deter noncash contributio	-	s
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods	······					
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
	Securities - Publicly traded	Х	35	565,448.	AVG. SELLING	PRIC	Ε
	Securities - Closely held stock						
	Securities · Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate · Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens			·····			
24	Archeological artifacts						
25	Other • ()						
26	Other ► ()			· · · · · · · · · · · · · · · · · · ·			
27	Other ► ()						
28	Other ()	[	<u> </u>		<u> </u>		
29	Number of Forms 8283 received by the organiz	zation during	g the tax year for c	ontributions			
	for which the organization completed Form 82	83, Part IV, (	Donee Acknowledg	jement 29		0	T
						Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it		
	must hold for at least three years from the date	e of the initia	l contribution, and	which isn't required to be us	sed for		
	exempt purposes for the entire holding period?				3	Oa	X
þ	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance p	policy that re	equires the review of	of any nonstandard contribut	tions?	31	X
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash			
	contributions?					2a	X
b	If "Yes," describe in Part II.						
33	If the organization didn't report an amount in c	olumn (c) foi	r a type of property	/ for which column (a) is che	cked,		
	describe in Part II.					9999 A.R.A.	1.8925

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

Schedule M (Form 990) 2018

Schedule M (Form 990) 2018 PRO PUBLICA, INC.	14-2007220	Page 2				
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.						
SCHEDULE M, PART I, COLUMN (B):						
THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS I	N PART 1,					
COLUMN (B) OF SCHEDULE M.						
	····					

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service 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 990-EZ. Go to www.irs.gov/Form990 for the latest information.



Employer identification number 14 - 2007220

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

PRO PUBLICA, INC.

BY GOVERNMENT, BUSINESS, AND OTHER INSTITUTIONS, USING THE MORAL FORCE

OF INVESTIGATIVE JOURNALISM TO SPUR REFORM THROUGH THE SUSTAINED

SPOTLIGHTING OF WRONGDOING.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: WE PRODUCE JOURNALISM THAT SHINES A LIGHT ON EXPLOITATION OF THE WEAK

BY THE STRONG AND ON THE FAILURES OF THOSE WITH POWER TO VINDICATE THE

TRUST PLACED IN THEM. IN THE BEST TRADITIONS OF AMERICAN JOURNALISM IN

THE PUBLIC SERVICE, WE AIM TO STIMULATE POSITIVE CHANGE, UNCOVERING

UNSAVORY PRACTICES AND ABUSES OF POWER IN ORDER TO PROD REFORM. WE DO

THIS IN AN ENTIRELY NON-PARTISAN AND NON-IDEOLOGICAL MANNER, ADHERING

TO THE STRICTEST STANDARDS OF JOURNALISTIC IMPARTIALITY.

OUR STATED MISSION IS "TO EXPOSE ABUSES OF POWER AND BETRAYALS OF THE

PUBLIC TRUST BY GOVERNMENT, BUSINESS, AND OTHER INSTITUTIONS, USING THE

MORAL FORCE OF INVESTIGATIVE JOURNALISM TO SPUR REFORM THROUGH THE

SUSTAINED SPOTLIGHTING OF WRONGDOING."

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE: A DECADE AGO, WE LAUNCHED PROPUBLICA'S WEBSITE WITH A BRIEF NOTE, "WELCOME TO THE STARTING LINE." IN THAT JUNE 10, 2008 POST, SIGNED BY FOUNDING EDITOR-IN-CHIEF PAUL STEIGER AND THEN-MANAGING EDITOR STEPHEN ENGELBERG, WE ACKNOWLEDGED THAT PROPUBLICA WAS SOMETHING OF AN EXPERIMENT. WE WERE 20 PEOPLE, BACKED BY A \$10 MILLION ANNUAL BUDGET AND A THREE-YEAR COMMITMENT FROM THE SANDLER FOUNDATION, WITH SOME NEW

IDEAS ABOUT HOW TO PUBLISH INVESTIGATIVE JOURNALISM.

Schedule O (Form 990 or 990-EZ) (2018)	Page <b>2</b>
Name of the organization	Employer identification number
PRO PUBLICA. INC.	14-2007220

OUR MODEL FOR DISTRIBUTING STORIES - CO-PUBLISHING WITH MAJOR NEWS OUTLETS LIKE 60 MINUTES, THE NEW YORK TIMES, THE LOS ANGELES TIMES AND POLITICO - WAS UNTESTED. THERE WAS NO CLEAR SENSE OF WHERE THE MONEY WOULD COME FROM WHEN WE SOUGHT A BROADER GROUP OF BACKERS.

DESPITE THESE UNKNOWNS, WE WERE UNWAVERING IN OUR COMMITMENT TO INVESTIGATIVE REPORTING AS AN ESSENTIAL COMPONENT OF A DEMOCRACY. EVEN IF WE DIDN'T KNOW QUITE HOW THIS EXPERIMENT WOULD UNFOLD, WE BELIEVED IN TAKING ON THE TOUGHEST SUBJECTS, SHINING A LIGHT ON POWERFUL INSTITUTIONS OF ALL SORTS, AND PRESENTING DEEPLY REPORTED STORIES WITH MORAL FORCE AND AN EYE TOWARD SPURRING CHANGE.

TEN YEARS LATER, IT'S CLEAR THAT AN INCREASING NUMBER OF PEOPLE SHARE THESE VALUES. WE WERE THRILLED AND HUMBLED TO MAKE A LOT OF FRIENDS IN OUR FIRST DECADE. PROPUBLICA HAS HAD 184 PUBLISHING PARTNERS, INCLUDING 59 IN 2018 ALONE. OUR BUDGET HAS GROWN TO MORE THAN \$26 MILLION FOR 2019, WHICH SUPPORTS ABOUT 120 EMPLOYEES WORKING AT OUR NATIONAL OPERATION, PROPUBLICA ILLINOIS AND REPORTING FOR OUR LOCAL REPORTING NETWORK. THOUSANDS OF PEOPLE NOW DONATE EVERY MONTH, PART OF A FLOW OF SMALLER DONATIONS THAT IN 2018 ADDED UP TO MORE THAN \$4 MILLION.

CHANGEMAKING

PERHAPS THE ACHIEVEMENT WE'RE MOST PROUD OF IS THE IMPACT OF OUR WORK

OVER THE YEARS. IN A CYNICAL AGE WHEN MANY BELIEVE THAT THE OUTCOMES

ARE "RIGGED" AND UNCHANGEABLE, WE HAVE REPEATEDLY SHOWN THAT POWERFUL,

FACT-BASED JOURNALISM HAS THE POTENTIAL TO CHANGE MINDS, LAWS AND THE

LIVES OF ORDINARY PEOPLE.

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization	Employer identification number
PRO PUBLICA, INC.	14-2007220

IN JUNE, AS THE PLIGHT OF FAMILIES SEPARATED AT THE U.S.-MEXICO BORDER GAINED NATIONAL ATTENTION, PROPUBLICA RELEASED AUDIO OF MIGRANT CHILDREN INSIDE A U.S. CUSTOMS AND BORDER PROTECTION FACILITY. THE SOUNDS OF CHILDREN SOBBING AND BEGGING FOR THEIR PARENTS SERVED AS EVIDENCE OF THE TRAGEDY UNDERWAY. LAWMAKERS CITED PROPUBLICA'S AUDIO AS THEY CONDEMNED THE ADMINISTRATION'S POLICY, AND PROTESTERS BLARED THE RECORDING AT DEMONSTRATIONS ACROSS THE COUNTRY. WITHIN 48 HOURS, PRESIDENT TRUMP REVERSED HIS POLICY OF SEPARATING CHILDREN FROM THEIR PARENTS. A FEDERAL JUDGE IN CALIFORNIA ORDERED THAT PARENTS AND CHILDREN BE REUNITED WITHIN 30 DAYS. WITHIN A MONTH, THE CHILD HEARD IN THE RECORDING PLEADING TO CALL HER AUNT WAS REUNITED WITH HER MOTHER.

LATER IN THE YEAR, WE REPORTED THAT BORDER AGENTS RESUMED THE REMOVAL OF SOME CHILDREN FROM THEIR PARENTS BY CLAIMING THAT THEIR PARENTS WERE CRIMINALS AND THUS A DANGER TO THEIR CHILDREN. OUR STORY FOCUSED ON A CASE IN WHICH THE DEPARTMENT OF HOMELAND SECURITY CLAIMED, WITHOUT EVIDENCE, THAT A SALVADORAN MAN WAS A GANG MEMBER AND SEPARATED HIM FROM HIS 4-YEAR-OLD SON. TWO WEEKS AFTER THE INVESTIGATION PUBLISHED, AND 11 WEEKS AFTER THEY HAD BEEN SEPARATED, THE CHILD WAS RETURNED TO HIS FATHER.

TO HELP SUPPORT ACCOUNTABILITY REPORTING ACROSS THE COUNTRY, ESPECIALLY
AT THE LOCAL AND REGIONAL LEVELS, PROPUBLICA ILLINOIS HAD ITS FULL YEAR
OF OPERATION IN 2018, AND WE KICKED OFF THE PROPUBLICA LOCAL REPORTING
NETWORK. THROUGH THIS INITIATIVE WE SUPPORTED SEVEN INVESTIGATIVE
PROJECTS AT LOCAL NEWS ORGANIZATIONS (IN CITIES WITH POPULATIONS BELOW
ONE MILLION), IN EACH CASE PAYING A REPORTER'S SALARY AND BENEFITS, IN
Schedule O (Form 990 or 990-EZ) (2018)

Schedule O	(Form	990 or	990-EZ)	(2018	3)

Name of the organization

PRO PUBLICA, INC.

14-2007220

ADDITION TO PROVIDING PROPUBLICA'S EXPERTISE IN DATA, RESEARCH AND ENGAGEMENT.

IN ONE OF THE INAUGURAL PROJECTS FROM PROPUBLICA ILLINOIS, PUBLISHED IN PARTNERSHIP WITH THE CHICAGO TRIBUNE, OUR WORK EXPOSED DEVASTATING INEQUITIES IN PROPERTY TAX ASSESSMENTS DONE BY THE COOK COUNTY ASSESSOR. IN THE ILLINOIS DEMOCRATIC PRIMARY ELECTION, FAIRNESS IN THE PROPERTY TAX SYSTEM WAS A MAJOR ISSUE - AND ASSESSOR JOSEPH BERRIOS, WHO ALSO SERVED AS THE COOK COUNTY DEMOCRATIC CHAIRMAN, LOST HIS BID FOR RE-ELECTION.

AS PART OF OUR LOCAL REPORTING NETWORK, THE SOUTH BEND TRIBUNE IN INDIANA EXAMINED USE OF FORCE IN THE NEIGHBORING ELKHART POLICE DEPARTMENT, UNCOVERING STARTLING, PREVIOUSLY UNDISCLOSED ACTS OF MISCONDUCT. THE TRIBUNE AND PROPUBLICA ALSO FOUND THAT, WHILE THE POLICE CHIEF AND MOST OF THE DEPARTMENT'S SUPERVISORS HAD BEEN DISCIPLINED FOR CARELESSNESS AND INCOMPETENCE, THEY KEPT THEIR JOBS AND WERE OFTEN PROMOTED. IN THE AFTERMATH OF THIS REPORTING, THE POLICE CHIEF RESIGNED, AND ELKHART'S MAYOR ANNOUNCED AN INDEPENDENT REVIEW OF THE CITY'S POLICE DEPARTMENT - BEFORE ABANDONING HIS OWN RE-ELECTION CAMPAIGN.

