

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

Department of the Treasury  
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.  
Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**A For the 2016 calendar year, or tax year beginning and ending**

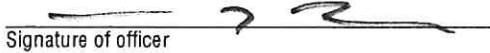
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization PRO PUBLICA, INC. Doing business as		<b>D</b> Employer identification number 14-2007220
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 155 AVE OF THE AMERICAS 13 FL	<b>E</b> Telephone number 212-514-5250	
	City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10013		<b>G</b> Gross receipts \$ 14,620,321.
	<b>F</b> Name and address of principal officer: RICHARD J. TOFEL SAME AS C ABOVE		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: ▶ WWW.PROPUBLICA.ORG			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L</b> Year of formation: 2007
			<b>M</b> State of legal domicile: DE

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <u>TO EXPOSE ABUSES OF POWER AND BETRAYALS OF THE PUBLIC TRUST - SEE "SCHEDULE O" FOR CONTINUATION</u>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	3	10
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	4	9
	<b>5</b> Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	75
	<b>6</b> Total number of volunteers (estimate if necessary)	6	10
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	7a	16,943.
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	7b	8,230.	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year 16,882,164.	Current Year 13,765,153.
	<b>9</b> Program service revenue (Part VIII, line 2g)	60,000.	340,000.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,919.	1,499.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	100,847.	438,869.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	17,046,930.	14,545,521.
	<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		9,360,011.	10,105,178.
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 578,537.			
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,101,138.	3,639,103.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	12,461,149.	13,766,881.	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	4,585,781.	778,640.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year 11,552,064.	End of Year 12,429,526.
	<b>21</b> Total liabilities (Part X, line 26)	285,437.	384,259.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	11,266,627.	12,045,267.

**Part II Signature Block**

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

<b>Sign Here</b>		Date 8/21/17
	RICHARD J. TOFEL, PRESIDENT Type or print name and title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name GARRETT M. HIGGINS	Preparer's signature GARRETT M. HIGGINS	Date 08/21/17	Check <input type="checkbox"/> if self-employed PTIN P00543209
	Firm's name ▶ PKF O'CONNOR DAVIES, LLP		Firm's EIN ▶ 27-1728945	
Firm's address ▶ 665 FIFTH AVENUE NEW YORK, NY 10022		Phone no. (212) 286-2600		

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: PRO PUBLICA IS AN INDEPENDENT, NON-PROFIT, PULITZER PRIZE-WINNING NEWSROOM THAT PRODUCES INVESTIGATIVE JOURNALISM IN THE PUBLIC INTEREST. OUR WORK FOCUSES EXCLUSIVELY ON TRULY IMPORTANT STORIES. SEE "SCHEDULE O" FOR CONTINUATION.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

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

4a (Code: ) (Expenses \$ 11,393,913. including grants of \$ 22,600. ) (Revenue \$ 413,555. ) INVESTIGATIVE JOURNALISM IN THE PUBLIC INTEREST - SEE SCHEDULE O FOR DETAILS

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 11,393,913.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? .....	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....		X
<b>5</b> 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? <i>If "Yes," complete Schedule C, Part III</i> .....		X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....		X
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	X	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII</i> .....		X
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i> .....		X
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX</i> .....		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....		X
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....		X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....		X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....		X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....		X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		X
<b>17</b> 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? <i>If "Yes," complete Schedule G, Part I</i> .....		X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....		X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....		X
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	X	
<b>23</b> 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? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> 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? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> 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 of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

**Note.** All Form 990 filers are required to complete Schedule O .....

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O check

Main table with columns for question numbers (1a-14b), Yes, and No. Includes rows for backup withholding, employee reporting, foreign accounts, and charitable contributions.

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
<b>1b</b>	Enter the number of voting members included in line 1a, above, who are independent		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	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?		X
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	X	
<b>8b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>10b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>11b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	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?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>15b</b>	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>16b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **SEE SCHEDULE O**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     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 policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **STEPHANIE N. LITTLE, DIRECTOR OF FINANCE & HUMAN RESOURCES - 212-514-525**  
**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, Trustees, Key Employees, and Highest Compensated Employees**

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) HERBERT M. SANDLER FOUNDING CHAIRMAN	3.00	X		X				0.	0.	0.
(2) PAUL E. STEIGER EXECUTIVE CHAIRMAN	30.00	X		X				198,560.	0.	13,253.
(3) MARK COLODNY DIRECTOR	1.00	X						0.	0.	0.
(4) HENRY LOUIS GATES, JR. DIRECTOR	1.00	X						0.	0.	0.
(5) CLAIRE HOFFMAN DIRECTOR	1.00	X						0.	0.	0.
(6) ROBERT C.S. MONKS DIRECTOR	1.00	X						0.	0.	0.
(7) RONALD OLSON DIRECTOR	1.00	X						0.	0.	0.
(8) PAUL SAGAN DIRECTOR	1.00	X						0.	0.	0.
(9) S. DONALD SUSSMAN DIRECTOR	1.00	X						0.	0.	0.
(10) KAT TAYLOR DIRECTOR	1.00	X						0.	0.	0.
(11) TOM UNTERMAN DIRECTOR THUR 12/6/16	1.00	X						0.	0.	0.
(12) RICHARD TOFEL PRESIDENT AND CO-EXECUTIVE	40.00			X				385,630.	0.	33,747.
(13) STEPHEN ENGELBERG EDITOR-IN-CHIEF & CO-EXECU	40.00			X				378,061.	0.	60,315.
(14) RAGAN RHYNE VICE PRESIDENT, DEVELOPMENT	40.00				X			200,963.	0.	10,804.
(15) ROBIN FIELDS MANAGING EDITOR	40.00					X		249,465.	0.	18,538.
(16) JEFFREY GERTH SENIOR REPORTER THUR 12/31/16	40.00					X		228,876.	0.	9,794.
(17) TRACY WEBER SENIOR EDITOR	40.00					X		208,845.	0.	30,748.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JOSEPH SEXTON SENIOR EDITOR	40.00					X		207,418.	0.	33,644.
(19) CHARLES ORNSTEIN SENIOR REPORTER	40.00					X		200,436.	0.	46,435.
<b>1b Sub-total</b>								2,258,254.	0.	257,278.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								2,258,254.	0.	257,278.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **37**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
DAVIS WRIGHT TREMAINE LLP, 1201 THIRD AVE, SUITE 2200, SEATTLE, WA 98101	LEGAL SERVICES	144,440.

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



**Part VIII Statement of Revenue**

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

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b>	13,765,153.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ .....		154,188.				
	<b>h Total.</b> Add lines 1a-1f .....			13,765,153.			
<b>Program Service Revenue</b>	<b>2 a</b> PROGRAM SERVICE FEES .....	<b>Business Code</b>	519130	340,000.	340,000.		
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> .....						
	<b>e</b> .....						
	<b>f</b> All other program service revenue .....						
	<b>g Total.</b> Add lines 2a-2f .....			340,000.			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....			2,208.			2,208.
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....			176,712.	73,555.		103,157.
	<b>6 a</b> Gross rents .....	(i) Real	(ii) Personal				
		<b>b</b> Less: rental expenses .....					
		<b>c</b> Rental income or (loss) .....					
		<b>d</b> Net rental income or (loss) .....					
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	(i) Securities	(ii) Other				
		74,091.					
		<b>b</b> Less: cost or other basis and sales expenses .....					
		74,800.					
	<b>c</b> Gain or (loss) .....						
	<b>d</b> Net gain or (loss) .....				-709.		-709.
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b>					
		<b>b</b> Less: direct expenses .....	<b>b</b>				
<b>c</b> Net income or (loss) from fundraising events .....							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>a</b>						
	<b>b</b> Less: direct expenses .....	<b>b</b>					
	<b>c</b> Net income or (loss) from gaming activities .....						
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>a</b>						
	<b>b</b> Less: cost of goods sold .....	<b>b</b>					
	<b>c</b> Net income or (loss) from sales of inventory .....						
Miscellaneous Revenue			<b>Business Code</b>				
<b>11 a</b> REIMBURSEMENTS OF LEGAL SETTLEMEN		900099	218,464.			218,464.	
<b>b</b> HONORARIUMS REVENUE		900099	26,750.			26,750.	
<b>c</b> ADVERTISING REVENUE		541800	16,943.		16,943.		
<b>d</b> All other revenue .....							
<b>e Total.</b> Add lines 11a-11d .....			262,157.				
<b>12 Total revenue.</b> See instructions. ....			14,545,521.	413,555.	16,943.	349,870.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	22,600.	22,600.		
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	1,281,333.	650,189.	419,377.	211,767.
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	7,173,056.	6,363,367.	681,842.	127,847.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	278,732.	253,510.	24,359.	863.
9 Other employee benefits	809,978.	697,529.	84,056.	28,393.
10 Payroll taxes	562,079.	492,736.	61,344.	7,999.
11 Fees for services (non-employees):				
a Management				
b Legal	260,417.	26,664.	219,893.	13,860.
c Accounting	31,843.	24,520.	4,258.	3,065.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	333,128.	331,109.	1,550.	469.
12 Advertising and promotion	43,019.		43,019.	
13 Office expenses	227,410.	121,933.	20,226.	85,251.
14 Information technology	468,128.	366,467.	56,320.	45,341.
15 Royalties				
16 Occupancy	1,202,163.	1,063,952.	118,099.	20,112.
17 Travel	562,941.	527,407.	12,557.	22,977.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	65,305.	51,578.	8,136.	5,591.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	146,077.	134,339.	11,738.	
23 Insurance	12,782.	11,104.	1,678.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PUBLIC REC. COP. & SUBS	177,792.	159,417.	13,373.	5,002.
b REPAIRS AND MAINTENANCE	62,266.	55,120.	7,146.	
c RECRUITMENT & PROF DEVE	42,332.	40,372.	1,960.	
d UBIT TAX EXPENSE	3,500.		3,500.	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	13,766,881.	11,393,913.	1,794,431.	578,537.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

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

		(A)		(B)	
		Beginning of year		End of year	
Assets	<b>1</b> Cash - non-interest-bearing .....	1,733,727.	<b>1</b>	1,859,303.	
	<b>2</b> Savings and temporary cash investments .....	3,408,243.	<b>2</b>	6,437,096.	
	<b>3</b> Pledges and grants receivable, net .....	5,821,936.	<b>3</b>	3,532,817.	
	<b>4</b> Accounts receivable, net .....	1,108.	<b>4</b>	3,167.	
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>		
	<b>6</b> Loans and other receivables from other disqualified 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 .....		<b>6</b>		
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>		
	<b>8</b> Inventories for sale or use .....		<b>8</b>		
	<b>9</b> Prepaid expenses and deferred charges .....	171,397.	<b>9</b>	123,519.	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 2,212,883.			
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 1,824,402.	408,871.	<b>10c</b>	388,481.
	<b>11</b> Investments - publicly traded securities .....	2,522.	<b>11</b>	80,883.	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>		
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>		
	<b>14</b> Intangible assets .....		<b>14</b>		
	<b>15</b> Other assets. See Part IV, line 11 .....	4,260.	<b>15</b>	4,260.	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	11,552,064.	<b>16</b>	12,429,526.		
Liabilities	<b>17</b> Accounts payable and accrued expenses .....	136,734.	<b>17</b>	110,074.	
	<b>18</b> Grants payable .....		<b>18</b>		
	<b>19</b> Deferred revenue .....	148,703.	<b>19</b>	274,185.	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>		
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>		
	<b>22</b> 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 .....		<b>22</b>		
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>		
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>		
	<b>25</b> 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 .....		<b>25</b>		
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	285,437.	<b>26</b>	384,259.	
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>				
	<b>27</b> Unrestricted net assets .....	2,792,399.	<b>27</b>	6,555,625.	
	<b>28</b> Temporarily restricted net assets .....	8,474,228.	<b>28</b>	5,489,642.	
	<b>29</b> Permanently restricted net assets .....		<b>29</b>		
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>				
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>		
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>		
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>		
<b>33</b> Total net assets or fund balances .....	11,266,627.	<b>33</b>	12,045,267.		
<b>34</b> Total liabilities and net assets/fund balances .....	11,552,064.	<b>34</b>	12,429,526.		

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	14,545,521.
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,766,881.
3	Revenue less expenses. Subtract line 2 from line 1	3	778,640.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11,266,627.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	12,045,267.