INTERNATIONALLY, OUR INVESTIGATION "UNPROTECTED," CO-PUBLISHED WITH TIME MAGAZINE, AND AN ACCOMPANYING DOCUMENTARY CREATED BY PROPUBLICA FILMS LOOKED INTO AN ACCLAIMED CHARITY CALLED MORE THAN ME. FOUNDED BY AMERICAN KATIE MEYLER, THE LIBERIAN SCHOOL PROMISED TO RESCUE SOME OF THE WORLD'S MOST VULNERABLE GIRLS FROM LIFE ON THE STREETS, BUT FROM THE VERY BEGINNING, CHILDREN PLACED UNDER ITS CARE WERE BEING RAPED BY Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization PRO PUBLICA, INC.	Employer identification number 14-2007220
ONE OF THE NONPROFIT'S LEADERS. DAYS AFTER OUR INVESTIGATION	ON, MEYLER
TEMPORARILY STEPPED ASIDE AS CEO AND THE ORGANIZATION'S BO	ARD CHAIRMAN
RESIGNED. AMID PROTESTS IN LIBERIA, CALLING FOR THE GOVERN	MENT TO
REVOKE MORE THAN ME'S ACCREDITATION AND PERMISSION TO RUN	ITS SCHOOLS,
SEVEN LIBERIAN GOVERNMENT AGENCIES VOWED TO TAKE ACTION AS	PART OF A
"FULL-SCALE INVESTIGATION" INTO THE CHARITY.	
THE STORIES IN DATA	
PROPUBLICA'S USE OF DATA ANALYSIS AND VISUAL STORYTELLING	HAS EXPANDED
SUBSTANTIALLY SINCE OUR FOUNDING. THE INITIAL STAFF OF PROD	PUBLICA
INCLUDED JUST TWO PEOPLE WHO KNEW HOW TO WRITE COMPUTER CO	DE AND COULD
CREATE, WHEN NEEDED, A GRAPHIC OR TWO. IN THE DECADE SINCE	, WE'VE ADDED
A TEAM OF DATA JOURNALISTS AND PIONEERED THE FIELD OF NEWS	APPLICATION
DEVELOPMENT, BROUGHT ON WEB DESIGNERS AND PRODUCERS, AND, I	MOST
RECENTLY, EXPANDED INTO SOCIAL AND LONG-FORM VIDEO. FROM O	UR IMMERSIVE
INVESTIGATION SHOWING WHAT IT SOUNDS AND LOOKS LIKE WHEN A	GAS DRILLER
OVERRUNS YOUR PROPERTY, TO AN ANIMATED MAP TAKING READERS '	THROUGH A
DANGEROUS ROUTE THROUGH NEW YORK'S PRIVATE COMMERCIAL GARB	AGE
COLLECTION, THIS YEAR'S WORK KEPT OUR NEWSROOM AT THE FRON	TIERS OF
CONTEMPORARY JOURNALISM.	· ···
IN THE WEEKS AHEAD OF THE 2018 MIDTERM ELECTIONS, PROPUBLIC	CA'S FACEBOOK

POLITICAL AD COLLECTOR GAINED STEAM AND INSIGHTS, OUR DEVELOPERS HAD

EARLIER DESIGNED THE SMALL PIECE OF SOFTWARE AS A SOLUTION TO THE

HARD-TO-TRACK NATURE OF ONLINE POLITICAL ADS, WHICH APPEAR ON SOME

PEOPLE'S SCREENS WHILE NEVER BEING SHOWN TO OTHERS. WHEN PARTICIPATING

FACEBOOK USERS DOWNLOADED THE EXTENSION, WE AUTOMATICALLY IDENTIFIED

THE POLITICAL ADS DISPLAYED ON THEIR NEWSFEEDS AND COLLECTED THEM IN A
832212 10-10-18
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PUBLIC DATABASE. BY ELECTION DAY, WE HAD COLLECTED MORE TH	AN 100,000
POLITICAL ADS FROM NEARLY 20,000 FACEBOOK USERS, ALLOWING	US TO REPORT
ON ADS THAT WERE ACTUALLY SCAMS AND MALWARE, NEGATIVE ADS	THAT IGNORED
FEC RULES BY FAILING TO DISCLOSE WHO PAID FOR AND APPROVED	THEM, AND
MYSTERIOUS FACEBOOK PAGES PUSHING FRINGE CANDIDATES.	

PROPUBLICA ILLINOIS AND WBEZ PRODUCED A SERIES OF STORIES EXAMINING HOW CHICAGO'S RELIANCE ON VEHICLE TICKETING TO GENERATE REVENUE - IN ADDITION TO UNEQUAL ENFORCEMENT AND PUNITIVE COLLECTION MEASURES - HAS LED TO MASSIVE DEBT IN LOW-INCOME AND ESPECIALLY BLACK NEIGHBORHOODS. THE PROJECT TEAM COLLECTED MORE THAN 54 MILLION PARKING, STANDING AND VEHICLE COMPLIANCE TICKETS ISSUED SINCE 1996 AND MADE THE AGGREGATE DATA PUBLIC IN AN ACCOMPANYING DATABASE. USERS CAN EXPLORE THE TICKET TRAP TO SEE HOW TICKETING, DEBT AND THE RATES AT WHICH PEOPLE APPEAL THEIR TICKETS COMPARE ACROSS CHICAGO'S 50 WARDS. THE PROJECT LED TO THE CHICAGO CITY COUNCIL PASSING A PACKAGE OF REFORMS TO THE CITY'S TICKETING SYSTEM.

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AS PART OF A SERIES ON RACIAL DISPARITIES IN EDUCATION, PROPUBLICA
LAUNCHED AN ENORMOUS FACT-FINDING MISSION, COLLECTING AND ANALYZING
TROVES OF EDUCATION DEPARTMENT DATA. THIS UNDERTAKING CULMINATED IN
MISEDUCATION, A GROUNDBREAKING DATABASE ALLOWING USERS TO LOOK UP MORE
THAN 96,000 INDIVIDUAL PUBLIC AND CHARTER SCHOOLS AND 17,000 DISTRICTS
TO SEE HOW THEY COMPARE ON EDUCATIONAL OPPORTUNITY AND SCHOOL
DISCIPLINE.
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THE WORK CONTINUES

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IN JUST THE LAST FEW MONTHS OF OUR TENTH FULL YEAR, PROPUB	LICA HAS PRODUCED
IMPORTANT, CHALLENGING AND INNOVATIVELY PRESENTED STORIES	THAT HAVE
OFTEN SPARKED REAL-WORLD CHANGE. THIS WORK INCLUDED STORIE	S ON HOW A
HOUSING PROGRAM FOR MENTALLY ILL NEW YORKERS HAS PROVEN UN	SAFE,
INHUMANE AND SOMETIMES DEADLY; A TWO-PART FRONTLINE DOCUME	NTARY ON
VIOLENT WHITE SUPREMACIST GROUPS; EYE-OPENING STORIES ON H	OW A
BUDGET-DEPRIVED IRS IS UNABLE TO PURSUE TAX CHEATS; THE TR	UMP
ADMINISTRATION'S CONTINUED EFFORTS TO SEPARATE FAMILIES AT THE BORDER,	
MONTHS AFTER IT CLAIMED TO HAVE STOPPED; AND THE JUNK FORE	NSIC SCIENCE
OF BLOODSTAIN-PATTERN ANALYSIS THAT HAS BECOME ENTRENCHED	IN THE
CRIMINAL JUSTICE SYSTEM; AND THE HEALTH INSURANCE INDUSTRY	'S WORK WITH
DATA BROKERS TO VACUUM UP OUR PERSONAL DETAILS.	
MUCH HAS CHANGED SINCE PROPUBLICA PUBLISHED ITS FIRST STOR	Y, BUT THE
VALUE OF INVESTIGATIVE JOURNALISM WITH MORAL FORCE REMAINS	. WE'RE
COMMITTED TO CONTINUING TO GROW, AND TO LEAD, IN OUR NEXT	TEN YEARS AND
BEYOND.	

ADDITIONAL IMPACT SINCE PROPUBLICA WAS STARTED 10 YEARS AGO, IMPACT HAS BEEN AT THE CORE OF OUR MISSION, AND IT REMAINS A GUIDING PRINCIPLE AND YARDSTICK FOR OUR SUCCESS TODAY. WE MEASURE OUR IMPACT NOT IN TERMS OF AUDIENCE SIZE OR HONORS, BUT REAL-WORLD CHANGE. IN ADDITION TO THE IMPACT FROM OUR REPORTING ON THE TRUMP ADMINISTRATION'S FAMILY SEPARATION POLICY, INEQUITIES IN CHICAGO'S PROPERTY TAX ASSESSMENT SYSTEM, USE OF FORCE IN THE ELKHART POLICE DEPARTMENT AND HOW AN AMERICAN CHARITY FAILED THE LIBERIAN GIRLS UNDER ITS CARE, ALL DESCRIBED EARLIER IN THIS REPORT, OUR JOURNALISM IN 2018 SPURRED SUCH CHANGE IN A NUMBER OF IMPORTANT Schedule O (Form 990 or 990-EZ) (2018)

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AREAS.

LAWS TO IMPROVE MATERNAL HEALTH PASSED OUR REPORTING WITH NPR ABOUT MATERNAL MORTALITY IN THE U.S. SPURRED SIGNIFICANT CHANGE. AFTER DECADES OF CONGRESSIONAL INACTION, IN DECEMBER CONGRESS APPROVED A BILL TO FUND STATE PANELS TO REVIEW AND INVESTIGATE DEATHS OF EXPECTANT AND NEW MOTHERS. THE SENATE APPROPRIATIONS COMMITTEE ALSO VOTED TO APPROVE \$50 MILLION IN NEW FUNDING FOR PROGRAMS AIMED AT REDUCING THE RATE OF WOMEN WHO DIE DURING PREGNANCY OR CHILDBIRTH. CITING THE REPORTING, STATE AND LOCAL LAWMAKERS AROUND THE COUNTRY ADOPTED BILLS AIMED AT REFORMING HOW MATERNAL DEATHS ARE IDENTIFIED AND INVESTIGATED. CONNECTICUT, INDIANA, MARYLAND, OREGON, PENNSYLVANIA AND WASHINGTON, D.C., PASSED LAWS CREATING MATERNAL MORTALITY REVIEW COMMITTEES TO SCRUTINIZE DEATHS AND NEAR-DEATHS AMONG EXPECTANT AND NEW MOTHERS, AND TO MAKE POLICY RECOMMENDATIONS TO IMPROVE MATERNAL HEALTH. A SIMILAR BILL IS PENDING IN NEW JERSEY.

THE AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS, WHICH SETS STANDARDS OF CARE FOR OBSTETRICIAN-GYNECOLOGISTS, ALSO RELEASED SWEEPING NEW RECOMMENDATIONS FOR IMPROVING MATERNAL CARE, INCLUDING GUIDELINES FOR DOCTORS TO SEE NEW MOTHERS SOONER AND MORE FREQUENTLY, AND FOR INSURERS TO COVER THE INCREASED VISITS. IN ADDITION, IN AUGUST, AFTER PROPUBLICA REACHED OUT TO A NUMBER OF CONSUMER HEALTH SITES THAT PUBLISHED IMPRECISE, OUTDATED AND MISLEADING INFORMATION ABOUT PREECLAMPSIA - A DANGEROUS FORM OF HYPERTENSION THAT CAN DEVELOP DURING PREGNANCY OR IN THE DAYS AND WEEKS AFTER CHILDBIRTH - THE MAYO CLINIC CORRECTED ITS INFORMATION. THE CLEVELAND CLINIC, HARVARD HEALTH Schedule O (Form 990 or 990-EZ) (2018)

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PUBLISHING AND MEDLINE PLUS ALSO AGREED TO MAKE NECESSARY UPDATES.

DISCRIMINATORY FACEBOOK POLICIES HALTED

IN 2016, PROPUBLICA REPORTED THAT FACEBOOK ALLOWS ADVERTISERS TO BUY

CREDIT, HOUSING AND EMPLOYMENT ADS THAT EXCLUDE ANYONE WITH AN

"AFFINITY" FOR AFRICAN-AMERICAN, ASIAN-AMERICAN AND HISPANIC PEOPLE

FROM SEEING THEM. OUR 2017 FOLLOW-UP FOUND THAT THE SOCIAL NETWORK HAD

NOT REMEDIED THE PROBLEM, PROMPTING FACEBOOK TO TEMPORARILY STOP

ADVERTISERS FROM EXCLUDING VIEWERS BY RACE WHILE IT REVIEWED ITS AD

SYSTEM. IN JULY, FACEBOOK SAID IT WOULD NO LONGER ALLOW ADVERTISERS TO

EXCLUDE USERS BY FEDERALLY PROTECTED CATEGORIES.

WRONGFULLY CONVICTED MAN EXONERATED

IN 2017, WE REPORTED ON DEMETRIUS SMITH, WHO WAS WRONGFULLY CONVICTED OF MURDER IN BALTIMORE AND AGREED TO AN ALFORD PLEA A DEAL THAT ALLOWS DEFENDANTS TO MAINTAIN THEIR INNOCENCE WHILE AT THE SAME TIME PLEADING GUILTY AND ACCEPTING THE STATUS OF A CONVICTED FELON. OUR STORY SHOWED THAT THE PROSECUTOR HAD BLOCKED SMITH'S REQUEST TO REVISE HIS UNUSUAL PLEA DEAL AND MODIFY HIS SENTENCE. PROMPTED BY THE STORY, THE PROSECUTOR FILED A MOTION SAYING HE HAD BEEN WRONG AND ASKED A JUDGE TO SCHEDULE A NEW HEARING FOR SMITH. IN JANUARY, THAT HEARING ENDED WITH SMITH'S CRIMINAL RECORD BEING CLEARED.

MEDICAL CONFLICTS OF INTEREST ELIMINATED

PROPUBLICA PUBLISHED A SERIES OF INVESTIGATIONS WITH THE NEW YORK TIMES

DETAILING UNDISCLOSED RELATIONSHIPS BETWEEN MEMORIAL SLOAN KETTERING

CANCER CENTER AND FOR-PROFIT HEALTH CARE COMPANIES, HIGHLIGHTING

CONFLICTS OF INTEREST, A SEPTEMBER STORY ON DR. JOSE BASELGA, MSK'S B32212 10-10-18 Schedule O (Form 990 or 990-EZ) (2018)

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CHIEF MEDICAL OFFICER, UNCOVERED HIS FAILURE TO DISCLOSE CO	ORPORATE
BOARD MEMBERSHIPS AND PAYMENTS FROM COMPANIES CONNECTED TO	CANCER
RESEARCH IN HIS PUBLISHED RESEARCH ARTICLES, EVEN WHEN HE	WAS REPORTING
ON THE RESULTS OF STUDIES CONDUCTED BY THOSE COMPANIES. WI	THIN DAYS OF
OUR REPORTING, HE RESIGNED. BY DECEMBER BASELGA ALSO RESIGN	NED AS AN
EDITOR-IN-CHIEF OF THE PROMINENT MEDICAL JOURNAL, CANCER D	ISCOVERY. IN
ADDITION, MSK CEO DR. CRAIG THOMPSON RESIGNED FROM HIS SEA	IS ON THE
BOARDS OF MERCK AND CHARLES RIVER LABORATORIES AND MADE NEW	W CONFLICT
DISCLOSURES, AS DID OTHER MSK STAFF. AFTER OUR INVESTIGATION	ON, MSK ALSO
ANNOUNCED THAT A VICE PRESIDENT WHO OVERSEES HOSPITAL VENT	URES WITH
FOR-PROFIT COMPANIES WOULD TURN OVER TO THE HOSPITAL NEARLY	Y \$1.4
MILLION OF A STAKE IN A BIOTECH COMPANY THAT HE RECEIVED FOR	OR
REPRESENTING MSK ON THE COMPANY'S BOARD.	
WHITE SUPREMACISTS DISMISSED AND ARRESTED	
IN MAY, PROPUBLICA PARTNERED WITH FRONTLINE TO PUBLISH AN	INVESTIGATION
THAT IDENTIFIED FORMER AND ACTIVE-DUTY MEMBERS OF THE MILI	TARY AS
MEMBERS OF ATOMWAFFEN DIVISION, A NEO-NAZI GROUP. WITHIN W	EEKS OF THE
INVESTIGATION, THE U.S. MARINE CORPS ANNOUNCED THAT IT OPEN	NED A
CRIMINAL INVESTIGATION INTO THE ACTIVITIES OF LANCE CPL. VA	ASILLIOS
PISTOLIS, WHOM THE REPORT IDENTIFIED AS A VIOLENT WHITE SU	PREMACIST WHO
TOOK PART IN THE CHARLOTTESVILLE, VIRGINIA, DEMONSTRATION	LAST AUGUST.
IN JUNE, PISTOLIS WAS CONVICTED AT A COURT-MARTIAL ON CHAR	GES OF
DISOBEYING ORDERS AND MAKING FALSE STATEMENTS, AND HE WAS I	DISMISSED
FROM THE CORPS. IN JULY, PROPUBLICA AND FRONTLINE REPORTED	ON THE
VIOLENT WHITE SUPREMACIST RISE ABOVE MOVEMENT. ONE DAY AFT	ER OUR
REPORT, WHICH NAMED MICHAEL MISELIS, AN AEROSPACE ENGINEER	WITH

GOVERNMENT SECURITY CLEARANCE, AS A MEMBER OF RAM, HIS EMPLOYER,

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DEFENSE CONTRACTOR NORTHROP GRUMMAN, ANNOUNCED THAT MISELI	S NO LONGER
WORKED THERE. IN AUGUST, THE MARINE CORPS ISSUED UPDATED O	RDERS
PROHIBITING PARTICIPATION IN WHITE SUPREMACIST GROUPS, ENC	OURAGING
MEMBERS TO REPORT FELLOW MARINES ENGAGED IN THESE ACTIVITI	ES AND
TIGHTENING RULES ON ACCOUNTABILITY. IN OCTOBER, CITING PRO	PUBLICA AND
FRONTLINE'S REPORTING, FEDERAL PROSECUTORS ANNOUNCED THEY	HAD ARRESTED
FOUR MEMBERS OR ASSOCIATES OF RAM - ROBERT RUNDO, ROBERT B	OMAN, TYLER
LAUBE AND AARON EASON - OVER THEIR ALLEGED ROLE IN THE "UN	ITE THE
RIGHT" RALLY IN CHARLOTTESVILLE. IF CONVICTED, THE MEN COU	LD FACE FIVE
YEARS IN PRISON FOR EACH OF TWO FEDERAL RIOT CHARGES.	
POLICE COOPERATION WITH IMMIGRATION OFFICIALS REGULATED	
IN APRIL, PROPUBLICA AND THE PHILADELPHIA INQUIRER REPORTE	D ON TACTICS
USED BY STATE AND LOCAL POLICE OFFICERS IN PENNSYLVANIA, W	ITHOUT
GUIDELINES OR OVERSIGHT, TO HELP IMMIGRATION AND CUSTOMS E	NFORCEMENT
ROUND UP IMMIGRANTS FOR DEPORTATION, INCLUDING THE QUESTIO	NING AND

ARRESTS OF HISPANIC MOTORISTS DURING TRAFFIC STOPS. IN JUNE, THE

PENNSYLVANIA STATE POLICE ANNOUNCED THAT OFFICERS WILL NOW BE REQUIRED

TO FILE A REPORT ANY TIME THEY CALL IMMIGRATION AUTHORITIES TO THE

SCENE OF A TRAFFIC STOP, DETAILING THE CIRCUMSTANCES OF THE CALL.

RED CROSS OFFICIAL RESIGNS OVER HANDLING OF SEXUAL MISCONDUCT IN JANUARY, WE REPORTED ON GERALD ANDERSON, A FORMER SENIOR EXECUTIVE AT THE AMERICAN RED CROSS, WHO HAD BEEN FORCED OUT OF THE ORGANIZATION AFTER HE HARASSED A SUBORDINATE AND WAS ACCUSED OF RAPING ANOTHER. RED CROSS GENERAL COUNSEL DAVID MELTZER HAD LAUDED ANDERSON ON HIS WAY OUT AND GAVE HIM A POSITIVE REFERENCE, HELPING HIM LAND A NEW POSITION AT SAVE THE CHILDREN. WHEN PROPUBLICA CONTACTED SAVE THE CHILDREN ABOUT 832212 10-10-18

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THE CIRCUMSTANCES OF ANDERSON'S DEPARTURE, THE ORGANIZATIO	N PLACED
ANDERSON ON ADMINISTRATIVE LEAVE. WEEKS LATER, HE WAS NO I	ONGER
EMPLOYED BY SAVE THE CHILDREN. FOLLOWING THE ARTICLE, MELT	ZER ALSO

RESIGNED FROM THE RED CROSS, SAYING THAT HE DEEPLY REGRETTED HIS

HANDLING OF THE SEXUAL MISCONDUCT CASE.

UNUSUAL DOMESTIC VIOLENCE POLICY REVERSED

IN EARLY 2017, PROPUBLICA REPORTED ON "DUAL ARRESTS" IN CONNECTICUT – INSTANCES IN WHICH POLICE ARREST BOTH THE VICTIM AND THE PERPETRATOR OF DOMESTIC VIOLENCE. THE STATE HAS A DUAL ARREST RATE ABOUT 10 TIMES HIGHER THAN THE NATIONAL AVERAGE. EXPERTS SAY THIS DISSUADES VICTIMS FROM CALLING POLICE BECAUSE OF THE FEAR OF ARREST AND THE LASTING DAMAGE OF A FORMAL CRIMINAL RECORD. IN MAY, THE CONNECTICUT LEGISLATURE PASSED A BILL, WHICH THE GOVERNOR SIGNED INTO LAW, TO END THE PRACTICE OF ARRESTING VICTIMS OF DOMESTIC VIOLENCE ALONG WITH THEIR ABUSERS WHEN THEY FIGHT BACK DURING THE COURSE OF AN ASSAULT.

DISCRIMINATORY POLICE PRACTICE ABANDONED

PROPUBLICA AND THE FLORIDA TIMES-UNION REPORTED IN LATE 2017 THAT
POLICE IN JACKSONVILLE, FLORIDA, DISPROPORTIONATELY ISSUED PEDESTRIAN
TICKETS TO BLACK RESIDENTS, ALMOST ALL OF THEM IN THE CITY'S POOREST
NEIGHBORHOODS. AFTER THE STORY, A JACKSONVILLE ASSISTANT STATE ATTORNEY
ISSUED A BULLETIN TO THE CITY'S SHERIFF'S OFFICE DETAILING THE PROPER
ENFORCEMENT OF FLORIDA'S PEDESTRIAN STATUTES, AND THE JACKSONVILLE CITY
COUNCIL PRESIDENT AND OTHER LOCAL LAWMAKERS CALLED FOR THE SUSPENSION
OF PEDESTRIAN TICKET WRITING. THE SHERIFF'S OFFICE CONDUCTED BIAS
TRAINING FOR SOME OFFICERS AND TRAINED OTHERS ON THE PROPER WAYS TO
ISSUE PEDESTRIAN TICKETS. THE REPORTING ALSO PROMPTED THE NAACP LEGAL
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DEFENSE FUND TO GO TO JACKSONVILLE TO CONDUCT ON-THE-GROUN	D INTERVIEWS

FOR AN INVESTIGATION CONCERNING THE SHERIFF'S OFFICE'S ENFORCEMENT OF

NEO-NAZIS LOSE ACCESS TO ONLINE PLATFORMS

IN FEBRUARY, PROPUBLICA REPORTED THAT THE CALIFORNIA MAN ACCUSED OF KILLING A GAY, JEWISH UNIVERSITY OF PENNSYLVANIA STUDENT WAS A MEMBER OF ATOMWAFFEN DIVISION, A NEO-NAZI GROUP. OUR REPORTERS OBTAINED OVER 250,000 MESSAGES FROM THE GROUP'S SECRET CHAT ROOM, SHOWING THAT OTHER ATOMWAFFEN MEMBERS CHEERED THE DEATH. AFTER THIS STORY, AT LEAST FOUR TECHNOLOGY COMPANIES - INCLUDING YOUTUBE; DISCORD, A CHAT APP FOR VIDEO GAMERS; STEAM, A COMMUNITY DISCUSSION BOARD FOR GAMERS; AND INKTALE, AN ONLINE T-SHIRT RETAILER - TOOK STEPS TO BAR THE HATE GROUP FROM USING THEIR ONLINE SERVICES AND PLATFORMS.