**Part XII Financial Statements and Reporting**

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____		

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**2016**

Open to Public  
Inspection

Name of the organization **PRO PUBLICA, INC.** Employer identification number **14-2007220**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	10,920,019.	13,678,241.	10,169,976.	16,882,164.	13,765,153.	65,415,553.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...						
<b>4 Total.</b> Add lines 1 through 3 .....	10,920,019.	13,678,241.	10,169,976.	16,882,164.	13,765,153.	65,415,553.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						22,156,664.
<b>6 Public support.</b> Subtract line 5 from line 4.						43,258,889.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>7</b> Amounts from line 4 .....	10,920,019.	13,678,241.	10,169,976.	16,882,164.	13,765,153.	65,415,553.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	17,146.	51,381.	47,898.	23,875.	105,365.	245,665.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on ...	8,465.	11,842.	12,775.	10,286.	8,230.	51,598.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	2,927.	10,100.	23,379.	10,092.	245,214.	291,712.
<b>11 Total support.</b> Add lines 7 through 10						66,004,528.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	585,055.
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	65.54 %
<b>15</b> Public support percentage from 2015 Schedule A, Part II, line 14 .....	<b>15</b>	58.45 %
<b>16a 33 1/3% support test - 2016.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2015.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2016.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2015.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

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

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2015 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2015 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**b 33 1/3% support tests - 2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

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

**Part IV Supporting Organizations**

(Complete only if you checked a box 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**

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



**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> 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 organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<b>2</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>3</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.		
<b>a</b> 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 <b>Part VI</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
<b>b</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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> 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 <b>Part VI</b> .		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.		

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

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

<b>Section A - Adjusted Net Income</b>		(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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
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	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>			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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions	
<b>7 Total annual distributions.</b> Add lines 1 through 6	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions	
<b>9</b> Distributable amount for 2016 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

<b>Section E - Distribution Allocations (see instructions)</b>	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2016</b>	<b>(iii) Distributable Amount for 2016</b>
<b>1</b> Distributable amount for 2016 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
<b>3</b> Excess distributions carryover, if any, to 2016:			
<b>a</b>			
<b>b</b>			
<b>c</b> From 2013			
<b>d</b> From 2014			
<b>e</b> From 2015			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2016 distributable amount			
<b>i</b> Carryover from 2011 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2016 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2016 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4			
<b>5</b> Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
<b>6</b> Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
<b>7 Excess distributions carryover to 2017.</b> Add lines 3j and 4c			
<b>8</b> Breakdown of line 7:			
<b>a</b>			
<b>b</b> Excess from 2013			
<b>c</b> Excess from 2014			
<b>d</b> Excess from 2015			
<b>e</b> Excess from 2016			

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

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

**HONORARIUMS REVENUE**

2012 AMOUNT: \$ 2,827.

2013 AMOUNT: \$ 10,100.

2014 AMOUNT: \$ 23,379.

2015 AMOUNT: \$ 10,092.

2016 AMOUNT: \$ 26,750.

**OTHER REVENUE**

2012 AMOUNT: \$ 100.

**REIMBURSEMENTS OF LEGAL DEFENSE EXPENSES**

2016 AMOUNT: \$ 218,464.

**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Name of the organization

PRO PUBLICA, INC.

Employer identification number

14-2007220

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

**General Rule**

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

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 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, 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. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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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
1	3PRINCESSES FUND C/O SCHWAB CHARITABLE 211 MAIN STREET SAN FRANCISCO, CA 94105	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	ABRAMS FOUNDATION 222 BERKELEY STREET, 21ST FLOOR BOSTON, MA 02116	\$ 105,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	ALEXANDRA SIMONE GEORGE MEMORIAL FUND/CALIFORNIA COMMUNITY FOUNDATION 221 S. FIGUEROA STREET, SUITE 400 LOS ANGELES, CA 90012	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	ALFRED P. SLOAN FOUNDATION 630 FIFTH AVENUE, SUITE 2200 NEW YORK, NY 10111	\$ 125,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	ALG FAMILY FOUNDATION C/O PEYSER & ALEXANDER MANAGEMENT, INC., 500 FIFTH AVENUE, SUITE 2700 NEW YORK, NY 10110	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	AMY RAO 228 SEALE AVENUE PALO ALTO, CA 94301	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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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
7	ANCHOR POINT GIFT FUND C/O THE COMMUNITY FOUNDATION SERVING BOULDER COUNTY, 1123 SPRUCE STREET  BOULDER, CO 80302	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	ANDREA DEAN  3929 HUNTINGTON ST., NW  WASHINGTON, DC 20015	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	ANDREW TORGOVE  PO BOX 231  NEW SUFFOLK, NY 11956	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	ANN BLINKHORN  23 GRANT AVENUE  OLD GREENWICH, CT 06870-2227	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	ANONYMOUS C/O JP MORGAN CHASE BANK, NA., ONE CHASE TOWER, 8TH FLOOR  CHICAGO, IL 60670-0884	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	ANONYMOUS C/O FIDELITY CHARITABLE  P.O. BOX 770001  CINCINNATI, OH 45277	\$ 245,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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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
13	ANONYMOUS C/O FOUNDATION SOURCE 55 WALLS DRIVE FAIRFIELD, CT 06824-5163	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	ANONYMOUS C/O JEWISH COMMUNAL FUND 575 MADISON AVENUE, SUITE 703 NEW YORK, NY 10022	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	ANONYMOUS C/O NORTHERN TRUST COMPANY 50 SOUTH LA SALLE STREET CHICAGO, IL 60603	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	ANONYMOUS C/O VANGUARD CHARITABLE P.O. BOX 9509 WARWICK, RI 02889-9509	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	ANONYMOUS FOUNDATION C/O NUTTER, MCCLENNEN & FISH, 155 SEAPORT BOULEVARD BOSTON, MA 02210	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18	ANONYMOUS 155 AVE OF THE AMERICAS, 13FL NEW YORK, NY 10013	\$ 5,031.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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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
19	BARBETTA FAMILY FOUNDATION 4201 WILSON BOULEVARD ARLINGTON, VA 22203	\$ 10,050.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	BEN AND KAREN SHERWOOD 15260 VENTURA BOULEVARD #1040 SHERMAN OAKS, CA 91403	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	BENJAMIN AND ALICE GOLDMAN REITER C/O SCHWAB CHARITABLE 211 MAIN STREET SAN FRANCISCO, CA 94105	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22	BENJAMIN METCALF 3440 KOSO STREET DAVIS, CA 95618	\$ 11,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23	BERNSTEIN LITOWITZ BERGER & GROSSMANN LLP 1251 AVENUE OF THE AMERICAS NEW YORK, NY 10020	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	BETTY MILLARD FOUNDATION 360 WEST 22ND STREET NEW YORK, NY 10011	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	BOWLINE FUND 2017 FAIRVIEW AVENUE E SEATTLE, WA 98103	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	BRIAN M. MCINERNEY 304 COUNTY ROAD 438 ROCHEPORT, MO 65279	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	BRIGHT HORIZON FUND C/O FIDELITY CHARITABLE P. O. BOX 770001 CINCINNATI, OH 45277	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
28	BRUCE AND MARILYN WALLACE FOUNDATION C/O R. JOSEPH STANISLAWSKI, CPA, 5959 TOPANGA CANYON BOULEVARD, SUITE 350 WOODLAND HILLS, CA 91367	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
29	BRYAN R. LAWRENCE 410 PARK AVENUE NEW YORK, NY 10022	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30	CANTATE DOMINO FUND FIDELITY CHARITABLE, P.O. BOX 770001 CINCINNATI, OH 45277	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	CARNEGIE CORPORATION 437 MADISON AVENUE, 26TH FLOOR NEW YORK, NY 10022	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
32	CAROL BAKER AND MARK STEIN 306 BRENTFORD ROAD HAVERFORD, PA 19041	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
33	CAROLYN S. BUCKSBAUM REVOCABLE TRUST 180 NORTH WACKER DRIVE, SUITE 001 CHICAGO, IL 60606	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
34	CEDOMIR CRNKOVIC 327 CENTRAL PARK WEST NEW YORK, NY 10025	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
35	CENGAGE LEARNING 20 CHANNEL CTR ST. BOSTON, MA 02210-3402	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
36	CHARLES H. REVSON FOUNDATION 55 EAST 59TH STREET, 23RD FLOOR NEW YORK, NY 10022	\$ 240,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	CHRIS FRALEY PO BOX 31989 SEATTLE, WA 98103	\$ 10,919.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
38	CHRISTOPHER AND MICHELLE DELONG 450 PARK AVENUE NEW YORK, NY 10022	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
39	CONDE NAST ONE WORLD TRADE CENTER NEW YORK, NY 10007	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
40	CORNELIA FOUNDATION C/O ALTMAN, GREENFIELD & SELVAGGI, LLP, 200 PARK AVENUE SOUTH, 8TH FLOOR NEW YORK, NY 10003	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
41	COXE FUND C/O SILICON VALLEY COMMUNITY FDN 2440 W EL CAMINO REAL #300 MOUNTAIN VIEW, CA 94040	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
42	CRAIG NEWMARK FUND C/O BANK OF AMERICA CHARITABLE GIFT FUND 225 FRANKLIN STREET, 4TH FLOOR BOSTON, MA 02110	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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43	CRAIGSLIST CHARITABLE FUND 222 SUTTER STREET, 9TH FLOOR SAN FRANCISCO, CA 94108	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
44	CRANKSTART FOUNDATION 2626 VALLEJO STREET SAN FRANCISCO, CA 94123	\$ 120,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
45	CYNTHIA GEERDES 26040 ELENA RD LOS ALTOS HILLS, CA 94022	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
46	CYRUS HIGHSMITH 27 COLONIAL RD PROVIDENCE, RI 02906	\$ 8,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
47	DALE TAYLOR 2314 N LINCOLN PARK WEST CHICAGO, IL 60614	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
48	DAVID AND PAIGE MORSE 2015 PARK STREET HOUSTON, TX 77019	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	DAVID ZUCKERMAN FAMILY TRUST GIFT FUND C/O FIDELITY CHARITABLE  P.O. BOX 770001  CINCINNATI, OH 45277	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
50	DEBORAH SIMON  950 LAURELWOOD  CARMEL, IN 46032-8738	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
51	DHANAM FOUNDATION C/O CTC MYCFO LLC, P.O. BOX 10195 - DEPT. 480  PALO ALTO, CA 94303	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
52	DIANA STARK  1325 HOWARD AVENUE  BURLINGAME, CA 94010	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
53	DIANE HALLMAN  644 17TH STREET  BROOKLYN, NY 11218	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
54	DIVERS FAMILY FOUNDATION FUND THE PITTSBURGH FOUNDATION, FIVE PPG PLACE, SUTIE 250  PITTSBURGH, PA 15222-5414	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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55	DROR AND MELISSA BAR-ZIV 1 MARKET STREET, STEUART TOWER SAN FRANCISCO, CA 94105	\$ 13,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
56	DYSON FOUNDATION 25 HALCYON RD. MILLBROOK, NY 12545-6137	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
57	EAGLE POINT DONOR FUND C/O MAINE COMMUNITY FOUNDATION 245 MAINE STREET ELLSWORTH, ME 04605	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
58	EDWARD FENSTER CHARITABLE FUND C/O FIDELITY CHARITABLE, P.O. BOX 770001 CINCINNATI, OH 45277	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
59	EDWARDS FAMILY FUND C/O SILICON VALLEY COMMUNITY FDN 2440 W EL CAMINO REAL #300 MOUNTAIN VIEW, CA 94040	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
60	ELBAZ FAMILY FOUNDATION 9663 SANTA MONICA BLVD LOS ANGELES, CA 90210-4303	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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61	ELIZABETH BOARDMAN WELLS 2103 HARRISON AVENUE NW 2 OLYPMIA, WA 98502	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
62	ELIZABETH LIEBMAN 910 N. LAKESHORE DRIVE CHICAGO, IL 60611	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
63	EMERSON COLLECTIVE C/O SILICON VALLEY COMMUNITY FDN 2440 WEST EL CAMINO REAL, SUITE 300 MOUNTAIN VIEW, CA 94040-1498	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
64	EMILY & GREGORY WALDORF FAMILY FUND C/O SILICON VALLEY COMMUNITY FDN 2440 WEST EL CAMNO REAL, SUITE 300 MOUNTAIN VIEW, CA 94040-1498	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
65	EMILY KAISER AND GENE BULMASH TULSA COMMUNITY FOUNDATION, 7030 SOUTH YALE AVENUE, SUITE 600 TULSA, OK 74136	\$ 90,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
66	FAITH COLEMAN 180 W 58TH STREET NEW YORK, NY 10019	\$ 5,212.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)