HAZARDOUS CLINICAL TRIALS SCRUTINIZED AS STAR PSYCHIATRIST RESIGNS IN APRIL, PROPUBLICA ILLINOIS REPORTED THAT CHILD PSYCHIATRIST MANI PAVULURI, WHOSE RENOWNED UNIVERSITY OF CHICAGO AT ILLINOIS CLINIC DREW FAMILIES FROM AROUND THE COUNTRY, VIOLATED PROTOCOLS AND PUT CHILDREN AT RISK. OUR REPORTING DETAILED HOW PAVULURI VIOLATED THE TERMS OF A FEDERAL GRANT BY TESTING LITHIUM ON CHILDREN YOUNGER THAN 13, FAILED TO PROPERLY ALERT PARENTS OF THE STUDY'S RISKS AND FALSIFIED DATA TO COVER UP THE MISCONDUCT. AFTER THE STORY, PAVULURI RESIGNED FROM THE UIC, AND IN DECEMBER, THE STATE DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION LAUNCHED AN INVESTIGATION OF HER CONDUCT.

EDUCATION DEPARTMENT'S CIVIL RIGHTS RECORDS UNDER REVIEW

IN JUNE, WE REPORTED THAT THE U.S. DEPARTMENT OF EDUCATION, UNDER THE 832212 10-10-18 Schedule O (Form 990 or 990-EZ) (2018)

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DIRECTION OF SECRETARY OF EDUCATION BETSY DEVOS, SCUTTLED	MORE THAN
1,200 CIVIL RIGHTS INVESTIGATIONS THAT WERE INHERITED FROM THE OBAMA	
ADMINISTRATION. OUR ANALYSIS SHOWED THAT THE TRUMP ADMINISTRATION IS	
LESS LIKELY THAN ITS PREDECESSOR TO FIND WRONGDOING BY SCH	OOL DISTRICTS
ON ISSUES RANGING FROM RACIAL AND SEXUAL HARASSMENT TO MEE	TING
EDUCATIONAL NEEDS OF DISABLED STUDENTS. IN NOVEMBER, THE O	FFICE OF
INSPECTOR GENERAL FOR THE EDUCATION DEPARTMENT ANNOUNCED T	HAT IT IS
SCRUTINIZING HOW THE DEPARTMENT HANDLES CIVIL RIGHTS COMPLI	AINTS.
FEDERAL INVESTIGATION OF PSYCHIATRIC HOSPITAL'S CHILDREN'S	UNIT
LAUNCHED	······································
IN OCTOBER, PROPUBLICA ILLINOIS UNCOVERED NUMEROUS ALLEGAT	IONS OF
SEXUAL ABUSE AND ASSAULT AGAINST CHILDREN WHO WERE PATIENT	S AT AURORA
CHICAGO LAKESHORE HOSPITAL, A PSYCHIATRIC FACILITY, WHILE	IN THE CARE
OF THE ILLINOIS DEPARTMENT OF CHILDREN AND FAMILY SERVICES	, OR DCFS.
FOLLOWING THE REPORT, FEDERAL AUTHORITIES ANNOUNCED THEY W	ERE PULLING
FUNDING FROM THE HOSPITAL - A MANDATE THAT A JUDGE HAS TEM	PORARILY
REVERSED AFTER THE HOSPITAL'S REQUEST FOR A RESTRAINING OR	DER UNTIL IT
COULD APPEAL THE DECISION. STATE LAWMAKERS AND THE AMERICA	N CIVIL
LIBERTIES UNION OF ILLINOIS DEMANDED A COMPREHENSIVE INVES	TIGATION OF
THE FACILITY, AND DCFS VOWED TO STOP SENDING KIDS THERE. U	NDER MOUNTING
PRESSURE, DCFS AGREED TO A FULL, INDEPENDENT ASSESSMENT IN	VOLVING
CHILDREN IN ITS CARE PLACED AT THE HOSPITAL, AND THE ACLU	OF ILLINOIS
TOOK DCFS TO COURT IN AN ATTEMPT TO MOVE THE REMAINING CHI	LDREN IN
STATE CARE OUT OF THE HOSPITAL. A FEDERAL JUDGE ALSO SAID	HE WILL
APPOINT A MONITOR TO OVERSEE DCFS.	

PROPUBLICA ILLINOIS ALSO PUBLISHED AN INVESTIGATION HIGHLIGHTING DCFS'

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Name of the organization PRO PUBLICA, INC.	Employer identification number 14-2007220
PRACTICE OF HOLDING CHILDREN IN PSYCHIATRIC HOSPITALS, SOM	ETIMES FOR
MONTHS, AFTER PHYSICIANS HAVE CLEARED THEM FOR RELEASE. ONI	E WEEK AFTER
THE STORY, WHICH WAS CO-PUBLISHED WITH THE ATLANTIC, ILLING	DIS LAWMAKERS
CALLED FOR A PUBLIC HEARING, DEMANDING STATE CHILD WELFARE	OFFICIALS
EXPLAIN WHY THEY ROUTINELY FAIL TO FIND BETTER HOMES FOR HU	JNDREDS OF
CHILDREN IN PSYCHIATRIC HOSPITALS. THE ACTING COOK COUNTY I	PUBLIC
GUARDIAN FILED A CLASS-ACTION LAWSUIT ON BEHALF OF HUNDREDS	S OF CHILDREN
AND TEEANGERS IN STATE CARE WHO HAVE BEEN HELD IN HOSPITALS	5 BEYOND
MEDICAL NECESSITY, CALLING THE PRACTICE INHUMANE AND UNCONS	STITUTIONAL.
IN ADDITION, THE AMERICAN CIVIL LIBERTIES UNION OF ILLINOIS	5, WHICH HAS
MONITORED THE STATE'S CHILD WELFARE AGENCY FOR DECADES AS I	PART OF A
FEDERAL CONSENT DECREE, ASKED A FEDERAL JUDGE TO TAKE THE H	RARE STEP OF
APPOINTING A SPECIAL MASTER TO RESOLVE DISPUTES AND DATA RE	QUESTS
RELATED TO PROVIDING MORE APPROPRIATE SERVICES FOR SUCH CHI	ILDREN.
UNRELIABLE FORENSICS RE-EXAMINED	
IN MAY, PROPUBLICA AND THE NEW YORK TIMES MAGAZINE TOLD THE	E STORY OF
JOE BRYAN, A FORMER TEXAS HIGH SCHOOL PRINCIPAL WHO HAS SPI	ENT MORE THAN
30 YEARS IN PRISON FOR THE MURDER OF HIS WIFE, A CRIME HE (	CLAIMS HE
DIDN'T COMMIT. HIS CONVICTION RESTED ALMOST SOLELY ON	
BLOODSTAIN-PATTERN ANALYSIS, A TECHNIQUE USED THROUGHOUT TH	HE CRIMINAL
JUSTICE SYSTEM, DESPITE WIDESPREAD CONCERNS ABOUT ITS RELIA	ABILITY.
AFTER OUR STORY, THE TEXAS FORENSIC SCIENCE COMMISSION ASKI	ED A
PROMINENT BLOODSTAIN-PATTERN ANALYST TO RE-EXAMINE THE CASH	3.
SUBSEQUENTLY, THE INFLUENTIAL STATE BODY FOUND THAT THE AND	
"NOT ACCURATE OR SCIENTIFICALLY SUPPORTED" AND THAT THE EXI	

TESTIFIED WAS "ENTIRELY WRONG," ALTHOUGH A STATE JUDGE REFUSED TO

## OVERTURN BRYAN'S CONVICTION.

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RISKY HOSPITAL PROGRAM LOSES COVERAGE

IN MAY, PROPUBLICA COLLABORATED WITH THE HOUSTON CHRONICLE TO INVESTIGATE PERVASIVE PROBLEMS WITH ST. LUKE'S MEDICAL CENTER'S ONCE-RENOWNED HEART TRANSPLANT PROGRAM, WHICH IN RECENT YEARS HAD SOME OF THE WORST OUTCOMES IN THE COUNTRY. JUST TWO WEEKS AFTER THE STORY, THE HOSPITAL TEMPORARILY SUSPENDED THE PROGRAM TO REVIEW THE CARE PROVIDED TO PATIENTS. IT REOPENED TWO WEEKS LATER, CHANGING PROCEDURES AND STAFFING BUT NOT FINDING ANY "SYSTEMIC ISSUES." SHORTLY THEREAFTER, THE CENTERS FOR MEDICARE AND MEDICAID SERVICES MADE A RARE DECISION TO STOP MEDICARE FUNDING OF THE HOSPITAL'S HEART TRANSPLANT PROGRAM, SAYING IT HASN'T DONE ENOUGH TO IMPROVE CARE AFTER A STRING OF PATIENT DEATHS.

ACCOUNTABILITY FOR PROSECUTORIAL MISCONDUCT INSTITUTED IN 2013, PROPUBLICA PUBLISHED A SERIES OF REPORTS FINDING THAT NEW YORK PROSECUTORS ARE ALMOST NEVER PUNISHED FOR MISCONDUCT, SUCH AS WITHHOLDING EVIDENCE AND TOLERATING FALSE TESTIMONY, THAT CAN LAND INNOCENT PEOPLE IN PRISON OR LET THE GUILTY GO FREE. IN JUNE, THE NEW YORK LEGISLATURE NEAR-UNANIMOUSLY PASSED A BILL AUTHORIZING THE GOVERNOR, THE LEGISLATURE AND THE STATE'S CHIEF JUDGE TO SELECT A PANEL TO INVESTIGATE ALLEGATIONS OF MISCONDUCT. THE BILL ALSO EMPOWERED THE PANEL TO ISSUE WARNINGS AND RECOMMEND SANCTIONS, INCLUDING FIRINGS, TO THE GOVERNOR. IN AUGUST, GOV. ANDREW CUOMO SIGNED THE BILL INTO LAW.

TROUBLED GARBAGE COLLECTION COMPANY CEASES OPERATIONS

IN JANUARY, PROPUBLICA PROFILED DANGEROUS PRACTICES IN THE WORLD OF

PRIVATE COMMERCIAL GARBAGE COLLECTION IN NEW YORK CITY. WE REPORTED

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THAT, WHEN A MAN WAS KILLED IN 2017 BY A TRUCK OWNED BY ONE OF THE	
CITY'S LARGEST TRASH HAULERS, SANITATION SALVAGE, WORKERS TOLD POLICE	
HE WAS A HOMELESS MAN WHO JUMPED ON THEIR TRUCK. OUR INVESTIGATION	
UNCOVERED THE IDENTITY OF THE MAN AS MOUCTAR DIALLO, A HEL	PER WHO WAS
WORKING ON THE TRUCK THAT KILLED HIM. WHEN A PEDESTRIAN WAS KILLED BY A	
TRUCK DRIVEN BY THE SAME DRIVER IN APRIL, WE FOLLOWED UP W	ITH AN
INVESTIGATION INTO THE COMPANY, DISCOVERING LABOR AND SAFE	TY
VIOLATIONS. IN AUGUST, THE BUSINESS INTEGRITY COMMISSION,	WHICH
REGULATES NEW YORK'S PRIVATE TRASH INDUSTRY, SUSPENDED SAN	ITATION
SALVAGE'S LICENSE TO OPERATE AND BARRED THE DRIVER INVOLVE	D IN BOTH
FATALITIES FROM WORKING IN THE INDUSTRY. THE COMPANY SURRE	NDERED ITS
OPERATING LICENSE IN NOVEMBER.	
"INDEPENDENT" WATCHDOG GROUP SHUTS DOWN	
IN JANUARY, PROPUBLICA ILLINOIS AND THE CHICAGO SUN-TIMES	REVEALED THAT
THE RIGHT-LEANING ILLINOIS POLICY INSTITUTE GAVE PROJECT S	IX, AN
ORGANIZATION THAT DESCRIBED ITSELF AS A NONPROFIT, INDEPEN	DENT,
NONPARTISAN, ANTI-CORRUPTION WATCHDOG GROUP, 98 PERCENT OF	ITS
FIRST-YEAR BUDGET. PROJECT SIX HAD PREVIOUSLY REFUSED TO D	ISCLOSE ITS
FUNDING SOURCES. A FURTHER INVESTIGATION REVEALED THAT THE	ILLINOIS
POLICY INSTITUTE'S CEO AND HIS ASSOCIATES MOVED MILLIONS O	F DOLLARS
AROUND THE FIVE INTERCONNECTED NONPROFITS THEY RAN, STEERI	NG MONEY TO
FOR-PROFIT VENTURES IN WHICH THEY HAVE A STAKE. THESE REVE	LATIONS
PROMPTED SWIFT CRITICISM FROM THE GOVERNOR AND A POTENTIAL	
INVESTIGATION BY THE ILLINOIS ATTORNEY GENERAL. IN APRIL 2	018, PROJECT
SIX ANNOUNCED THAT IT WAS SHUTTING DOWN.	