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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
67	FOUNDATION TO PROMOTE OPEN SOCIETY 400 WEST 59TH STREET NEW YORK, NY 10019	\$ 65,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
68	GEORGE KAISER FAMILY FOUNDATION 7030 SOUTH YALE AVENUE, SUITE 600 TULSA, OK 74136	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
69	GERALDINE R. DODGE FOUNDATION 14 MAPLE AVENUE, SUITE 400 MORRISTOWN, NJ 07960	\$ 100,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
70	GILBERT FUND C/O THE BOSTON FOUNDATION 75 ARLINGTON STREET BOSTON, MA 02116	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
71	GLOBAL VILLAGE CHARITABLE TRUST NORTHERN TRUST, 600 BRICKELL AVENUE, SUITE 2400 MIAMI, FL 33131	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
72	HARRIS GILBERT CHARLES SCHWAB, 211 MAIN STREET SAN FRANCISCO, CA 94105	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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73	HENRY L. KIMELMAN FAMILY FOUNDATION 55 WALLS DRIVE FAIRFIELDS, CT 06824	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
74	HENRY LOUIS GATES, JR. 104 MOUNT AUBURN STREET CAMBRIDGE, MA 02138	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
75	HOLLY GRAY 25 RIVER DRIVE NORWALK, CT 06855-2518	\$ 5,437.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
76	HOLZER FAMILY FOUNDATION 23 NORTH SADDLE BROOKE DRIVE HO HO KUS, NJ 07423	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
77	HUGH ROBINSON 253 NORTH COLUMBIA AVE BEXLEY, OH 43209	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
78	INMAAT FOUNDATION C/O FULTON VITTORIA LLP, 1 ROCKEFELLER PLAZA, 3RD FLOOR NEW YORK, NY 10020	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
79	JACK DORSEY 1455 MARKET SAN FRANCISCO, CA 94103	\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
80	JAMES DODD 1801 FULTON STREET PALO ALTO, CA 94303-2945	\$ 20,111.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
81	JAMES FOUNDATION INC. P.O. BOX 456 HADDONFIELD, NJ 08033	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
82	JOAN AND IRWIN JACOBS FUND OF THE JEWISH COMMUNITY FOUNDATION 4950 MURPHY CANYON ROAD SAN DIEGO, CA 92123	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
83	JOANNA STONE HERMAN AND LAURENCE R. HERMAN 150 E 77TH STREET NEW YORK, NY 10075-1927	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
84	JOE AND RIKA MANSUETO FOUNDATION 22 WEST WASHINGTON STREET CHICAGO, IL 60602	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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85	JOHN AND MICHELLE BROOKS 1 GRACE CT BROOKLYN, NY 11201	\$ 5,183.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
86	JOHN BACKES AND ROBIN ROBERTS FUND SCHWAB CHARITABLE FUND VEHICLE, 211 MAIN STREET SAN FRANCISCO, CA 94105	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
87	JOHN S. AND JAMES L. KNIGHT FOUNDATION 200 SOUTH BISCAYNE BLVD., SUITE 3300 MIAMI, FL 33131-2349	\$ 11,934.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
88	JOSEPH KELLNER 2436B CALIFORNIA ST. BERKELEY, CA 94703	\$ 10,177.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
89	JQW FUND THE NEW YORK COMMUNITY TRUST, 909 3RD AVENUE NEW YORK, NY 10022	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
90	KASPICK/TERMOHLEN FAMILY FUND SILICON VALLEY COMMUNITY FOUNDATION, 2440 W EL CAMINO REAL #300 MOUNTAIN VIEW, CA 94040	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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91	KATHLEEN P. O'BRIEN AND JAMES R. O'BRIEN 72 PARK SLOPE RIDGEWOOD, NJ 07450	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
92	KRELL FAMILY FOUNDATION 1 CENTRAL PARK WEST NEW YORK, NY 10023	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
93	KUTNICK FOUNDATION U.S. TRUST BANK OF AMERICA, 1300 AMERICAN BOULEVARD, MSC 0303 PENNINGTON, NJ 08534-4127	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
94	LEAR FAMILY FOUNDATION 100 N. CRESCENT DRIVE BEVERLY HILLS, CA 90210	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
95	LEON LEVY FOUNDATION ONE ROCKEFELLER PLAZA NEW YORK, NY 10020	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
96	LORENA RUSSELL AND KATHRYN HANCOCK 525 BEAVERDAM ROAD ASHEVILLE, NC 28804	\$ 7,486.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

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97	LORI E. LESSER 425 LEXINGTON AVENUE NEW YORK, NY 10017	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
98	MANN NELSON FUND C/O VANGUARD CHARITABLE P.O. BOX 9509 WARWICK, RI 02889-9509	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
99	MARILYN LIPMAN 21 OLD BELLE MONTE ROAD CHESTERFIELD, MO 63107	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
100	MARISLA FOUNDATION 668 NORTH COAST HIGHWAY LAGUNA BEACH, CA 92651	\$ 400,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
101	MARK COLODNY GIVING FUND C/O FIDELITY CHARITABLE P.O. BOX 770001 CINCINNATI, OH 45277	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
102	MARTY AND DOROTHY SILVERMAN FOUNDATION 130 EAST 59TH STREET NEW YORK, NY 10022	\$ 14,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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103	MARY BLODGETT 1490 VIRGINIA ROAD SAN MARINO, CA 91108	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
104	MARY MILLER C/O FIDELITY CHARITABLE P.O. BOX 770001 CINCINNATI, OH 45277	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
105	MILLICENT AND EUGENE BELL FOUNDATION 155 SEAPORT BOULEVARD BOSTON, MA 02210-2604	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
106	NAIDA S. WHARTON FOUNDATION 131 SOUTH WOODLAND STREET ENGELWOOD, NJ 07631	\$ 6,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
107	NUSSBACHER FAMILY FUND C/O FIDELITY CHARITABLE P.O. BOX 770001 CINCINNATI, OH 45277	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
108	PALITZ CHARITABLE LEAD TRUST 4520 N. DROMEDARY ROAD PHEONIX, AZ 85018-2938	\$ 5,087.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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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
109	PARK FOUNDATION 140 SENECA WAY, SUITE 100 ITHACA, NY 14850	\$ 125,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
110	PAUL AND ANN SAGAN C/O FIDELITY CHARITABLE P.O. BOX 770001 CINCINNATI, OH 45277	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
111	PAUL ASENTE AND RON JENKS 2538 BREWSTER AVENUE REDWOOD CITY, CA 94062	\$ 5,269.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
112	PHILIP R. JONSSON FOUNDATION P.O. BOX 251304 LITTLE ROCK, AR 72225	\$ 18,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
113	PINION STREET FOUNDATION C/O JEWISH COMMUNITY FEDERATION 121 STEUART STREET SAN FRANCISCO, CA 94105	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
114	RATHMANN FAMILY FOUNDATION P.O. BOX 352 ARNOLD, MD 21012-0352	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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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
115	RENEE B. FISHER FOUNDATION C/O SILICON VALLEY COMMUNITY FOUNDATION 2440 W EL CAMINO REAL #300 MOUNTAIN VIEW, CA 94040	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
116	RICHARD RAVITCH FOUNDATION 1115 FIFTH AVENUE NEW YORK, NY 10128	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
117	RITA ALLEN FOUNDATION 92 NASSAU STREET, THIRD FLOOR PRINCETON, NJ 08542	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
118	ROBERT STERLING CLARK FOUNDATION 135 EAST 64TH STREET NEW YORK, NY 10065	\$ 32,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
119	ROBERT WOOD JOHNSON FOUNDATION P.O. BOX 2316 PRINCETON, NJ 08543-2316	\$ 764,995.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
120	ROCKER FAMILY FOUNDATION/JEWISH COMMUNITY FOUNDATION OF GREATER METROW 901 ROUTE 10 , P.O. BOX 929 WHIPPANY, NJ 07981	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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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
121	RONALD AND JANE OLSON / D.A. DAVIDSON 350 SOUTH GRAND AVENUE, 50TH FLOOR LOS ANGELES, CA 90071	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
122	RUSSELL KIRK 1260 HAWTHORNE STREET ALAMEDA, CA 94501	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
123	SAMUEL LIEBER AND MARY RUBIN 2 BEACH AVENUE LARCHMONT, NY 10538-4005	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
124	SANDPIPER FUND, INC. 640 PELHAM ROAD NEW ROCHELLE, NY 10805	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
125	SARAH AND REED PHILLIPS III 475 PARK AVENUE SOUTH NEW YORK, NY 10016	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
126	SARNAT-HOFFMAN FAMILY FOUNDATION FUND C/O JEWISH COMMUNITY FEDERATION 121 STEUART STREET SAN FRANCISCO, CA 94105	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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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
127	SCOTT BURNS 1299 OCEAN AVENUE SANTA MONICA, CA 90401	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
128	SELECT EQUITY GROUP, INC. 380 LAFAYETTE STREET NEW YORK, NY 10003	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
129	SHAPIRO FAMILY FOUNDATION 5610 WISCONSIN AVENUE CHEVY CHASE, MD 20815-4434	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
130	SKOLL GLOBAL THREATS FUND 1808 WEDEMEYER STREET, SUITE 300 SAN FRANCISCO, CA 94129	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
131	SPROCKET FOUNDATION PO BOX 70 FRENCHTOWN, NJ 08825	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
132	STEPHANIE HERNSTADT 419 N. LARCHMONT BLVD LOS ANGELES, CA 90004	\$ 45,323.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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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
133	SURVEYMONKEY 101 LYTTON AVENUE PALO ALTO, CA 94301	\$ 9,590.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
134	SUSAN S. & KENNETH L. WALLACH FOUNDATION THREE MANHATTANVILLE ROAD PURCHASE, NY 10577	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
135	SUSAN TEMPLETON 673 WILDER STREET S SAINT PAUL, MN 55116-1232	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
136	SUTTON FAMILY CHARITABLE FUND C/O VANGUARD CHARITABLE P.O. BOX 9509 WARWICK, RI 02889	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
137	THE DAVID B. GOLD FOUNDATION 44 MONTGOMERY STREET, SUITE 3750 SAN FRANCISCO, CA 94104	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
138	THE GOLDBIRSH FOUNDATION, INC 6380 WILSHIRE BOULEVARD LOS ANGELES, CA 90048	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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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
139	THE JEANNIE BLAUSTEIN AND PETER BOKOR FUND/ JEWISH COMMUNAL FUND  575 MADISON AVENUE, SUITE 703  NEW YORK, NY 10022	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
140	THE KOHLBERG FOUNDATION  111 RADIO CIRCLE  MT KISCO, NY 10549	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
141	THE KOIVU FUND C/O VANGUARD  P.O. BOX 55766  BOSTON, MA 02205	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
142	THE LU FOUNDATION  820 S. MONACO PARKWAY  DENVER, CO 80224	\$ 8,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
143	THE MARC HAAS FOUNDATION  135 WEST 50TH ST.  NEW YORK, NY 10020	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
144	THE NARARO FOUNDATION 30TH STREET TRAIN STATION, P.O. BOX 38613  PHILADELPHIA, PA 19104	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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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
145	THE PETER AND CARMEN LUCIA BUCK FOUNDATION  633 THIRD AVENUE, 16TH FLOOR  NEW YORK, NY 10017	\$ 125,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
146	THE RICHARD & JOANNE STULTZ FAMILY FUND C/O VANGUARD CHARITABLE  P.O. BOX 9509  WARWICK, RI 02889-9509	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
147	THE RICHARD H. DRIEHAUS FOUNDATION  737 NORTH MICHIGAN AVENUE, SUITE 2000  CHICAGO, IL 60611	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
148	THE S. DECKER AND SHERRON ANSTROM FAMILY FOUNDATION THE NATIONAL PHILANTHROPIC TRUST, 165 TOWNSHIP LINE ROAD, SUITE 1200  JENKINTOWN, PA 19046	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
149	THE SANDLER FOUNDATION  121 STEUART STREET  SAN FRANCISCO, CA 94105	\$ 3,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
150	THE SELZ FOUNDATION  1370 AVENUE OF THE AMERICAS  NEW YORK, NY 10019	\$ 73,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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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
151	THE SHAYNE FOUNDATION 3201 FERNWOOD AVENUE LOS ANGELES, CA 90039	\$ 21,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
152	THE VERMONT COMMUNITY FOUNDATION 3 COURT STREET, PO BOX 30 MIDDLEBURY, VT 05753	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
153	THE WARBURG PINCUS FOUNDATION 450 LEXINGTON AVENUE NEW YORK, NY 10017	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
154	THE WITTRUP AND RHODES FAMILY CHARITABLE FUND/ VANGUARD CHARITABLE P.O. BOX 9509 WARWICK, RI 02889-9509	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
155	THEODORE CROSS FAMILY CHARITABLE FOUNDATION C/O CROSS ASSOCIATES, LLC, 100 MERRICK ROAD ROCKVILLE CENTER, NY 11570	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
156	THOMAS AND JANET UNTERMAN 100 WILSHIRE BLVD SANTA MONICA, CA 90401	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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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
157	TIDES FOUNDATION THE PRESIDIO, P.O. BOX 29903 SAN FRANCISCO, CA 94129-0903	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
158	TOMKAT FUND C/O SAN FRANCISCO FDN ONE EMBARCADERO CENTER, SUITE 1400 SAN FRANCISCO, CA 94111	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
159	WALTER MOSSBERG 10804 DEBORAH DR. POTOMAC, MD 20854	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
160	WATERSTON FAMILY FOUNDATION, INC. C/O ZEIDERMAN MANAGEMENT CORPORATION, 170 AVERY ROAD GARRISON, NY 10524	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
161	WENDY AND NEIL SANDLER C/O LAKE ROAD FOUNDATION 839 ORIENTA AVENUE MAMARONECK, NY 10543	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
162	WILLIAM K. BOWES, JR. FOUNDATION 1660 BUSH STREET SAN FRANCISCO, CA 94109	\$ 1,509,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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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
163	ZANKEL CHARITABLE LEAD TRUST  333 GRANT AVENUE  SAN FRANCISCO, CA 94108	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>PRO PUBLICA, INC.</b>	Employer identification number <b>14-2007220</b>
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**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
18	97 SHARES OF NIKE STOCK	\$ 5,031.	12/21/16
37	150 SHARES OF ISHARES US REAL ESTATE INDEX FUND (IYR) STOCK	\$ 10,919.	11/07/16
66	160 SHARES OF PFE STOCK	\$ 5,212.	12/30/16
75	100 SHARES OF EVERSOURCE ENERGY (ES) STOCK	\$ 5,437.	12/14/16
80	174 SHARES OF VTI STOCK	\$ 20,111.	12/30/16
85	113 SHARES OF SANMINA CORP (SANM) STOCK AND 51 SHARES OF SEMTECH CORP (SMTC) STOCK	\$ 5,183.	11/28/16

Name of organization  <b>PRO PUBLICA, INC.</b>	Employer identification number  <b>14-2007220</b>
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**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
88	284 SHARES OF VWO STOCK _____ _____ _____	\$ 10,177.	11/30/16
96	628 SHARES OF BLACKROCK STOCK _____ _____ _____	\$ 7,486.	12/28/16
111	50 SHARES OF ADBE STOCK _____ _____ _____	\$ 5,269.	12/20/16
132	1260 SHARES OF NVO STOCK _____ _____ _____	\$ 45,323.	12/30/16
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization  <b>PRO PUBLICA, INC.</b>	Employer identification number  <b>14-2007220</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization: PRO PUBLICA, INC. Employer identification number: 14-2007220

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Form with multiple questions (1-9) regarding conservation easements, including checkboxes for various purposes, a table for tracking easements at the end of the tax year, and questions about monitoring and expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form with questions (1a, 1b, 2) regarding reporting of art and historical treasures, including revenue and asset amounts.

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment  \_\_\_\_\_ %
- b Permanent endowment  \_\_\_\_\_ %
- c Temporarily restricted endowment  \_\_\_\_\_ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		140,403.	29,808.	110,595.
d Equipment		840,562.	710,141.	130,421.
e Other		1,231,918.	1,084,453.	147,465.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				388,481.

**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (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)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	14,327,057.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	0.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	14,327,057.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	218,464.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	218,464.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	14,545,521.

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

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	13,548,417.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	0.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	13,548,417.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	218,464.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	218,464.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	13,766,881.

**Part XIII Supplemental Information.**

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

**PART 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 AUDITS BY THE APPLICABLE TAXING JURISDICTIONS FOR PERIODS PRIOR TO 2013.

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

REIMBURSEMENTS OF LEGAL DEFENSE EXPENSES REPORTED ON PART

VIII

218,464.





**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No. 1545-0047

**2016**

**Open to Public  
Inspection**

Name of the organization **PRO PUBLICA, INC.** Employer identification number **14-2007220**

**Part I General Information on Grants and 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 grants or assistance?  **Yes**  **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**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 recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3** Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2016)

**Part III** **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
STIPEND	13	22,600.	0.		

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

PART I, LINE 2:

PROPUBLICA PROVIDES STIPENDS TO INDIVIDUALS. STIPEND PAYMENTS REPRESENT A  
FORM OF GRANT ASSISTANCE PROVIDED TO PARTICIPANTS IN VARIOUS PROPUBLICA  
OUTREACH PROGRAMS. PARTICIPANTS IN THE PROGRAMS ARE SELECTED VIA  
COMPETITIVE APPLICATION PROCESS IN WHICH THE APPLICANTS ARE CHOSEN BASED ON  
THEIR QUALIFICATIONS AND CAREER PROSPECTS IN THE FIELD OF INVESTIGATIVE  
JOURNALISM. FUNDING IS OFTEN PROVIDED AS A PART OF A GRANT RECEIVED BY  
PROPUBLICA. IN SUCH INSTANCES, THE GRANT REQUIREMENTS DETERMINE THE AMOUNT  
OF FUNDING AVAILABLE AND MAY INFORM THE STIPEND PAYMENT PROCESS. IF THE

**Part IV Supplemental Information**

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:

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

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

3) 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.

WHEN FUNDING IS PROVIDED VIA PASS-THROUGH GRANTS FROM OTHER ORGANIZATIONS,



**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2016**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization  
**PRO PUBLICA, INC.**

Employer identification number  
**14-2007220**

**Part I Questions Regarding Compensation**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Schedule J (Form 990) 2016

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) PAUL E. STEIGER EXECUTIVE CHAIRMAN	(i)	195,890.	0.	2,670.	10,000.	3,253.	211,813.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) RICHARD TOFEL PRESIDENT AND CO-EXECUTIVE	(i)	383,850.	0.	1,780.	13,250.	20,497.	419,377.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) STEPHEN ENGELBERG EDITOR-IN-CHIEF & CO-EXECU	(i)	376,281.	0.	1,780.	13,250.	47,065.	438,376.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) RAGAN RHYNE VICE PRESIDENT, DEVELOPMENT	(i)	200,590.	0.	373.	10,100.	704.	211,767.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ROBIN FIELDS MANAGING EDITOR	(i)	248,844.	0.	621.	6,250.	12,288.	268,003.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JEFFREY GERTH SENIOR REPORTER THUR 12/31/16	(i)	168,250.	0.	60,626.	8,450.	1,344.	238,670.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) TRACY WEBER SENIOR EDITOR	(i)	207,893.	0.	952.	10,738.	20,010.	239,593.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JOSEPH SEXTON SENIOR EDITOR	(i)	205,638.	0.	1,780.	10,725.	22,919.	241,062.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) CHARLES ORNSTEIN SENIOR REPORTER	(i)	200,022.	0.	414.	10,750.	35,685.	246,871.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III Supplemental Information**

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

PART I, LINE 4A:

PURSUANT TO THE TERMS AND CONDITIONS OF MR. JEFFREY GERTH'S SEVERANCE AGREEMENT, PRO PUBLICA PAID A SEVERANCE PAYMENT TO MR. JEFFREY GERTH DURING 2016 IN THE AMOUNT OF \$58,500. THIS PAYMENT WAS TREATED AS TAXABLE COMPENSATION TO THE RECIPIENT.



**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

OMB No. 1545-0047

**2016**

Open To Public  
Inspection

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization **PRO PUBLICA, INC.** Employer identification number **14-2007220**

**Part I Types of Property**

	(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 determining noncash contribution amounts
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				
9 Securities - Publicly traded	X	40	154,188.	FMV
10 Securities - Closely held stock				
11 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 ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **0**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2016)

**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 IN PART 1,  
COLUMN (B) OF SCHEDULE M.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Open to Public  
Inspection

Name of the organization

PRO PUBLICA, INC.

Employer identification number

14-2007220

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

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 KEY ASPECT OF PROPUBLICA'S BUSINESS MODEL IS OUR FUNDING, WHICH COMES  
ALMOST ENTIRELY FROM PHILANTHROPY. INCREASINGLY, READERS POWER OUR  
INVESTIGATIVE JOURNALISM - NOT CORPORATIONS, POLITICIANS OR ADVOCACY  
GROUPS - AND THEY DONATE BECAUSE THEY BELIEVE OUR WORK CAN MAKE A  
DIFFERENCE IN OUR DEMOCRACY AND CIVIC LIFE. THERE IS PERHAPS NO GREATER  
INDICATION OF THE STRENGTH OF THIS RELATIONSHIP THAN THE BURST OF  
CONTRIBUTIONS THAT FOLLOWED THE 2016 PRESIDENTIAL ELECTION.

Name of the organization PRO PUBLICA, INC.	Employer identification number 14-2007220
---	--

HOURS AFTER THE RESULTS WERE CLEAR, SMALL DONORS ACROSS THE COUNTRY BEGAN CLICKING OUR ONLINE "DONATE" BUTTON. IN THE NEXT FEW DAYS, ENVELOPES WITH CHECKS BEGAN TRICKLING INTO PROPUBLICA'S OFFICE, FROM \$5 GIFTS TO AMOUNTS IN THE HUNDREDS AND THOUSANDS. MANY SHARED WITH US WHY THEY FELT MOVED NOW TO SUPPORT PROPUBLICA BY TAKING ACTION ON ITS BEHALF.

- "I'VE BEEN A FAN FOR A FEW YEARS," WROTE DKW FROM GEORGIA. "THE STORIES ARE ALWAYS DEEP - SOMETIMES LONGER THAN I THINK I HAVE TIME FOR - BUT EVERY TIME I READ ONE I'M SO GRATEFUL YOU'RE DOING THE WORK YOU DO IN THE WAY YOU DO IT. I SHOULD HAVE GIVEN SOONER, BUT THE ELECTION HAS BEEN A WAKEUP CALL THAT I NEED TO HELP SUPPORT ORGANIZATIONS THAT RESEARCH AND REPORT, AND ORGANIZATIONS THAT I TRUST."

- "I DONATED A MODEST DONATION TO YOUR NEWS ORGANIZATION BECAUSE I BELIEVE THAT THE NEWS OF THE 21ST CENTURY MUST BE SUPPORTED BY AVERAGE AMERICANS," WROTE DYLAN FROM KENTUCKY. "TODAY'S MAJOR NEWS ORGANIZATIONS ARE SELLING A PRODUCT. WITH FEWER AND FEWER INDIVIDUALS BUYING SUBSCRIPTIONS TO NEWSPAPERS AND MAGAZINES, THE INCENTIVE TO PRODUCE HARD-HITTING JOURNALISM BECOMES LESS INTENSE."

- "I BELIEVE IN INVESTIGATIVE JOURNALISM AND THE FOURTH ESTATE," WROTE CINDY FROM WYOMING. "BUT MORE IMPORTANTLY, I GIVE TODAY BECAUSE I AM HORRIFIED BY THE ELECTION AND THE THREATS TRUMP HAS MADE AGAINST JOURNALISM, JOURNALISTS, FREEDOM OF SPEECH AND FREEDOM OF THE PRESS. IF MY SMALL DONATION CAN HELP BE PART OF A LARGER SUM THAT MAKES AN IMPORTANT STATEMENT TODAY, THEN PLEASE LET IT DO SO."

Name of the organization

PRO PUBLICA, INC.

Employer identification number

14-2007220

THE MOMENTUM OF GIVING ACCELERATED AFTER HBO'S JOHN OLIVER MENTIONED PROPUBLICA IN HIS SMALL LIST OF ORGANIZATIONS WORTHY OF SUPPORT IN THE COMING YEARS. BY YEAR-END, SMALLER GIFTS HAD COME FROM ABOUT 26,000 DONORS, AND AMOUNTED TO MORE THAN \$2.9 MILLION DOLLARS. WE UNDERSTAND THE RESPONSIBILITY THAT COMES WITH THIS GENEROSITY - ONE PROPUBLICA WILL MEET BY EXPANDING OUR STAFF AND EXTENDING OUR ABILITY TO CALL OUT ABUSES AND HOLD THOSE IN POWER TO ACCOUNT THROUGH PAINSTAKING AND FEARLESS ACCOUNTABILITY JOURNALISM.

PROTECTING THE VOTE

IN 2016, WE SERVED OUR READERS WITH ABOUNDING EXAMPLES OF THIS KIND OF WORK, PARTICULARLY RELATING TO THE ELECTION - BEFORE, DURING AND AFTER.