WRONGFUL CONVICTION BASED ON ERRONEOUS DNA TESTING OVERTURNED

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IN 2017, WE REPORTED ON A DNA TESTING TECHNIQUE USED BY NEW	W YORK CITY'S	
MEDICAL EXAMINER AND DOZENS OF OTHER JURISDICTIONS TO ANAL	YZE DIFFICULT	
DNA SAMPLES FROM CRIME SCENES. THE ARTICLE SHOWED THAT SOME SCIENTISTS		
AND DEFENSE LAWYERS SAY THE TECHNIQUE MAY BE INACCURATE, P	OTENTIALLY	
PUTTING INNOCENT PEOPLE IN PRISON. IN OCTOBER, MAYER HERSKOVIC,		
FEATURED IN PROPUBLICA'S INVESTIGATION, HAD HIS CONVICTION OVERTURNED		
AND THE UNDERLYING INDICTMENT DISMISSED BY THE STATE APPEA	LS COURT	
BECAUSE OF "LESS THAN CONVINCING" DNA EVIDENCE AGAINST HIM	•	
POLLUTING MILITARY PRACTICES LIMITED		
IN 2017, PROPUBLICA REVEALED HOW THE PENTAGON'S DEVELOPMEN	T AND TESTING	
OF WEAPONS HAS POLLUTED MILLIONS OF ACRES OF LAND AND DRIN	KING WATER	
RESOURCES ACROSS 40,000 U.S. SITES, WITH THE PENTAGON SYST	EMATICALLY	
IGNORING OR DOWNPLAYING ITS CLEANUP RESPONSIBILITIES. PROM	PTED BY OUR	
INVESTIGATION, THE DEPARTMENT OF DEFENSE INSPECTOR GENERAL	LAUNCHED AN	
INVESTIGATION INTO THE MILITARY'S PRACTICE OF OPEN BURNING	AND	
DETONATING HAZARDOUS EXPLOSIVE MATERIALS ON ITS PROPERTIES	, AS WELL AS	
ITS FREQUENT RELIANCE ON FEDERAL CONTRACTORS TO CARRY OUT	THAT WORK. IN	

CASES OF MISSING CHILDREN REVISITED
IN SEPTEMBER, PROPUBLICA PUBLISHED AN INVESTIGATION, IN PARTNERSHIP
WITH NEWSDAY AND THIS AMERICAN LIFE, ON NEARLY A DOZEN LATINO FAMILIES
THAT CAME TO THE SUFFOLK COUNTY POLICE DEPARTMENT IN LONG ISLAND ABOUT
Schedule O (Form 990 or 990-EZ) (2018)

ADDITION, REP. CAROL SHEA-PORTER, A MEMBER OF THE HOUSE ARMED SERVICES

REQUIRING THE PENTAGON TO END THE OUTMODED AND HIGHLY TOXIC PRACTICE OF

BURNING OLD MUNITIONS AND OTHER EXPLOSIVES IN THE OPEN AIR. THE BILL

COMMITTEE, INTRODUCED AN AMENDMENT TO THE DEFENSE SPENDING BILL

PASSED IN JUNE.

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THEIR TEENAGE CHILDREN WHO HAD DISAPPEARED. WHILE THE DEPARTMENT		
IGNORED THEIR CONCERNS AND LABELED THEIR CHILDREN RUNAWAYS, IT TURNED		
OUT THAT MANY OF THE MISSING HAD BEEN MURDERED BY MEMBERS OF THE GANG		
MS-13. WITHIN A WEEK OF PUBLICATION, THE POLICE DEPARTMENT ANNOUNCED		
THAT IT WILL REVISIT CASES IN WHICH FAMILIES HAVE ALLEGED MISCONDUCT,		
AND BOTH OF THE DETECTIVES FEATURED IN OUR INVESTIGATION ARE NOW UNDER		
INTERNAL AFFAIRS REVIEW.		
DISCRIMINATORY TICKETING PRACTICES REFORMED		
PROPUBLICA ILLINOIS PUBLISHED A SERIES OF STORIES, IN PARTNERSHIP WITH		
WBEZ, EXPOSING CHICAGO'S AGGRESSIVE AND UNEQUAL TICKETING	PRACTICES,	
COMBINED WITH PUNITIVE COLLECTIONS MEASURES, WHICH HAVE PUSHED TENS OF		
THOUSANDS OF MOSTLY BLACK MOTORISTS INTO CHAPTER 13 BANKRUPTCY, SINCE		
OUR REPORTING, THE CITY OF CHICAGO HAS DISMISSED SOME 23,00	00	
OUTSTANDING DUPLICATE VEHICLE TICKETS AND WILL REFUND MOTORISTS WHO		
HAVE ALREADY PAID FOR AN ADDITIONAL 12,000 DUPLICATES. THE	CHICAGO CITY	
COUNCIL APPROVED REFORMS INCLUDING A PROGRAM DESIGNED TO HI	ELP	
LOW-INCOME MOTORISTS COMPLY WITH THE MUNICIPAL REQUIREMENT	AND TO AVOID	
COSTLY CITATIONS, ALONG WITH A MEASURE TO WIPE AWAY SOME T	ICKET DEBT	
FOR MOTORISTS WHO FILE FOR BANKRUPTCY UNDER CHAPTER 7. ANO:	THER MORE	
SWEEPING SET OF IMPROVEMENTS HAS ALSO BEEN PUT FORWARD AND	IS AWAITING	
CONSIDERATION.		
ILLEGAL USES OF PRESIDENTIAL SEAL HALTED		

IN MARCH, OUR "TRUMP, INC." PODCAST WITH WNYC REPORTED THAT THE TRUMP ORGANIZATION HAD ORDERED DOZENS OF GOLF TEE MARKERS EMBLAZONED WITH THE PRESIDENTIAL SEAL, EVEN THOUGH IT'S ILLEGAL TO USE THE SEAL FOR COMMERCIAL PURPOSES. THE DAY AFTER THE STORY, THE PRESIDENT'S COMPANY Schedule O (Form 990 or 990-EZ) (2018)
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SAID IT REMOVED THE MARKERS FROM ITS GOLF COURSES.

AGE DISCRIMINATION SCRUTINIZED

IN MARCH, PROPUBLICA PUBLISHED AN INVESTIGATION INTO IBM'S PRACTICES OF

FORCING OLDER WORKERS OUT OF THEIR JOBS THROUGH RETIREMENT AND LAYOFFS,

REPLACING THEM WITH YOUNGER EMPLOYEES AND FLOUTING LAWS INTENDED TO

PROTECT AGAINST AGE BIAS. IN MAY, THE U.S. EQUAL EMPLOYMENT OPPORTUNITY

COMMISSION CONSOLIDATED AGE DISCRIMINATION COMPLAINTS AGAINST THE

COMPANY FROM AROUND THE COUNTRY, LAUNCHING A NATIONWIDE INVESTIGATION

OF AGE BIAS AT IBM.

LONGSTANDING CIVIL RIGHTS COMPLAINTS INVESTIGATED

IN DECEMBER, PROPUBLICA AND THE NEW YORK TIMES PUBLISHED AN

INVESTIGATION INTO RACIAL DISCRIMINATION IN MONTANA'S WOLF POINT SCHOOL

DISTRICT, WHERE TRIBAL LEADERS HAVE LONG CLAIMED THAT SCHOOLS

DISCIPLINE NATIVE AMERICAN STUDENTS MORE HARSHLY THAN WHITE STUDENTS,

SHUNT THEM INTO REMEDIAL PROGRAMS WITHOUT APPROPRIATE CAUSE, AND DENY

THEM SPECIAL EDUCATION EVALUATIONS AND SERVICES. DESPITE RECEIVING A

DETAILED CIVIL RIGHTS COMPLAINT FILED BY TRIBAL LEADERS IN JUNE 2017,

THE U.S. DEPARTMENT OF EDUCATION HAD FAILED TO ACT. HOURS AFTER OUR

STORY, THE DEPARTMENT OF EDUCATION'S OFFICE FOR CIVIL RIGHTS SAID THAT

IT WILL INVESTIGATE THE COMPLAINT ON RACIAL INEQUITIES.

CAMPAIGN CONTRIBUTIONS LIMITED

LAST YEAR, PROPUBLICA, WNYC AND THE NEW YORKER REPORTED THAT MANHATTAN

DISTRICT ATTORNEY CYRUS VANCE JR. HAD YEARS EARLIER OVERRULED

PROSECUTORS WHO WANTED TO BRING FELONY FRAUD CHARGES AGAINST IVANKA

 TRUMP AND DONALD TRUMP JR. DURING THE OFFICE'S INVESTIGATION, IN 2012,

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VANCE MET WITH TRUMP LAWYER MARC KASOWITZ, WHO HAD DONATED	
RE-ELECTION CAMPAIGN. FOLLOWING THE REPORT, VANCE SAID HE	WOULD NO
LONGER TAKE CAMPAIGN DONATIONS FROM DEFENSE ATTORNEYS WITH	CASES BEFORE
HIM AND WILL CAP DONATIONS FROM THEIR LAW PARTNERS. HE ALS	O WILL NOT
SOLICIT CONTRIBUTIONS PERSONALLY AND WILL HAVE HIS CAMPAIG	N SHIELD HIM
FROM THE IDENTITIES OF HIS DONORS.	
CHANGES TO FBI CRIME REPORTING FAST-TRACKED AND LOCAL POLI	CE DEPARTMENT
AUDITED	
PROPUBLICA PARTNERED WITH REVEAL FROM THE CENTER FOR INVES	TIGATIVE
REPORTING AND NEWSY FOR AN INVESTIGATION ON LOCAL LAW ENFO	RCEMENT'S
WIDESPREAD USE OF "EXCEPTIONAL CLEARANCES" TO CLOSE RAPE C.	ASES WITHOUT
ACTUALLY RESOLVING THEM. THE STORY DISCOVERED A MAJOR FLAW	IN THE FBI'S
CRIME REPORTING SYSTEM, THE NATIONAL INCIDENT-BASED REPORT	ING SYSTEM,
OR NIBRS, THAT DID NOT REQUIRE AGENCIES TO TRACK CASES CLA	SSIFIED AS
"UNFOUNDED," A CATEGORY FOR WHEN POLICE SAY THE VICTIM IS	LYING OR THE
REPORTED CRIME DIDN'T OCCUR. CALLING OUR FINDINGS "A CRISI	S, AN
EMERGENCY, " THE CHAIRMAN OF THE FBI'S NIBRS TRANSITION TAS	K FORCE HAS
EXPEDITED A PROCESS EXPECTED TO CHANGE REPORTING RULES AND	REQUIRE
POLICE TO DISCLOSE THESE CASES. THE STORY ALSO PROMPTED TH	E AUSTIN
POLICE DEPARTMENT TO REQUEST AN INDEPENDENT AUDIT BY TEXAS	OFFICIALS,
WHICH FOUND THAT AUSTIN POLICE HAD IMPROPERLY CLEARED NEAR	LY A THIRD OF
SEXUAL ASSAULT CASES FROM 2017, A MISCLASSIFICATION THAT M	ADE THE
DEPARTMENT'S RATE OF SOLVING RAPE CASES APPEAR HIGHER.	

EFFECTIVENESS OF SUPPORTED HOUSING SYSTEM ASSESSED

IN AN INVESTIGATION WITH FRONTLINE AND THE NEW YORK TIMES ON A NEW YORK

POLICY TO MOVE PEOPLE OUT OF INSTITUTIONS AND INTO PRIVATE APARTMENTS, 832212 10-10-18 Schedule O (Form 990 or 990-EZ) (2018)

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Name of the organization PRO PUBLICA, INC.	Employer identification number $14 - 2007220$	
WE REVEALED THAT CLINICIANS FELT PRESSURED TO MOVE INDIVID	UALS INTO	
APARTMENTS EVEN WHEN THEY WERE NOT GOOD CANDIDATES. LACKING THE		
STRUCTURE OF THE INSTITUTIONS, IT BECAME MUCH EASIER FOR I	NDIVIDUALS TO	
SLIP THROUGH THE CRACKS, WITH DANGEROUS, DEHUMANIZING AND	SOMETIMES	
FATAL RESULTS. THE DAY AFTER OUR REPORT, FEDERAL JUDGE NICHOLAS		
GARAUFIS, WHO ORIGINALLY ARRANGED THE 2014 SETTLEMENT THAT RESULTED IN		
THE SUPPORTED HOUSING POLICY, ORDERED AN INDEPENDENT REPOR	T TO ASSESS	
THE EFFECTIVENESS OF ITS INCIDENT REPORTING SYSTEM, GOT TH	E STATE TO	
COMMIT TO EXAMINING ITS SERVICE-COORDINATION PROGRAM AND S	UGGESTED THE	
STATE DEVELOP A PROGRAM TO HELP RESIDENTS LEARN AND PRACTI	CE BASIC LIFE	
SKILLS IN SUPPORTED HOUSING.		

PATIENT PRIVACY DEFENDED

IN DECEMBER 2015, PROPUBLICA, IN COLLABORATION WITH THE NEW YORK TIMES, REPORTED ON PATIENTS WHO HAD DETAILS OF THEIR MENTAL HEALTH DIAGNOSES AND TREATMENTS EXPOSED BY A NEW JERSEY PSYCHOLOGY PRACTICE SUING THEM OVER UNPAID BILLS. IN APRIL 2017, THE STATE ATTORNEY GENERAL'S OFFICE AND THE NEW JERSEY STATE BOARD OF PSYCHOLOGICAL EXAMINERS FILED A COMPLAINT AGAINST THE PSYCHOLOGIST, BARRY HELFMANN, FOR FAILING TO PROTECT PATIENTS' CONFIDENTIALITY. THIS JUNE, THE STATE BOARD OF PSYCHOLOGICAL EXAMINERS MOVED TO SUSPEND HIS LICENSE FOR TWO YEARS.

ELECTIONLAND TRACKED VOTER PROBLEM

THROUGHOUT 2018, PROPUBLICA'S ELECTIONLAND USED DATA AND TECHNOLOGY TO

TRACK ISSUES THAT CAN PREVENT VOTERS FROM CASTING THEIR BALLOTS, IN

ORDER TO FIX PROBLEMS IN TIME FOR PEOPLE TO VOTE.

THE PROJECT SPURRED CONSIDERABLE IMPACT ACROSS THE COUNTRY:

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- DAYS BEFORE ELECTION DAY, PROPUBLICA FOUND THAT THE COMP	UTER SERVERS
THAT POWERED KENTUCKY'S ONLINE VOTER REGISTRATION AND WISC	ONSIN'S
REPORTING OF ELECTION RESULTS WERE SUSCEPTIBLE TO HACKING.	OUR ANALYSIS
FOUND THAT THE INSECURE SERVICE RUN BY WISCONSIN COULD BE	REACHED FROM
INTERNET ADDRESSES BASED IN RUSSIA, WHILE KENTUCKY'S WAS A	CCESSIBLE
FROM OTHER EASTERN EUROPEAN COUNTRIES. AFTER OUR INQUIRY,	WISCONSIN
SHUT DOWN ITS SERVICE, AND SHORTLY AFTER THE STORY RAN, KE	NTUCKY
APPEARED TO DO THE SAME, MAKING ITS SERVER NO LONGER AVAIL	ABLE TO THE
PUBLIC.	
- RESPONDING TO AN ELECTIONLAND TIP, OUR PARTNERS AT THE H	OUSTON
CHRONICLE REPORTED ON VOTER REGISTRATION ISSUES AT PRAIRIE	VIEW A&M, A

HISTORICALLY BLACK UNIVERSITY IN WALLER COUNTY. ADMINISTRATIVE ERRORS WERE KEEPING HUNDREDS OF REGISTERED VOTERS AT THE SCHOOL FROM CASTING A BALLOT AT THE VOTING LOCATION ON CAMPUS. IN ADDITION, THE COUNTY WAS ASKING THEM TO FILL OUT FORMS TO REMEDY THE PROBLEM - A STEP ADVOCATES SAY COULD CONFUSE STUDENTS AND KEEP THEM FROM VOTING. THE CHRONICLE ALSO DOCUMENTED THAT A DEMOCRATIC CAMPAIGN STAFFER COMPLAINING ABOUT THE ISSUE WAS BRIEFLY ARRESTED AFTER TAKING A PHOTO OF THE COUNTY CLERK. AFTER THE COVERAGE, THE TEXAS SECRETARY OF STATE'S OFFICE STEPPED IN AND ALLOWED PRAIRIE VIEW STUDENTS TO VOTE ON CAMPUS WITHOUT FILLING OUT ADDITIONAL PAPERWORK.

- A VOTER WHO HAD BEEN BOOTED FROM A POLLING LOCATION BECAUSE SHE WORE A T-SHIRT WITH THE LOGO OF A PROGRESSIVE TEXAS GROUP REACHED OUT TO ELECTIONLAND. SHE TOLD US THAT THE HARRIS COUNTY CLERK'S OFFICE HAD SENT A MEMO TO POLL WORKERS SINGLING OUT THREE PROGRESSIVE GROUPS FOR REMOVAL FROM THE POLLS. WE SHARED THE MEMO WITH THE CHRONICLE, WHICH 832212 10-10-18 Schedule O (Form 990 or 990-EZ) (2018)

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EN CALLED THE CLERK'S OFFICE. SOON AFTER, BEFORE THE PA	PER EVEN HAD A
ANCE TO PUBLISH A STORY, THE COUNTY RESCINDED THE MEMO.	THE TEXAS
CRETARY OF STATE'S OFFICE ALSO LATER WEIGHED IN, ADVISI	

AGAINST THE PROHIBITION.

- WE RECEIVED A SLEW OF TIPS ABOUT RESISTBOT - A TEXTING SERVICE THAT REMINDS VOTERS OF THEIR POLLING PLACE AND OF EARLY VOTING DEADLINES -WHEN THE SERVICE TEXTED VOTERS ACROSS FLORIDA THAT EARLY VOTING ENDED A DAY EARLIER THAN IT REALLY DID. WHILE COUNTIES IN FLORIDA ARE NOT REQUIRED TO KEEP POLLING PLACES OPEN THE SUNDAY BEFORE THE ELECTION, MANY DO. AFTER WE PASSED THE TIP TO A REPORTER AT WLRN IN FLORIDA, HE TWEETED AT RESISTBOT ASKING THE ORGANIZATION TO CORRECT THE ERROR. IT DID, SENDING UPDATED TEXTS TO VOTERS IN THE AFFECTED AREAS.

- DURING THE NEW YORK GUBERNATORIAL PRIMARY IN SEPTEMBER, ELECTIONLAND TRACKED DOWN A TIP THAT THE NEW YORK CITY HOUSING AUTHORITY INSTRUCTED HUNDREDS OF RESIDENTS IN A CONEY ISLAND BUILDING TO REMAIN HOME FOR A ROUTINE INSPECTION ON THE DAY OF PRIMARY ELECTIONS. AFTER A PROPUBLICA REPORTER REACHED OUT TO THE AGENCY, A SPOKESPERSON SAID THE INSTRUCTIONS WERE AN OVERSIGHT AND RESCINDED THEM, ALSO PROMISING NOT TO SCHEDULE INSPECTIONS ON ELECTION DAY.

- OUR PARTNERS AT BKLYNER AND WNYC REPORTED ON AN OFFICIAL NEW YORK CITY VOTER GUIDE THAT INCORRECTLY STATED FELONS CAN VOTE ONLY AFTER COMPLETING PAROLE. AFTER THE STORY, THE AGENCY UPDATED ITS WEBSITE, IN ADDITION TO CORRECTING A BLOG POST FROM TWO YEARS EARLIER THAT INCLUDED THE OUTDATED INFORMATION.

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- TAMPA BAY TIMES, AN ELECTIONLAND PARTNER, REPORTED ON A	NEW PORT
RICHEY POLLING SITE AT A CHURCH WHOSE PASTOR ERECTED A SIG	N OUTSIDE
READING "DON'T VOTE FOR DEMOCRATS ON TUESDAY AND SING 'OH	HOW I LOVE
JESUS' ON SUNDAY." WHILE THE PASCO COUNTY SUPERVISOR OF EL	ECTIONS
OFFICE SAID ON ELECTION DAY THAT, DESPITE HUNDREDS OF COMP	LAINTS, THE
SIGN COULD NOT BE REMOVED BECAUSE IT WAS ON PRIVATE PROPER	TY OUTSIDE
THE 100-FOOT PERIMETER WHERE CAMPAIGNING ISN'T ALLOWED, DA	YS LATER THE
CHURCH LOST ITS STATUS AS AN A POLLING SITE BECAUSE OF THE	SIGN.
RECOGNITION FOR OUR WORK PROPUBLICA'S WORK WAS HONORED IN 2018 AS FOLLOWS:	
OUR COLLABORATION WITH NPR, ON THE MATERNAL MORTALITY CRIS	IS IN THE
U.S., WAS A FINALIST FOR THE PULITZER PRIZE FOR EXPLANATOR	Y REPORTING.
THE SERIES WON THE PEABODY AWARD IN THE RADIO/PODCAST CATE	GORY; THE
GOLDSMITH PRIZE FOR INVESTIGATIVE REPORTING; THE GEORGE PO	LK AWARD FOR
MEDICAL REPORTING; THE EDWARD R. MURROW NATIONAL AWARD FOR	EXCELLENCE
IN INNOVATION; THE NATIONAL ASSOCIATION OF BLACK JOURNALIS	TS' SALUTE TO
EXCELLENCE AWARD FOR DIGITAL INTERACTIVE NEWS STORY; THE S	
CHI AWARD FOR EXCELLENCE IN JOURNALISM; THE NEW YORK ACADE	MY OF

MEDICINE HEALTH EQUITY JOURNALISM PRIZE; A NATIONAL ACADEMIES OF

SCIENCE, ENGINEERING AND MEDICINE COMMUNICATION AWARD; THE DEADLINE

CLUB AWARD FOR PUBLIC INTEREST; AND THE COUNCIL ON CONTEMPORARY

FAMILIES AWARD FOR OUTSTANDING MEDIA COVERAGE OF FAMILY ISSUES. THE

SERIES WAS A FINALIST FOR THE NATIONAL MAGAZINE AWARD FOR PUBLIC

INTEREST; THE INVESTIGATIVE REPORTERS AND EDITORS AWARD FOR

PRINT/ONLINE; THE ASSOCIATION OF HEALTH CARE JOURNALISTS AWARD FOR

 PRINT JOURNALISM; THE ONLINE JOURNALISM AWARDS' KNIGHT AWARD FOR PUBLIC

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SERVICE; AND THE NATIONAL INSTITUTE FOR HEALTH CARE MANAGE	MENT	
FOUNDATION RESEARCH AND JOURNALISM AWARD FOR PRINT JOURNALISM; AND		
RECEIVED HONORABLE MENTION FOR THE MOLLY NATIONAL JOURNALI	SM PRIZE.	
"THE TAX DIVIDE," A SERIES FROM PROPUBLICA ILLINOIS AND TH	E CHICAGO	
TRIBUNE ON THE UNFAIR PROPERTY TAX ASSESSMENT SYSTEM IN CO	OK COUNTY,	
ILLINOIS, WAS A FINALIST FOR THE PULITZER PRIZE FOR LOCAL	REPORTING.	
THE SERIES WON THE GERALD LOEB AWARD FOR DISTINGUISHED BUS	INESS AND	
FINANCIAL JOURNALISM IN THE LOCAL CATEGORY; THE TAYLOR AWA	RD FOR	
FAIRNESS IN JOURNALISM; THE NATIONAL HEADLINER AWARD FOR NEWS SERIES IN		
A DAILY NEWSPAPER; THE PETER LISAGOR AWARDS' WATCHDOG AWAR	D FOR	
EXCELLENCE IN PUBLIC INTEREST REPORTING; THE LISAGOR AWARD	FOR BEST	
INVESTIGATIVE REPORTING IN A GENERAL INTEREST DAILY NEWSPA	PER, NEWS	
SERVICE OR NEWS BUREAU; AND THE NEW YORK STATE SOCIETY OF	CPAS'	
EXCELLENCE IN FINANCIAL JOURNALISM AWARDS FOR PUBLIC SERVI	CE AND BEST	
LOCAL REPORTING; AND WAS A FINALIST FOR THE RICHARD H. DRI	EHAUS	
FOUNDATION AWARD FOR INVESTIGATIVE REPORTING.		