IN OUR MOST WIDE-RANGING COLLABORATION YET, PROPUBLICA ORGANIZED ELECTIONLAND, A NATIONAL REPORTING INITIATIVE THAT REVEALED VOTERS' EXPERIENCES IN REAL TIME. WORKING WITH GOOGLE NEWS LAB, UNIVISION, WNYC, FIRST DRAFT, THE USA TODAY NETWORK AND THE CITY UNIVERSITY OF NEW YORK GRADUATE SCHOOL OF JOURNALISM, WE USED CUTTING-EDGE TECHNOLOGY, SOCIAL MEDIA NEWSGATHERING AND NATIONAL DATA FROM A NONPARTISAN LEGAL CALL CENTER TO FIND PROBLEMS THAT WOULD PREVENT CITIZENS FROM EXERCISING THEIR RIGHT TO VOTE. WE DID THIS WITH A TEAM OF MORE THAN A THOUSAND PEOPLE, INCLUDING ABOUT 600 JOURNALISM SCHOOL STUDENTS WHO PORED THROUGH SOCIAL MEDIA REPORTS AND UPWARD OF 400 LOCAL JOURNALISTS ACROSS 50 STATES WHO SIGNED UP TO RECEIVE AND REPORT ON TIPS WE RECEIVED.

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ELECTIONLAND, WHICH LAUNCHED DURING THE EARLY VOTING PERIOD, GAVE US AN UNPRECEDENTED REAL-TIME UNDERSTANDING OF VOTING IN THE UNITED STATES. FROM PROBLEMS WITH HOURS-LONG LINES IN CALIFORNIA TO MISINFORMATION ABOUT VOTER ID REQUIREMENTS IN TEXAS, THE PROJECT ALLOWED US TO PUBLISH MORE THAN 400 STORIES WHILE POLLS WERE STILL OPEN AND ISSUES COULD BE ADDRESSED. FOR EXAMPLE, WHEN WE SPOTTED COMPLAINTS FROM WEST PALM BEACH, FLA., ABOUT SEVERAL DOZEN PEOPLE SHOUTING AT EARLY VOTERS WITH BULL HORNS, WE POSTED A STORY THAT PROMPTED THE LOCAL SHERIFF'S OFFICE TO INTERVENE AND STOP THE INTIMIDATING BEHAVIOR.

OUR TEAM ALSO LOOKED CLOSELY AT ALLEGATIONS OF WIDESPREAD VOTER FRAUD. LOOKING AT THOUSANDS OF JURISDICTIONS AND MILLIONS OF VOTERS, WE WERE ABLE TO SAY CONCLUSIVELY THAT THERE WAS NO EVIDENCE OF EITHER WIDESPREAD FRAUD OR VOTER INTIMIDATION. INSTEAD WE CAUGHT SIGNS OF PEOPLE USING SOCIAL MEDIA TO SPREAD FABRICATIONS. WHEN AN IMAGE CIRCULATING ON TWITTER, CAPTIONED IN BOTH ENGLISH AND SPANISH, CLAIMED TO SHOW AN IMMIGRATION OFFICER ARRESTING A LATINO MAN IN LINE TO VOTE, WE QUICKLY DETERMINED THE IMAGE WAS A FAKE - A COMPOSITE OF TWO DIFFERENT PHOTOGRAPHS - AND THERE WERE NO REPORTS OF ANYONE ARRESTED BY ICE OFFICIALS WHILE VOTING.

"MOST NEWSROOMS IN AMERICA ARE ASKING AN IMPORTANT BUT PREMATURE QUESTION WHILE POLLS ARE OPEN: 'WHO'S WINNING?'" SAID SCOTT KLEIN, PROPUBLICA DEPUTY MANAGING EDITOR AND THE PROJECT'S LEADER, AT THE LAUNCH OF THE INITIATIVE. "ELECTIONLAND IS AN EXPERIMENT THAT ASKS WHETHER WE CAN HELP EMPOWER NEWSROOMS TO COVER OTHER VITALLY IMPORTANT QUESTIONS THAT DAY: HOW IS THE ELECTION ITSELF GOING? WHO'S VOTING AND WHO'S BEING TURNED AWAY?"

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## GIVING VOICE TO A FORGOTTEN CLASS

PROPUBLICA'S COVERAGE LEADING UP TO THE ELECTION ALSO PROVED TRAILBLAZING. THIS WAS CLEAR WHEN THE ELECTION RETURNS ROLLED IN ON THE EVENING OF NOV. 8, AND STUNNED NEWSROOMS AROUND THE COUNTRY REGROUPED AND DISPATCHED THEIR REPORTERS TO THE PLACES WHERE, IT WAS NOW CLEAR, DONALD TRUMP HAD PLANTED THE SEEDS OF HIS VICTORY. WITHIN DAYS, REPORTS SPRANG UP ON THE NEW TRUMP VOTERS, DATELINED FROM COAL COUNTRY AND HOLLOWED-OUT FACTORY TOWNS.

BUT PROPUBLICA'S ALEC MACGILLIS DIDN'T HAVE TO RUSH OFF. HE'D BEEN VISITING THE HEARTLAND THROUGHOUT 2016, MEASURING THE GATHERING WAVE OF FRUSTRATION AND ANGER. IN JULY, PROPUBLICA AND POLITICO PUBLISHED MACGILLIS' STORY ON THE DAYTON, OHIO, AREA, WHERE INDUSTRIAL DECAY HAD BECOME FERTILE GROUND FOR THE POLITICS OF DONALD TRUMP. MACGILLIS PUSHED DEEP INTO THE LIVES AND FORTUNES OF DAYTON'S PEOPLE AND THEIR INTERLOCKING FATES. THE ISSUES THAT RESONATED WITH TRUMP VOTERS, MACGILLIS WROTE, "HAD BEEN BUILDING FOR DECADES IN PLACES LIKE DAYTON. FOR THE MOST PART, THE POLITICAL ESTABLISHMENT IGNORED, DISMISSED OR OVERLOOKED THESE FORCES, UNTIL SUDDENLY THEY BLEW APART NEARLY EVERYONE'S BLUEPRINT FOR THE PRESIDENTIAL CAMPAIGN."

MACGILLIS' STORY, "THE GREAT REPUBLICAN CRACK-UP" WAS NOT ONLY A MODEL OF ON-THE-GROUND REPORTING, INSIGHTFUL ANALYSIS AND ELEGANT WRITING. IT WAS ALSO A PRESCIENT PIECE OF JOURNALISM IN WHICH THE REPORTING CAPTURED THE PULSE OF DISCONTENT IN THE RUST BELT AND STEERED PROPUBLICA READERS AHEAD OF THE CURVE.

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AFTER THE ELECTION, PROPUBLICA BEGAN SHEDDING LIGHT ON THE ACTIVITIES OF PRESIDENT-ELECT TRUMP'S TRANSITION TEAM AND INCOMING ADMINISTRATION, NOTABLY WITH OUR FEATURE "THE CHOSEN."

HOLDING THE POWERFUL TO ACCOUNT

THROUGHOUT 2016, PROPUBLICA CRAFTED IMPORTANT, INNOVATIVELY PRESENTED STORIES THAT PURSUED OUR MISSION TO EXPOSE ABUSES OF POWER AND BETRAYALS OF PUBLIC TRUST - PRECISELY THE KIND OF WORK THAT BOTH OUR ESTABLISHED AND NEW DONORS SAY THEY ARE COUNTING ON US TO DO. OUR SUBJECTS INCLUDED THE DUBIOUS CREDENTIALS HANDED OUT BY THE NATION'S LARGEST ACCREDITOR OF FOR-PROFIT SCHOOLS AND THE DAMAGING OUTCOMES FOR STUDENTS; HEALTH IMPACTS OF AGENT ORANGE EXPOSURE ON THE CHILDREN AND GRANDCHILDREN OF VIETNAM VETERANS AND THE FAILURES OF THE VA TO RESPOND EFFECTIVELY; THE TROUBLING FAILURE RATES AND RACIAL DISPARITIES IN ALGORITHMS USED ACROSS THE CRIMINAL JUSTICE SYSTEM TO PREDICT A DEFENDANT'S RISK OF COMMITTING A FUTURE CRIME; POLICE USE OF ERROR-PRONE DRUG KITS USED TO CONVICT THOUSANDS OF PEOPLE ANNUALLY; DECEPTIVE PRACTICES BY NEW YORK CITY LANDLORDS THAT WRONGFULLY INFLATE RENTS; AND FACEBOOK'S INADVERTENT FACILITATION OF CIVIL RIGHTS VIOLATIONS.

MARCY, A MICHIGAN READER, EXPLAINED HER RECENT DONATION TO PROPUBLICA: "NOW, MORE THAN EVER, OUR DEMOCRACY NEEDS A STRONG, INDEPENDENT PRESS. THANKS FOR THE WORK YOU DO." WE REMAIN DETERMINED TO SERVE READERS WITH MORE ESSENTIAL JOURNALISM AT THIS CRITICAL MOMENT FOR AMERICA.

IMPACT:



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- FOLLOWING PROPUBLICA'S REPORTING THAT STUDENTS AT FOR-PROFIT SCHOOLS ACCREDITED BY THE ACCREDITING COUNCIL FOR INDEPENDENT COLLEGES AND SCHOOLS (ACICS) HAVE THE LOWEST GRADUATION RATES IN THE COUNTRY AND STRUGGLE TO REPAY THEIR STUDENT LOANS, THE EDUCATION DEPARTMENT ANNOUNCED THAT IT WOULD TERMINATE THE AGENCY. THIS UNPRECEDENTED MOVE TO STRIP THE POWERS OF ONE OF THE NATION'S LARGEST ACCREDITORS OF FOR-PROFIT SCHOOLS. IT CAME AFTER 12 STATE ATTORNEYS GENERAL, A COALITION OF 23 STUDENT AND CONSUMER PROTECTION ORGANIZATIONS, AN EDUCATION DEPARTMENT ADVISORY COMMITTEE AND REPORT BY OFFICIALS AT THE EDUCATION DEPARTMENT - ALL CITING PROPUBLICA - RECOMMENDED THAT THE GOVERNMENT DE-AUTHORIZE ACICS.

- WHEN PROPUBLICA REPORTED THAT FACEBOOK ALLOWED 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, IT SPARKED A WAVE OF CRITICISM AIMED AT THE SOCIAL NETWORK. FOUR MEMBERS OF CONGRESS WROTE FACEBOOK DEMANDING THAT THE COMPANY STOP LETTING ADVERTISERS EXCLUDE VIEWERS OF HOUSING ADS BY RACE. THE FEDERAL AGENCY THAT ENFORCES THE NATION'S FAIR HOUSING LAWS BEGAN TALKS WITH FACEBOOK TO ADDRESS WHAT EXPERTS SAID WAS A CLEAR VIOLATION OF FEDERAL ANTI-DISCRIMINATION LAWS. TWO WEEKS AFTER OUR STORY RAN, FACEBOOK ANNOUNCED THAT IT WOULD BAR ADVERTISERS FROM EXCLUDING USERS BY RACE IN ADS THAT INVOLVED HOUSING, CREDIT AND EMPLOYMENT. THE COMPANY SAID IT WOULD BUILD AN AUTOMATED SYSTEM TO SPOT ADS THAT DISCRIMINATE ILLEGALLY.

- OUR SERIES OF ARTICLES PUBLISHED WITH THE NEW YORK DAILY NEWS, WHICH DETAILED "NUISANCE ABATEMENT ACTIONS" - NEW YORK POLICE DEPARTMENT

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LAWSUITS THAT GIVE POLICE THE POWER TO EVICT PEOPLE PURPORTEDLY USING THEIR HOMES OR BUSINESS FOR ILLEGAL PURPOSES - LED TO IMPORTANT RESULTS. AFTER THE INVESTIGATION WAS PUBLISHED IN FEBRUARY, THE NYPD IMPOSED NEW SAFEGUARDS IN THE PROCESS OF LOCKING RESIDENTS OUT OF THEIR HOMES BEFORE THEY'VE HAD A CHANCE TO TELL THEIR SIDE OF THE STORY IN COURT. THE NUMBER OF NUISANCE ABATEMENT ACTIONS FILED BY THE NYPD DROPPED SIGNIFICANTLY. SEVERAL CITY COUNCIL MEMBERS INTRODUCED A PACKAGE OF 13 BILLS THAT WOULD REFORM THE WAY THE NYPD CARRIES OUT NUISANCE ABATEMENT ACTIONS. THE DEPARTMENT HAS EXPRESSED SUPPORT FOR SOME OF THESE, INCLUDING MEASURES TO REMOVE MARIJUANA POSSESSION AS A CHARGE THAT COULD LEAD TO IMMEDIATE EVICTION, TO REQUIRE LAB REPORTS TO SUPPORT DRUG ALLEGATIONS, AND TO LIMIT EXCLUSIONS OF MOST PEOPLE FROM HOMES TO ONE YEAR. IN ADDITION, ONE FAMILY THAT WAS WRONGFULLY KICKED OUT OF THEIR APARTMENT, CITING OUR REPORTING, FILED A LAWSUIT SEEKING TO HAVE THE LAW DECLARED UNCONSTITUTIONAL.