THE PROPUBLICA AND WNYC PODCAST "TRUMP, INC." WON AN ALFRED I.

DUPONT-COLUMBIA UNIVERSITY AWARD.

PROPUBLICA WON AN ONLINE JOURNALISM AWARD FOR GENERAL EXCELLENCE IN ONLINE JOURNALISM.

OUR SERIES WITH NPR AND THE NEW YORKER, ON HOW EMPLOYERS AND INSURANCE COMPANIES USE THREATS OF DEPORTATION TO GET OUT OF PAYING WORKERS COMPENSATION FOR UNDOCUMENTED WORKERS, WON THE MOLLY NATIONAL

JOURNALISM PRIZE; THE JAMES ARONSON AWARD FOR SOCIAL JUSTICE

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JOURNALISM; THE SOCIETY OF AMERICAN BUSINESS EDITORS AND W	RITERS AWARD
FOR EXPLANATORY REPORTING; THE INVESTIGATIVE REPORTERS AND	EDITORS
AWARD IN THE RADIO/AUDIO CATEGORY; AND THE NEW YORK STATE	SOCIETY OF
CPAS' EXCELLENCE IN FINANCIAL JOURNALISM AWARD FOR BEST GE	NERAL
REPORTING; AND WAS A FINALIST FOR THE DEADLINE AWARD FOR B	EAT
REPORTING.	

"AUTOMATING HATE," A COLLABORATION WITH THE NEW YORK TIMES AND GERMAN NEWS ORGANIZATIONS THAT EXPOSED DISCRIMINATORY FACEBOOK POLICIES, WON THE SOCIETY OF AMERICAN BUSINESS EDITORS AND WRITERS AWARD IN THE TECHNOLOGY CATEGORY AND THE GERALD LOEB AWARD FOR BEAT REPORTING.

OUR PROJECT WITH THE FLORIDA TIMES-UNION, "WALKING WHILE BLACK," ON RACIAL DISPARITIES IN THE ENFORCEMENT OF PEDESTRIAN VIOLATIONS IN JACKSONVILLE, FLORIDA, WON THE AL NAKKULA AWARD FOR POLICE REPORTING; THE ONLINE JOURNALISM AWARDS' UNIVERSITY OF FLORIDA AWARD FOR INVESTIGATIVE DATA JOURNALISM; THE NATIONAL ASSOCIATION OF BLACK JOURNALISTS' SALUTE TO EXCELLENCE AWARD FOR ONLINE NEWS PROJECT; THE PAUL TOBENKIN MEMORIAL AWARD; THE DEADLINE CLUB AWARD FOR MINORITY FOCUS; AND THREE AWARDS IN THE FLORIDA SOCIETY OF NEWS EDITORS CONTEST FOR PUBLIC SERVICE, COMMUNITY LEADERSHIP AND BEAT REPORTING.

"TOO BROKE FOR BANKRUPTCY," OUR SERIES ON HOW THE BANKRUPTCY SYSTEM ROUTINELY FAILS THOSE IT IS MEANT TO AID AND PARTICULARLY PUNISHES POOR BLACK AMERICANS, WON THE AMERICAN SOCIETY OF NEWS EDITORS' DORI J. MAYNARD AWARD FOR JUSTICE IN JOURNALISM; THE SOCIETY OF AMERICAN BUSINESS EDITORS AND WRITERS AWARD FOR INVESTIGATIVE REPORTING; AND SECOND PLACE FOR THE PHILIP MEYER AWARD FOR JOURNALISM USING SOCIAL BUSINESS EDITORS OF 990-EZ (2018)

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SCIENCE RESEARCH METHODS. THE SERIES WAS ALSO A FINALIST F	OR THE GERALD
LOEB AWARD IN THE EXPLANATORY CATEGORY AND THE ONLINE NEWS	
HOLD AWARD IN THE EXTERNITORY CHILDOOKY MAD THE ONLINE MEND	
ASSOCIATION'S UNIVERSITY OF FLORIDA AWARD FOR INVESTIGATIV	E DATA
ABSOCIATION D UNIVERSITI OF TEORIER AWARD FOR INVESTIGATIV	
JOURNALISM.	

"BOMBS IN OUR BACKYARDS," A SERIES ON HOW THE U.S. MILITARY IS THE COUNTRY'S MOST DANGEROUS POLLUTER, WON THE SOCIETY OF ENVIRONMENTAL JOURNALISTS' NINA MASON PULLIAM AWARD FOR OUTSTANDING ENVIRONMENTAL REPORTING AND SEJ'S KEVIN CARMODY AWARD FOR OUTSTANDING IN-DEPTH REPORTING; RECEIVED HONORABLE MENTION IN THE NATIONAL PRESS CLUB'S JOAN FRIEDENBERG ONLINE JOURNALISM AWARD; WAS A SILVER WINNER IN THE TOKYO INTERNATIONAL FOTO AWARDS; AND WAS A FINALIST FOR THE DEADLINE CLUB AWARD FOR SCIENCE, TECHNOLOGY, MEDICAL OR ENVIRONMENTAL REPORTING.

THE "TRUMP TOWN" NEWS APP, TRACKING EX-LOBBYISTS AND WASHINGTON, D.C., INSIDERS WHO HAVE BEEN APPOINTED ACROSS THE FEDERAL GOVERNMENT, WON THE THE ONLINE NEWS ASSOCIATION'S AL NEUHARTH INNOVATION IN INVESTIGATIVE JOURNALISM AWARD; THE SOCIETY OF PROFESSIONAL JOURNALISTS' SUNSHINE AWARD; AND THE FIRST AMENDMENT COALITION'S FREE SPEECH & OPEN GOVERNMENT AWARD; WAS A FINALIST FOR THE INVESTIGATIVE REPORTERS AND EDITORS AWARD FOR FREEDOM OF INFORMATION; AND WAS RECOGNIZED ON THE DATA JOURNALISM AWARDS SHORTLIST.

"WASTED MEDICINE," OUR SERIES HIGHLIGHTING THE HUNDREDS OF BILLIONS OF DOLLARS THAT THE U.S. WASTES EACH YEAR ON HEALTH CARE, WON THE ASSOCIATION OF HEALTH CARE JOURNALISTS AWARD IN THE CONSUMER/FEATURE CATEGORY AND THE SOCIETY OF AMERICAN BUSINESS EDITORS AND WRITERS AWARD FOR HEALTH/SCIENCE; AND WAS A FINALIST FOR THE GERALD LOEB AWARD FOR 832212 10-10-18 Schedule O (Form 990 or 990-EZ) (2018) Name of the organization

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PERSONAL FINANCE AND THE NATIONAL INSTITUTE FOR HEALTH CARE MANAGEMENT

FOUNDATION RESEARCH AND JOURNALISM AWARD FOR PRINT JOURNALISM.

OUR INVESTIGATION WITH FORTUNE, "THE BILLION-DOLLAR LOOPHOLE," ON A POPULAR CHARITABLE DONATION TAX SCHEME THAT IS BEING MANIPULATED TO MAKE BIG PROFITS, WON THE SOCIETY OF AMERICAN BUSINESS EDITORS AND WRITERS AWARD FOR BANKING/FINANCE.

OUR STORY ABOUT AN MS-13 INFORMANT WHO RISKED HIS LIFE TO WORK WITH LOCAL POLICE, CO-PUBLISHED WITH NEW YORK MAGAZINE, WON AN ONLINE JOURNALISM AWARD IN THE FEATURE CATEGORY. "THE RUNAWAYS," A COLLABORATION WITH THIS AMERICAN LIFE ABOUT HOW POLICE NEGLECTED TO INVESTIGATE LATINO TEENAGERS VICTIMIZED BY THE GANG, WON THE OCTOBER SIDNEY AWARD.

"THE FAILURE TRACK," OUR INVESTIGATION ON NEGLECT AND PROFITEERING IN ALTERNATIVE SCHOOLS, WON THE NATIONAL AWARD FOR EDUCATION REPORTING FOR INVESTIGATIVE REPORTING.

THE PROPUBLICA-LED PROJECT "DOCUMENTING HATE," A COALITION OF NEWSROOMS REPORTING ON HATE CRIMES, WON THE ASSOCIATION OF LGBTQ JOURNALITS' AL NEUHARTH AWARD OF INNOVATION IN INVESTIGATIVE JOURNALISM AND WAS A FINALIST FOR THE SCRIPPS HOWARD AWARD FOR TOPIC OF THE YEAR.

OUR STORYTELLING AND REPORTING ON TWITTER ABOUT THE TRUMP ADMINISTRATION WON THE EDWARD R. MURROW REGIONAL AWARD FOR EXCELLENCE IN SOCIAL MEDIA.

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PRO PUBLICA, INC.

Employer identification number 14-2007220

OUR STORY ON FOREIGNERS RECEIVING PRIORITY ON LIVER TRANSPLANT LISTS

WITH WVUE-TV NEW ORLEANS WON AN EDWARD R. MURROW REGIONAL AWARD FOR

HARD NEWS.

A PROPUBLICA ILLINOIS AND CHICAGO TRIBUNE STORY ON HOW CHICAGO POLICE

SKIRT PUNISHMENT WITHIN A FAILED DISCIPLINARY SYSTEM WON TWO PETER

LISAGOR AWARDS, FOR BEST MULTIMEDIA FEATURE PRESENTATION AND BEST

MULTIMEDIA COLLABORATION, AND WAS A FINALIST FOR THE PETER LISAGOR

AWARD FOR BEST POLITICAL AND GOVERNMENT REPORTING.

OUR COLLABORATION WITH THE INVESTIGATIVE FUND, "TRASHED: INSIDE THE DEADLY WORLD OF PRIVATE GARBAGE COLLECTION," WON THE FEBRUARY SIDNEY AWARD.

OUR INVESTIGATION WITH CONSUMER REPORTS INTO DISCRIMINATORY AUTO INSURANCE PRACTICES WON THE SHORTY SOCIAL GOOD AWARD FOR BEST IN RACIAL EQUALITY.

OUR STORY ON MENTAL HEALTH CARE IN MISSISSIPPI'S CRIMINAL JUSTICE

SYSTEM WON THE DEADLINE CLUB AWARD FOR NEWSPAPER OR DIGITAL FEATURE

REPORTING AND RECEIVED HONORABLE MENTION FOR THE NATIONAL PRESS

FOUNDATION CAROLYN MATTINGLY AWARD FOR MENTAL HEALTH REPORTING.

"HOW THE U.S. TRIGGERED A MASSACRE IN MEXICO," A COLLABORATION WITH

NATIONAL GEOGRAPHIC, WAS A FINALIST FOR THE NATIONAL MAGAZINE AWARD FOR

REPORTING.

OUR INVESTIGATION DISCLOSING UNSEEMLY PRACTICES BY THE FAMILY REAL

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PRO PUBLICA, INC.