- A PROPUBLICA INVESTIGATION, PUBLISHED IN JULY WITH THE NEW YORK TIMES MAGAZINE, SPOTLIGHTED HOW POLICE DEPARTMENTS ACROSS THE COUNTRY USE ROADSIDE DRUG TESTS TO SECURE GUILTY PLEAS AND SEND TENS OF THOUSANDS OF PEOPLE TO JAIL EVERY YEAR - DESPITE WIDESPREAD EVIDENCE THAT THEY ROUTINELY PRODUCE FALSE POSITIVES. OUR REPORTING SPURRED THE DISTRICT ATTORNEY'S OFFICE IN PORTLAND, ORE., TO REVIEW ITS DRUG POSSESSION CASES. THE OFFICE DISCOVERED FIVE CASES WHERE DEFENDANTS HAD PLED GUILTY - BUT SUBSEQUENT LAB TESTS CAME BACK NEGATIVE FOR THE PRESENCE OF ANY CONTROLLED SUBSTANCES - AND VACATED THOSE FIVE WRONGFUL CONVICTIONS. PORTLAND'S DISTRICT ATTORNEY'S OFFICE ALSO CHANGED THE WAY IT SECURED GUILTY PLEAS IN DRUG POSSESSION CASES BASED ON THESE TESTS. NOW SUCH PLEAS WILL NOT BE ALLOWED UNLESS THE PRELIMINARY POLICE

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ROADSIDE TEST IS CONFIRMED BY LAB ANALYSIS. IN TEXAS, A STATE COMMISSION RECOMMENDED THAT CRIME LABS REVIEW ALL FIELD TEST RESULTS AND RE-TEST SUBSTANCES COLLECTED IN PREVIOUS DRUG CASES THAT HAD NOT BEEN CONFIRMED BY LAB TESTING. IN LAS VEGAS, THE NEVADA ATTORNEYS FOR CRIMINAL JUSTICE SET UP A COMMITTEE LOOKING FOR WAYS TO CHALLENGE LAW ENFORCEMENT'S METHODS FOR GETTING DRUG CONVICTIONS.

- PROPUBLICA AND NPR REPORTING SPOTLIGHTED OKLAHOMA'S WORKERS' COMPENSATION SYSTEM, WHICH ALLOWED COMPANIES TO "OPT OUT" OF STATE WORKERS' COMP AND WRITE THEIR OWN PLANS FOR DEALING WITH INJURED WORKERS. IN SEPTEMBER, THE OKLAHOMA SUPREME COURT STRUCK DOWN THE OPT-OUT SYSTEM AS UNCONSTITUTIONAL, ECHOING AN EARLIER RULING FROM THE OKLAHOMA WORKERS' COMPENSATION COMMISSION. THE FLORIDA SUPREME COURT STRUCK DOWN LAWS THAT CAPPED ATTORNEY FEES AND LIMITED WORKERS TO TWO YEARS OF TEMPORARY DISABILITY PAY REGARDLESS OF WHETHER THEY WERE ABLE TO RETURN TO WORK. IN OCTOBER, THE U.S. LABOR DEPARTMENT RELEASED A REPORT DETAILING HOW STATES ARE FAILING INJURED WORKERS - AN EFFORT PROMPTED BY TEN MEMBERS OF CONGRESS WHO URGED THE U.S. LABOR SECRETARY TO DEVISE AN OVERSIGHT PLAN FOR STATE WORKERS' COMP PROGRAMS, CITING PROPUBLICA'S REPORTING. THE REPORT LAYS THE GROUNDWORK FOR NEW FEDERAL OVERSIGHT, AS SEN. SHERROD BROWN ANNOUNCED HE WAS DRAFTING LEGISLATION TO ADDRESS ITS FINDINGS AND HOPED TO ADVANCE IT IN THE NEXT CONGRESS.

- PROPUBLICA, IN PARTNERSHIP WITH THE TEXAS TRIBUNE, LAUNCHED A MULTIMEDIA PROJECT SHOWING THAT HOUSTON IS AT RISK OF A MAJOR DISASTER: A HURRICANE WITH THE POTENTIAL TO DEVASTATE THE REGION. IN DECEMBER, PRESIDENT OBAMA SIGNED INTO LAW A BILL TO EXPEDITE A U.S. ARMY CORPS OF ENGINEERS STUDY THAT WILL DETERMINE HOW BEST TO PROTECT HOUSTON FROM

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SUCH A HURRICANE. CALLED THE "WATER INFRASTRUCTURE IMPROVEMENTS FOR THE NATION," OR WIIN, ACT, THE LAW EMERGED FROM A BILL THAT U.S. SEN. JOHN CORNYN FILED IN APRIL - ONE MONTH AFTER PROPUBLICA AND THE TEXAS TRIBUNE JOINTLY PUBLISHED STORIES ON THE PROBLEM.

- A PROPUBLICA INVESTIGATION, PUBLISHED IN JULY WITH THE NEW YORK TIMES, FOUND THAT A NEW JERSEY AGENCY WAS PUSHING STUDENT LOANS WITH STRINGENT RULES, AGGRESSIVE COLLECTIONS AND FEW REPRIEVES - EVEN FOR BORROWERS WHO DIED. IN DECEMBER, GOV. CHRISTIE SIGNED INTO LAW A NEW REQUIREMENT, PROMPTED BY OUR REPORTING, THAT REQUIRED THE STATE'S STUDENT LOAN AGENCY TO FORGIVE THE DEBTS OF BORROWERS WHO DIE OR BECOME PERMANENTLY DISABLED. THE NEW JERSEY SENATE ALSO PASSED BILLS REQUIRING THE AGENCY TO OBTAIN A COURT ORDER BEFORE GARNISHING WAGES, TAKING STATE TAX REFUNDS, OR SUSPENDING PROFESSIONAL LICENSES, LEGISLATION THAT IS NOW BEFORE NEW JERSEY'S HOUSE. ANOTHER BILL WOULD SET A BORROWER'S MONTHLY PAYMENT AT A LEVEL THAT IS CONSIDERED AFFORDABLE BASED ON HIS OR HER INCOME. IN SEPTEMBER, A NEW JERSEY STATE COMMISSION UNVEILED A REPORT URGING THE AGENCY TO OFFER BETTER PROTECTIONS FOR BORROWERS, INCLUDING RECOMMENDATIONS TO BOOST STUDENTS' UNDERSTANDING OF THE TERMS BEFORE THEY SIGN FOR LOANS AND TO OFFER A REHABILITATION PROGRAM THAT ALLOWS BORROWERS WHO DEFAULT TO IMPROVE THEIR PAYMENT STATUS AFTER SEVERAL MONTHS OF CONSISTENT PAYMENTS.

- AFTER OUR REPORTING REVEALED THAT NEW YORK CITY LANDLORDS WHO COLLECT LUCRATIVE TAX BREAKS IN EXCHANGE FOR PROVIDING RENT-STABILIZED HOUSING FAILED TO REGISTER UP TO 200,000 APARTMENTS FOR THE PROGRAM, MAYOR BILL DE BLASIO ANNOUNCED A LARGE-SCALE ENFORCEMENT PROGRAM TARGETING MORE THAN 3,000 RENTAL BUILDINGS. SAYING "ENOUGH IS ENOUGH," DE BLASIO SAID

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BUILDING OWNERS WHO FAIL TO FOLLOW THE LAW WILL LOSE THEIR TAX BREAKS. OFFICIALS FROM THE CITY HOUSING AUTHORITY AND FINANCE DEPARTMENT HAVE PLEDGED TO END THE PRACTICE OF GRANTING THE BENEFIT WITHOUT CHECKING TO MAKE SURE LANDLORDS COMPLY WITH THE RENT RULES. IN ADDITION, SINCE PROPUBLICA'S INVESTIGATION ON THIS ISSUE, TWO CITY COUNCIL MEMBERS INTRODUCED A BILL THAT WOULD REQUIRE THE CITY'S HOUSING ARM TO AUDIT 20 PERCENT OF BUILDINGS RECEIVING THE TAX BENEFIT, AND MANDATE THAT VIOLATORS RETURN THE MONEY. STATE LAWMAKERS INTRODUCED A BILL THAT WOULD INSTITUTE MUCH HIGHER FINANCIAL PENALTIES FOR LANDLORDS WHO OVERCHARGE THEIR TENANTS, AND THE CITY'S HOUSING COMMISSIONER OUTLINED A PLAN FOR HIRING MORE STAFF AND INVESTING IN TECHNOLOGY TO IMPROVE MANAGEMENT OF THE PROGRAM.

- IN 2014, PROPUBLICA AND THE WASHINGTON POST INVESTIGATED THE BUSINESS PRACTICES OF USA DISCOUNTERS, ESPECIALLY THE COMPANY'S HIGH-PRICED LOANS TO ACTIVE DUTY SERVICE PERSONNEL. IN THE WAKE OF OUR COVERAGE, THE COMPANY WENT OUT OF BUSINESS. IN SEPTEMBER, USA DISCOUNTERS ALSO SETTLED WITH 49 STATES AND THE DISTRICT OF COLUMBIA (COLORADO SETTLED WITH THE COMPANY SEPARATELY) OVER A SUIT ACCUSING THE COMPANY OF VARIOUS ABUSES, INCLUDING MISLEADING CUSTOMERS ABOUT THE QUALITY AND PRICE OF ITS MERCHANDISE, ITS LOAN CONTRACTS, AS WELL AS AGGRESSIVE DEBT COLLECTION. THE SETTLEMENT DEAL REQUIRED USA DISCOUNTERS TO PAY \$40 MILLION IN PENALTIES AND TO WIPE OUT DEBT FOR ITS PAST CUSTOMERS.

- A 2010 PROPUBLICA INVESTIGATION COVERED TWO TEXAS-BASED HOME MORTGAGE COMPANIES, FORMERLY KNOWN AS ALLIED HOME MORTGAGE CAPITAL CORP. AND ALLIED HOME MORTGAGE CORP, THAT ISSUED IMPROPER AND RISKY HOME LOANS THAT LATER DEFAULTED. BORROWERS SAID THEY'D BEEN LIED TO BY ALLIED

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EMPLOYEES, WHO IN SOME CASES HAD SIPHONED LOAN PROCEEDS FOR PERSONAL GAIN. IN DECEMBER A FEDERAL JURY ORDERED THE COMPANIES AND THEIR CHIEF EXECUTIVE TO PAY NEARLY \$93 MILLION FOR DEFRAUDING THE GOVERNMENT THROUGH THESE CORRUPT PRACTICES.

- FOLLOWING OUR 2014 REPORTING THAT VERIZON AND AT&T WERE ATTACHING HIDDEN TRACKING NUMBERS TO THEIR SUBSCRIBERS' INTERNET ACTIVITY, EVEN WHEN USERS OPTED OUT, VERIZON AGREED TO PAY \$1.35 MILLION TO SETTLE CHARGES FROM THE FEDERAL COMMUNICATIONS COMMISSION THAT THE UNDELETABLE "ZOMBIE" COOKIES VIOLATED CUSTOMERS' PRIVACY. THE COMPANY ALSO SIGNED A CONSENT DECREE WITH THE FEDERAL TRADE COMMISSION AFTER THE GOVERNMENT ALLEGED THAT THE COMPANY MADE FALSE REPRESENTATIONS TO CONSUMERS. IN THE SETTLEMENT, VERIZON AGREED TO MODIFY ITS PRIVACY POLICY AND PROVIDE USERS AN EFFECTIVE OPT-OUT OF TRACKING.

- IN A JOINT INVESTIGATION WITH THE WASHINGTON POST AND GERMAN NEWS OUTLETS HANDELSBLATT AND BAYERISCHER RUNDFUNK, PROPUBLICA EXAMINED DIVIDEND-ARBITRAGE TRANSACTIONS, A TRADE STRATEGY THAT HELPS FOREIGN INVESTORS AVOID AN ESTIMATED \$1 BILLION A YEAR IN TAXES ON DIVIDENDS PAID BY GERMAN COMPANIES. FOLLOWING OUR REPORT, PROSECUTORS IN FRANKFURT, GERMANY'S FINANCIAL CAPITAL, LAUNCHED AN INVESTIGATION INTO THE TRADES, AND THE GERMAN PARLIAMENT VOTED TO END THE TAX-AVOIDANCE DEALS IN THE COUNTRY. GERMANY'S TOP FINANCE OFFICIAL ALSO RELEASED A STATEMENT CRITICIZING DIV-ARB, AND A DANISH MEMBER OF THE EUROPEAN PARLIAMENT CALLED ON THE EU'S EUROPEAN COMMISSION TO EXAMINE THE TRANSACTIONS, WHICH ARE DRAINING DENMARK AND MANY OF ITS NEIGHBORS OF TENS OF MILLIONS OF DOLLARS IN FORGONE TAX REVENUES.