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ESTATE BUSINESS OF TRUMP'S SON-IN-LAW AND ADVISER JARED KUSHNER,

CO-PUBLISHED WITH THE NEW YORK TIMES MAGAZINE, WAS A FINALIST FOR THE

NATIONAL MAGAZINE AWARD FOR REPORTING.

OUR INVESTIGATION INTO AGE DISCRIMINATION AT IBM WON THE BARLETT &

STEELE BRONZE AWARD.

OUR INTERACTIVE NEWS GAME WITH WNYC ON THE EXPERIENCES OF ASYLUM SEEKERS WAS A FINALIST FOR THE ONLINE JOURNALISM AWARD FOR EXCELLENCE

AND INNOVATION IN VISUAL DIGITAL STORYTELLING.

A COLLABORATION WITH THE TEXAS TRIBUNE ON FEDERAL LAND SEIZURES DURING

THE UNITED STATES' FIRST EFFORT TO BUILD A BORDER WALL WAS A FINALIST

FOR THE ONLINE NEWS ASSOCIATION'S UNIVERSITY OF FLORIDA AWARD FOR

INVESTIGATIVE DATA JOURNALISM.

"THE BELEAGUERED TENANTS OF KUSHNERVILLE" RECEIVED HONORABLE MENTION

FOR THE JOHN BARTLOW MARTIN AWARD FOR PUBLIC INTEREST MAGAZINE

JOURNALISM.

OUR STORY EXPOSING THAT THOUSANDS OF CRIMINAL CASES IN NEW YORK CITY

RELIED ON DISPUTED DNA TESTING TECHNIQUES, CO-PUBLISHED WITH THE NEW

YORK TIMES, WAS A FINALIST FOR THE AL NAKKULA AWARD FOR POLICE

REPORTING AND THE DEADLINE CLUB AWARD FOR LOCAL REPORTING.

OUR SERIES ON ALFORD PLEAS, A LITTLE-KNOWN DEAL THAT ALLOWS DEFENDANTS

TO MAINTAIN THEIR INNOCENCE WHILE AT THE SAME TIME PLEADING GUILTY, WAS

A FINALIST FOR THE TAYLOR FAMILY AWARD FOR FAIRNESS IN JOURNALISM AND Schedule O (Form 990 or 990-EZ) (2018) 832212 10-10-19

Name of the organization

PRO PUBLICA, INC.

IS A FINALIST FOR THE DEADLINE CLUB AWARD FOR PUBLIC SERVICE.

PROPUBLICA ILLINOIS WAS A FINALIST FOR THE PETER LISAGOR AWARD FOR BEST

START-UP.

"HOW CHICAGO GETS ITS GUNS," A PROPUBLICA ILLINOIS COLLABORATION WITH

THE CHICAGO SUN-TIMES AND WBEZ, WAS A FINALIST FOR THE PETER LISAGOR

AWARD FOR BEST MULTIMEDIA FEATURE PRESENTATION.

THE PROPUBLICA ILLINOIS POST "DOWNSTATE-OF-MIND: YOUR RESPONSES TO

DEFINING 'DOWNSTATE' ILLINOIS" WAS A FINALIST FOR THE PETER LISAGOR

AWARD FOR BEST INDIVIDUAL BLOG POST.

"STUCK KIDS," A PROPUBLICA ILLINOIS INVESTIGATION REVEALING THAT

HUNDREDS OF CHILDREN IN STATE CARE ARE HELD EACH YEAR IN PSYCHIATRIC

HOSPITALS FOR WEEKS OR MONTHS AT A TIME, WON THIRD PLACE IN THE

RUDERMAN FOUNDATION AWARDS FOR EXCELLENCE IN REPORTING ON DISABILITY.

PROPUBLICA SENIOR EDITOR CHARLES ORNSTEIN WAS A FINALIST FOR ROCK

HEALTH'S AWARD FOR DIGITAL HEALTH REPORTER OF THE YEAR.

PROPUBLICA ILLINOIS REPORTER MICK DUMKE WAS A FINALIST FOR THE CHICAGO

JOURNALIST ASSOCIATION'S DOROTHY STOCK AWARD.

RACHEL GLICKHOUSE, PARTNER MANAGER FOR PROPUBLICA'S DOCUMENTING HATE

PROJECT, WAS A FINALIST FOR THE LIVINGSTON AWARD FOR YOUNG JOURNALISTS.

OUR "LOST CAUSE" MAPS, SHOWING COUNTIES THAT SUPPORTED LOSING

PRESIDENTIAL CANDIDATES, WERE INCLUDED IN THE NORTH AMERICAN

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CARTOGRAPHIC INFORMATION SOCIETY'S ATLAS OF DESIGN.

OUR NEWS APPLICATIONS AND DATA VISUALIZATIONS WON 35 SOCIETY FOR NEWS DESIGN AWARDS OF EXCELLENCE FOR SITE REDESIGN, DESIGN TEAM PORTFOLIO, NEWS APPS PORTFOLIO, BREAKING NEWS, FEATURES, GRAPHICS, SOCIAL MEDIA GRAPHICS, AND THE INDIVIDUAL PORTFOLIOS OF DESIGN DIRECTOR DAVID SLEIGHT, EDITORIAL EXPERIENCE DESIGNER ROB WEYCHERT, AND SOCIAL VISUALS AND GRAPHICS PRODUCER LUCAS WALDRON. NEWS APPLICATIONS DEVELOPER LENA V. GROEGER WON THE INFORMATION IS BEAUTIFUL AWARD FOR IMPRESSIVE INDIVIDUAL PORTFOLIO, AND "BOMBS IN OUR BACKYARD" WON A TOKYO INTERNATIONAL FOTO AWARDS SILVER MEDAL.

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

PRO PUBLICA HAS ITS FORM 990 PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND HAS ESTABLISHED THE FOLLOWING REVIEW PROCESS TO ENSURE THAT THE INFORMATION REPORTED IS COMPLETE AND ACCURATE. WHEN THE FORM 990 HAS BEEN PREPARED, REVIEWED BY THE PRESIDENT AND VICE PRESIDENT OF FINANCE & ADMINISTRATION AND IS READY TO BE FILED WITH THE INTERNAL REVENUE SERVICE, IT'S SUBMITTED ELECTRONICALLY TO MEMBERS OF PRO PUBLICA'S GOVERNING BODY FOR ANY COMMENTS PRIOR TO ITS SUBMISSION. THE GOVERNING BODY IS PROVIDED WITH AT LEAST ONE WEEK TO REVIEW THE PREPARED FORM 990 AND PROVIDE THEIR COMMENTS. ANY COMMENTS ARE THEN GROUPED, SUMMARIZED AND PROVIDED TO THE AUDIT COMMITTEE FOR THEIR REVIEW. EACH ISSUE IS DOCUMENTED AND ADDRESSED UNTIL THE RETURN IS FINALIZED AND APPROVED FOR FILING.

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

PRO PUBLICA HAS A CONFLICT OF INTEREST POLICY, WHICH APPLIES TO ALL

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PRO PUBLICA, INC.	14-200/220	
DIRECTORS (BOARD MEMBERS), OFFICERS, AND EMPLOYEES. EACH DIRECTORS AND		
OFFICERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST DISCLOSURE STATEMENT		
ANNUALLY. AN INTERESTED PERSON MUST DISCLOSE AS SOON AS PRACTICABLE TO THE		
SECRETARY THE EXISTENCE OF A POTENTIAL CONFLICT OF INTEREST AND ALL		
MATERIAL FACTS RELATED TO THE CONFLICT. IF A DIRECTOR OR OFFICER IS		
UNCERTAIN ABOUT WHETHER A CONFLICT EXISTS, HE/SHE SHOULD REPORT THE		
POSSIBLE CONFLICT IN ALL CASES IN WHICH A CRITICAL EXTERNAL OBSERVER MIGHT		
REASONABLY PERCEIVE A CONFLICT TO EXIST. THE BOARD COMMITTEE WILL DETERMINE		
IF A CONFLICT OF INTEREST EXISTS. IN THE EVENT THAT A CONFLICT OF INTEREST		
ARISES, THE DIRECTOR OR OFFICER WITH WHOM THE CONFLICT PERTAINS TO IS		
EXCLUDED FROM VOTING ON THE ISSUE. HE/SHE WILL LEAVE THE ROOM AND THE OTHER		
DIRECTORS VOTE ON THE ISSUE PERTAINING TO THAT SPECIFIC TRANSACTION. WITH		
RESPECT TO ANY BOARD COMMITTEE'S DISCUSSION, DECISION, OR ACTIONS INVOLVING		
TRANSACTIONS IN WHICH A DIRECTOR OR OFFICER HAS A CONFLICT OF INTEREST, THE		
MINUTES OF THE BOARD COMMITTEE MEETING WILL REFLECT THE BOARD'S		
DELIBERATIONS AND VOTING PROCESS.		

IN CASE OF AN INTERESTED PARTY WHO IS NOT A DIRECTOR OR OFFICER, THE PRESIDENT MONITORS AND ENFORCES THE ORGANIZATION'S COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY. IF AN EMPLOYEE HAS A CONFLICT OF INTEREST, HE/SHE CANNOT PARTICIPATE IN THE DECISION MAKING OF THE CONFLICTED TRANSACTION.

FORM 990, PART VI, SECTION B, LINE 15: SALARIES FOR THE CEOS ARE SET BY THE BOARD. THE BOARD USES THE SERVICES OF A LAW FIRM (CAPLIN & DRYSDALE, WHO SPECIALIZE IN NOT FOR PROFIT ISSUES) FOR GUIDANCE ON ALL MATTERS OF COMPENSATION. IN 2017, CAPLIN & DRYSDALE UPDATED THE COMPENSATION STUDY FOR CEOS. CAPLIN & DRYSDALE STUDIES COMPENSATION OF 832212 10-10-18 Schedule O (Form 990 or 990-EZ) (2018)

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SELECT NATIONAL NEWSPAPERS AND RELIED ON THEIR UNDERSTANDING	NG OF
PROPUBLICA'S OPERATIONS AND STATUS IN THE FIELD OF JOURNAL	ISM. THE BOARD
ESTABLISHED COMPENSATION FOR THE CEOS USING COMPARABLE DATA	A AND DETERMINED
THAT THE SALARIES ARE REASONABLE. COMPARABLE DATA INCLUDES	VARIETY OF
INFORMATION FROM JOURNALISM OUTLETS AND OTHER NOT FOR PROF	IT ORGANIZATIONS.
APPROVED SALARY CHANGES ARE DOCUMENTED IN HUMAN RESOURCES	FILES AND REQUIRE
THE SIGNATURE OF BOTH THE EMPLOYEE AND THE HR DIRECTOR. TH	E BOARD'S
CONSIDERATION OF THIS MATTER ARE ALSO DOCUMENTED IN THE MIN	NUTES OF THE
EXECUTIVE SESSION. THIS PROCESS WAS LAST COMPLETED IN 2018	•

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: DC,AL,AK,AZ,AR,CA,CT,FL,GA,HI,IL,KS,KY,LA,ME,MD,MA,MI,MN,MS,MS,NH,NJ,NM,NY NC,ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI

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

THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION AS REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE. THE RETURN IS POSTED ON GUIDESTAR.ORG AND OTHER SIMILAR TYPES OF WEBSITES. IN ADDITION, THE FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, ARTICLES OF INCORPORATION, FORM 990, FORM 1023, AND BY-LAWS ARE ALSO AVAILABLE UPON WRITTEN REQUEST, AND ON THE ORGANIZATION'S WEBSITE (WWW.PROPUBLICA.ORG).

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
LOSS ON DISPOSAL OF ASSET	-11,098.
LOSS ON FOREIGN CURRENCY EXCHANGE	-48.
TOTAL TO FORM 990, PART XI, LINE 9	-11,146.
TOTAL TO FORM 350, FART XI, LINE 5	

FORM 990, PART XII, LINE 2C:

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PRO PUBLICA HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBI	LITY FOR THE
OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND FOR	THE
SELECTION OF AN INDEPENDENT ACCOUNTANT. THE PROCESS HAS NO	T CHANGED
FROM THE PRIOR YEAR.	
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