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- AFTER A SERIES OF PROPUBLICA ARTICLES IDENTIFIED DOZENS OF CASES OF NURSING HOME WORKERS POSTING MOCKING PHOTOS OF ELDERLY RESIDENTS ON SOCIAL MEDIA SITES, THE CENTERS FOR MEDICARE AND MEDICAID SERVICES IN AUGUST ANNOUNCED A PLAN TO INCREASE ITS OVERSIGHT TO PREVENT AND PUNISH SUCH ABUSE. IN A MEMO TO STATE HEALTH DEPARTMENTS, THE FEDERAL AGENCY SAID ALL NURSING HOMES MUST HAVE WRITTEN POLICIES ON THIS ISSUE THAT INCLUDE AN EXPLICIT BAN ON TAKING DEMEANING PHOTOGRAPHS OF RESIDENTS, PROCEDURES FOR INVESTIGATING SUCH COMPLAINTS AND REPORTING THOSE INVOLVED TO STATE LICENSING AGENCIES FOR POSSIBLE DISCIPLINE. SEN. CHARLES GRASSLEY, CHAIRMAN OF THE SENATE JUDICIARY COMMITTEE, ASKED THE U.S. JUSTICE DEPARTMENT FOR SPECIFIC INFORMATION ON HOW AGGRESSIVELY IT PURSUES THIS FORM OF ELDER ABUSE IN NURSING HOMES, DAYS AFTER SEN. TOM CARPER SIMILARLY ASKED GOVERNMENT REGULATORS AT THE OFFICE FOR CIVIL RIGHTS OF THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES WHAT THEY'RE DOING TO STOP NURSING HOME WORKERS FROM THE DEHUMANIZING PRACTICE.

- PROPUBLICA AND THE VIRGINIAN-PILOT HAVE BEEN INVESTIGATING WHETHER VIETNAM VETERANS' EXPOSURE TO AGENT ORANGE HAS ALSO LED TO HEALTH PROBLEMS IN THEIR CHILDREN AND GRANDCHILDREN. AT A PROPUBLICA-SPONSORED WASHINGTON, D.C., EVENT IN JUNE, VETERANS AFFAIRS OFFICIALS ANNOUNCED NEW EFFORTS TO ADDRESS THIS ISSUE, INCLUDING THE AGENCY'S FIRST NATIONWIDE SURVEY OF VIETNAM VETERANS IN MORE THAN THREE DECADES AND REQUESTING AN OUTSIDE PANEL OF EXPERTS TO CONTINUE ITS WORK STUDYING MULTIGENERATIONAL IMPACTS OF AGENT ORANGE.

- PROPUBLICA'S INVESTIGATION ON RISK ASSESSMENTS, ALGORITHMS USED ACROSS THE CRIMINAL JUSTICE SYSTEM THAT GENERATE A SCORE PREDICTING A DEFENDANT'S RISK OF COMMITTING A FUTURE CRIME, UNCOVERED RACIAL

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DIFFERENCES IN THE OUTCOMES. OUR ANALYSIS OF THE ALGORITHM USED IN FLORIDA, WISCONSIN AND OTHER JURISDICTIONS SHOWED THAT IT WRONGLY LABELED BLACK DEFENDANTS AS LIKELY FUTURE CRIMINALS AT TWICE THE RATE OF MISTAKEN PREDICTIONS ABOUT WHITE DEFENDANTS. CITING OUR REPORTING, IN JULY THE WISCONSIN SUPREME COURT RULED THAT, WHILE JUDGES MAY CONSIDER RISK ASSESSMENT SCORES DURING SENTENCING, WARNINGS MUST BE ATTACHED TO THE SCORES TO FLAG THE TOOL'S LIMITATIONS. THE WHITE HOUSE QUOTED PROPUBLICA'S FINDINGS IN A REPORT ON THE IMPACTS OF ARTIFICIAL INTELLIGENCE ACROSS VARIOUS SECTORS OF SOCIETY.

- AFTER A 2014 PROPUBLICA AND NPR STORY ON MISSOURI'S HEARTLAND REGIONAL MEDICAL CENTER SHOWED THAT THE NONPROFIT HOSPITAL HAD FOR YEARS SUED LOW-INCOME PATIENTS OVER THEIR UNPAID BILLS, SEN. CHARLES GRASSLEY LAUNCHED A SENATE INVESTIGATION WHICH CONCLUDED IN JUNE. AS A RESULT OF THE SCRUTINY, THE HOSPITAL OVERHAULED ITS FINANCIAL ASSISTANCE POLICY AND FORGAVE THE DEBTS OF THOUSANDS OF FORMER PATIENTS.

- FOLLOWING OUR REPORT ON ABUSE AND NEGLECT AT THE CARLTON PALMS EDUCATIONAL CENTER IN ORLANDO, FLORIDA, A RESIDENTIAL FACILITY FOR CHILDREN AND ADULTS WITH DEVELOPMENTAL DISABILITIES, OFFICIALS STATIONED AN INVESTIGATOR AT THE CENTER AND FORMED A SPECIAL TEAM TO CLOSELY MONITOR STAFF AND RESIDENTS. THE STATE ALSO SAID IT WOULD MOVE CURRENT RESIDENTS TO NEW HOMES.

- IN 2015, PROPUBLICA AND AL.COM INVESTIGATED A HARSH ALABAMA LAW THAT CHARGES WOMEN WHO USED DRUGS DURING PREGNANCY WITH "CHEMICAL ENDANGERMENT," A FELONY THAT CARRIES A 10-YEAR SENTENCE EVEN IF THE



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BABY IS BORN UNHARMED OR IF THE DRUG IS LEGAL. IN MAY, THE ALABAMA HOUSE OF REPRESENTATIVES PASSED A BILL TO EXEMPT WOMEN WHO USE MEDICALLY PRESCRIBED DRUGS FROM THE STATE'S LAW.

- IN OCTOBER, PROPUBLICA DISCLOSED THAT GOOGLE QUIETLY CHANGED A MAJOR PRIVACY POLICY. THE COMPANY HAD PREVIOUSLY PROMISED THAT IT WOULD NOT REVEAL IDENTIFYING INFORMATION ABOUT ITS USERS TO THE ADVERTISING NETWORK DOUBLECLICK, A GOOGLE SUBSIDIARY. HOWEVER, THIS YEAR GOOGLE UPDATED ITS POLICY TO SAY THAT USERS' WEB BROWSING ACTIVITIES "MAY BE" COMBINED WITH THEIR PERSONAL INFORMATION COLLECTED FROM GMAIL AND OTHER LOGIN ACCOUNTS. IN RESPONSE TO OUR REPORTING, TWO ADVOCACY GROUPS FILED A COMPLAINT WITH THE FEDERAL TRADE COMMISSION (FTC) ALLEGING THAT GOOGLE HAD DELIBERATELY DECEIVED CONSUMERS AND THAT THE PRIVACY POLICY CHANGE VIOLATED LEGALLY BINDING COMMITMENTS THAT GOOGLE MADE TO THE FTC.

- IN THE DAYS LEADING TO ELECTION DAY, REPORTERS ON PROPUBLICA'S ELECTIONLAND PROJECT SAW SEVERAL INSTANCES OF FALSE INFORMATION ABOUT VOTING REQUIREMENTS SPREADING ON SOCIAL MEDIA. ONE EXAMPLE WE REPORTED CAME FROM CLOTHING RETAILER URBAN OUTFITTERS, WHICH TWEETED AN ELECTION GUIDE TO ITS 1 MILLION TWITTER FOLLOWERS FULL OF FALSE INFORMATION, INCLUDING A CLAIM THAT VOTERS NEED A "VOTER'S REGISTRATION CARD" AND AN ID. AFTER OUR STORY, URBAN OUTFITTERS PROMPTLY DELETED THE TWEET AND UPDATED ITS GUIDE.

- AFTER PROPUBLICA REPORTED THAT DOCTORS WHO TOOK PAYMENTS FROM PHARMACEUTICAL COMPANIES PRESCRIBED MORE EXPENSIVE, BRAND-NAME MEDICATIONS THAN THOSE WHO DIDN'T, TWO MEDICAL JOURNALS PUBLISHED

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STUDIES THAT CONFIRMED THIS LINK. JAMA INTERNAL MEDICINE FOUND SIGNIFICANT EVIDENCE THAT DOCTORS WHO RECEIVED MEALS TIED TO SPECIFIC DRUGS PRESCRIBED A HIGHER PROPORTION OF THOSE PRODUCTS THAN THEIR PEERS, WITH THE SHARE OF THE DRUG PRESCRIPTIONS RISING WITH THE GREATER NUMBER OF MEALS THEY RECEIVED. A HARVARD MEDICAL SCHOOL STUDY FOUND THAT MASSACHUSETTS PHYSICIANS PRESCRIBED A HIGHER PROPORTION OF BRAND-NAME DRUGS THE MORE INDUSTRY MONEY THEY RECEIVED.

- A 2011 PROPUBLICA INVESTIGATION, PUBLISHED WITH COLUMBIA'S STABLE CENTER FOR INVESTIGATIVE JOURNALISM AND THE CENTER FOR PUBLIC INTEGRITY, FOUND THAT, WHILE STUDENT LOAN BORROWERS WITH SEVERE DISABILITIES ARE ENTITLED TO HAVE FEDERAL STUDENT LOANS FORGIVEN, THE PROGRAM FOR DECIDING WHETHER THEY QUALIFY IS DEEPLY DYSFUNCTIONAL. FEDERAL OFFICIALS CONSEQUENTLY CHANGED THE PROGRAM'S REGULATIONS, AND THIS APRIL THE DEPARTMENT OF EDUCATION ANNOUNCED THAT IT WILL OFFER TO WRITE OFF \$7.7 BILLION OF STUDENT DEBT OWED BY APPROXIMATELY 387,000 BORROWERS WHO HAVE BECOME DISABLED.

- FOLLOWING OUR 2014 REPORT ON ABUSIVE DISCIPLINE TECHNIQUES AT THE JUDGE ROTENBERG CENTER, A BOSTON-AREA SCHOOL FOR CHILDREN WITH SEVERE DEVELOPMENTAL DISABILITIES, THE FOOD AND DRUG ADMINISTRATION MOVED TO BAN THE FACILITY'S USE OF A CONTROVERSIAL ELECTRIC SHOCK DEVICE. IN A 124-PAGE DOCUMENT PROPOSING THE BAN, THE FDA ACCUSED THE ROTENBERG CENTER OF UNDERREPORTING HARMFUL EFFECTS OF ELECTRIC SHOCKS AND MISLEADING FAMILIES ABOUT ALTERNATIVE TREATMENTS.

- AFTER OUR STORY ON A HABITAT FOR HUMANITY NEW YORK PROJECT THAT DISPLACED SEVERAL LOW-INCOME FAMILIES IN THE PROCESS OF BUYING AND

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RENOVATING BUILDINGS IN BROOKLYN, NEW YORK CITY COUNCIL MEMBER ROBERT CORNEGY ASKED THE CHARITY'S LOCAL AFFILIATE TO FIND HOUSING FOR THE FAMILIES. HABITAT FOR HUMANITY'S NEW YORK CHAPTER TOOK RESPONSIBILITY, ENCOURAGING THE FAMILIES NAMED IN THE ARTICLE TO CONTACT THEM DIRECTLY IN ORDER TO "HELP THEM FIND SOLUTIONS THAT MEET THEIR NEEDS."

OUR WORK WAS HONORED IN 2016 AS FOLLOWS:

PROPUBLICA'S COLLABORATION WITH THE MARSHALL PROJECT, "AN UNBELIEVABLE STORY OF RAPE," ABOUT THE HUNT FOR A SERIAL RAPIST, WON THE 2016 PULITZER PRIZE FOR EXPLANATORY REPORTING. THE AWARD IS THE THIRD PULITZER PRIZE FOR PROPUBLICA. WRITTEN BY PROPUBLICA SENIOR REPORTER T. CHRISTIAN MILLER AND THE MARSHALL PROJECT'S KEN ARMSTRONG, "AN UNBELIEVABLE STORY OF RAPE" ALSO RECEIVED THE GEORGE POLK AWARD FOR JUSTICE REPORTING, THE AMERICAN SOCIETY OF NEWS EDITORS' DEBORAH HOWELL AWARD FOR NON-DEADLINE WRITING, COLUMBIA JOURNALISM SCHOOL'S MEYER "MIKE" BERGER AWARD FOR HUMAN INTEREST REPORTING, THE PEN CENTER USA LITERARY AWARD FOR JOURNALISM, THE DEADLINE CLUB AWARD FOR FEATURE REPORTING, THE JOHN BARTLOW MARTIN AWARD FOR PUBLIC INTEREST MAGAZINE JOURNALISM AND THE AL NAKKULA AWARD FOR POLICE REPORTING. THE PIECE WAS NOMINATED FOR A NATIONAL MAGAZINE AWARD FOR FEATURE WRITING, IN ADDITION TO BEING A FINALIST FOR THE DART AWARD FOR EXCELLENCE IN COVERAGE OF TRAUMA, AND THE NIEMAN FOUNDATION'S TAYLOR FAMILY AWARD FOR FAIRNESS IN JOURNALISM. FOR HIS WORK ON THIS ARTICLE AND PREVIOUS REPORTING ON RAPE, MILLER WON THE END VIOLENCE AGAINST WOMEN INTERNATIONAL MEDIA EXCELLENCE AWARD.

- PROPUBLICA SENIOR REPORTER ABRAHM LUSTGARTEN WAS A FINALIST FOR THE PULITZER PRIZE FOR NATIONAL REPORTING FOR "KILLING THE COLORADO," HIS

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GROUNDBREAKING INVESTIGATION ON THE WATER CRISIS IN THE AMERICAN WEST.  
 THE PIECE WON THE NATIONAL ACADEMIES OF SCIENCES, ENGINEERING AND  
 MEDICINE COMMUNICATIONS AWARD IN THE ONLINE CATEGORY, RECEIVED SPECIAL  
 RECOGNITION FROM THE KNIGHT-RISSER PRIZE FOR WESTERN ENVIRONMENTAL  
 JOURNALISM, AND IS A FINALIST FOR THE ONLINE JOURNALISM AWARD FOR  
 EXPLANATORY REPORTING.

- FOR A SERIES OF ARTICLES THAT EXPLORED THE CHANGING NATURE OF  
 AMERICAN DEMOCRACY, REPORTER ALEC MACGILLIS RECEIVED THE TONER PRIZE  
 FOR EXCELLENCE IN POLITICAL REPORTING AT A DINNER IN WASHINGTON, D.C.,  
 AT WHICH PRESIDENT BARACK OBAMA GAVE THE KEYNOTE SPEECH.  
 OUR REPORTING WITH NPR NEWS, "INSULT TO INJURY," THAT SHOWED HOW  
 STATES SHARPLY REDUCED WORKERS' COMPENSATION BENEFITS AT THE BEHEST OF  
 INSURERS AND BIG BUSINESSES WON THE IRE MEDAL, THE HIGHEST HONOR  
 BESTOWED BY INVESTIGATIVE REPORTERS AND EDITORS; AN IRE AWARD IN THE  
 PRINT/ONLINE CATEGORY; THE EDWARD R. MURROW AWARD FOR ONLINE/AUDIO NEWS  
 SERIES; THE GERALD LOEB AWARD FOR DISTINGUISHED BUSINESS AND FINANCIAL  
 JOURNALISM FOR EXPLANATORY REPORTING; THE DEADLINE CLUB AWARDS FOR  
 PUBLIC SERVICE; TWO BEST IN BUSINESS AWARDS FROM THE SOCIETY OF  
 AMERICAN BUSINESS EDITORS AND WRITERS FOR DIGITAL INNOVATION AND  
 DIGITAL INVESTIGATIVE; THE DEADLINE AWARD FOR PUBLIC SERVICE; AND A  
 SOCIETY FOR NEWS DESIGN AWARD OF EXCELLENCE FOR INFOGRAPHICS.

"COLOR OF DEBT," OUR ANALYSIS OF RACIAL DISPARITIES IN DEBT COLLECTION  
 LAWSUITS AND WAGE GARNISHMENT BY PAUL KIEL, ANNIE WALDMAN AND AL SHAW,  
 WON THE NATIONAL PRESS CLUB AWARD FOR CONSUMER JOURNALISM-PERIODICALS,  
 AN ONLINE NEWS ASSOCIATION AL NEUHARTH INNOVATION IN INVESTIGATIVE  
 JOURNALISM AWARD, THE SOCIETY OF AMERICAN BUSINESS EDITORS AND WRITERS'

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BEST IN BUSINESS AWARD FOR DIGITAL EXPLANATORY, AND A DEADLINE CLUB AWARD FOR MINORITY FOCUS. THE PROJECT WAS ALSO A FINALIST FOR THE NATIONAL ASSOCIATION OF BLACK JOURNALISTS SALUTE TO EXCELLENCE AWARDS IN THE ONLINE NEWS PROJECT CATEGORY, THE GERALD LOEB AWARD FOR BEAT REPORTING, THE DATA JOURNALISM AWARD'S NEWS DATA APP OF THE YEAR, AND THE DEADLINE CLUB AWARDS FOR BEAT REPORTING.

A COLLABORATION WITH PBS FRONTLINE WHICH REVEALED A POLITICAL DEATH SQUAD THAT MURDERED SEVERAL VIETNAMESE-AMERICAN JOURNALISTS WITH TOTAL IMPUNITY, "TERROR IN LITTLE SAIGON," WAS NOMINATED FOR AN EMMY AWARD FOR OUTSTANDING INVESTIGATIVE JOURNALISM-LONG FORM. THE PROJECT WAS ALSO A FINALIST FOR THE DART AWARD FOR EXCELLENCE IN COVERAGE OF TRAUMA.

OUR COVERAGE, WITH NPR NEWS, OF HOW THE RED CROSS HAS FAILED DISASTER VICTIMS IN HAITI AND MADE DUBIOUS CLAIMS OF SUCCESS, WON THE INVESTIGATIVE REPORTERS AND EDITORS AWARD FOR RADIO/AUDIO AND WAS A FINALIST FOR THE ONLINE NEWS ASSOCIATION'S AL NEUHARTH INNOVATION IN INVESTIGATIVE JOURNALISM AWARD.

OUR SERIES WITH THE VIRGINIAN-PILOT, ON THE ONGOING IMPACT OF AGENT ORANGE ON THE HEALTH OF VIETNAM VETERANS AND THEIR FAMILIES, WON THE ONLINE JOURNALISM AWARD FOR TOPICAL REPORTING.

REPORTING ON ABUSES BY THE FOR-PROFIT COMPANY ADVOSERV, WHICH RUNS SCHOOLS AND RESIDENTIAL FACILITIES FOR CHILDREN AND ADULTS WITH DISABILITIES, WON THE NATIONAL AWARD FOR EDUCATION REPORTING IN THE INVESTIGATIVE CATEGORY.

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"SURGEON SCORECARD," WHICH LIFTED THE CURTAIN ON THE COMPLICATION RATES OF MORE THAN 16,000 SURGEONS NATIONWIDE AND ENABLED AMERICANS TO COMPARE THEIR RESULTS FOR THE FIRST TIME, WON THE DEADLINE CLUB AWARD FOR SCIENCE, MEDICAL OR ENVIRONMENTAL REPORTING; THE ASIAN AMERICAN JOURNALISTS ASSOCIATION'S AL NEUHARTH AWARD FOR INNOVATION IN INVESTIGATIVE JOURNALISM; AND A SOCIETY FOR NEWS DESIGN AWARD OF EXCELLENCE FOR FEATURES; AND WAS A FINALIST FOR THE ONLINE NEWS ASSOCIATION'S UNIVERSITY OF FLORIDA AWARD FOR INVESTIGATIVE DATA JOURNALISM.

OUR COLLABORATION WITH THE NEW YORK DAILY NEWS, EXPOSING STARTLING ABUSES BY THE NEW YORK CITY POLICE DEPARTMENT UNDER THE CITY'S NUISANCE ABATEMENT LAW, WON THE SIDNEY HILLMAN FOUNDATION'S MONTHLY SIDNEY AWARD FOR MAY, AND WAS A FINALIST FOR THE ONLINE NEWS ASSOCIATION'S KNIGHT AWARD FOR PUBLIC SERVICE.

OUR EXAMINATION OF HOW POLICE FAILED TO STOP FORMER NFL PLAYER AND SERIAL RAPIST DARREN SHARPER FOR YEARS WON THE SOCIETY OF PROFESSIONAL JOURNALISTS' GREEN EYESHADES AWARD IN THE SPORTS REPORTING CATEGORY.

PROPUBLICA NEWS APPLICATIONS DEVELOPER SISI WEI WON THE DATA JOURNALISM AWARD FOR BEST INDIVIDUAL PORTFOLIO. WEI WAS RECOGNIZED FOR NEWS APPLICATIONS AND DATA VISUALIZATIONS INCLUDING "SURGEON SCORECARD," "DEBT BY DEGREES" AND "MONEY AS A WEAPONS SYSTEM," WHICH LET READERS BROWSE STRANGE AND OFTEN WASTEFUL PROJECT FUNDED BY COMMANDERS DURING THE WAR IN AFGHANISTAN.

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OUR REPORTING ON FAULTY ROADSIDE DRUG TESTS THAT ARE WRONGFULLY CONVICTING PEOPLE WON THE SIDNEY HILLMAN FOUNDATION'S SIDNEY AWARD FOR AUGUST.

REPORTING ON WHITE WORKERS IN THE RUST BELT WHO WERE EFFECTIVELY WRITTEN OFF BY HILLARY CLINTON AND THE DEMOCRATS, WON PAYDAY REPORT'S FIRST-EVER ANNE BRADEN AWARD.

PROPUBLICA WAS NAMED A FINALIST FOR THE ONLINE JOURNALISM AWARD FOR GENERAL EXCELLENCE IN ONLINE JOURNALISM.

"DEVILS, DEALS AND THE DEA," OUR FEATURE ON HOW THE DEA BROUGHT DOWN ONE OF THE MOST VICIOUS MEXICAN DRUG CARTELS - AND THE MURKY AFTERMATH - WAS A FINALIST FOR THE DEADLINE CLUB AWARD FOR ENTERPRISE REPORTING.

OUR INVESTIGATION INTO WHICH COLLEGES HELP LOW-INCOME STUDENTS THE MOST, "DEBT BY DEGREES," WAS A FINALIST FOR THE NATIONAL AWARD FOR EDUCATION REPORTING FOR DATA JOURNALISM AND THE GERALD LOEB AWARD FOR IMAGES/GRAPHICS/INTERACTIVES.

ORIGINAL ILLUSTRATIONS FEATURED IN OUR INVESTIGATION ON FIRESTONE'S ACTIVITIES IN LIBERIA DURING THE COUNTRY'S BRUTAL CIVIL WAR RECEIVED A SOCIETY OF ILLUSTRATORS SILVER MEDAL.

REPORTING ON "FLASHBANGS" AND THE GROWING MILITARIZATION OF LAW ENFORCEMENT WAS A RUNNER-UP FOR THE JOHN JAY COLLEGE/H.F. GUGGENHEIM EXCELLENCE IN CRIMINAL JUSTICE REPORTING AWARDS.

SIX PROPUBLICA REPORTERS WERE NAMED FINALISTS FOR THE LIVINGSTON

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AWARDS, WHICH HONOR OUTSTANDING ACHIEVEMENT BY JOURNALISTS UNDER THE AGE OF 35: ROBERT FATURECHI FOR HIS INVESTIGATION INTO A FAILED SUPER PAC; JEFF LARSON FOR HIS STORY REVEALING HOW U.S. MILITARY OFFICIALS USED CELL PHONES THAT WERE VULNERABLE TO HACKERS; MICHAEL GRABELL AND LENA GROEGER FOR THEIR PROJECT SHOWING HOW STATES HAVE DISMANTLED COMPENSATION FOR INJURED WORKERS; AND CEZARY PODKUL AND MARCELO ROCHABRUN FOR THEIR REPORTING ON NEW YORK CITY'S BROKEN RENT-STABILIZATION SYSTEM.

OUR NEWS APPLICATIONS AND DATA VISUALIZATIONS WON A HOST OF AWARDS, INCLUDING SOCIETY FOR NEWS DESIGN AWARDS OF EXCELLENCE FOR INFOGRAPHICS ON CRUISE SHIP SAFETY HAZARDS AND WORKERS' COMP, AS WELL AS FEATURES ON THE WATER CRISIS IN THE AMERICAN WEST AND MILITARY WASTE. THE MALOFIEJ INTERNATIONAL INFOGRAPHICS AWARDS ALSO BESTOWED BRONZE MEDALS FOR VISUAL REPORTING ON HEALTH DATA BREACHES AND OUR FACEBOOK VIDEO ON POLICE FAILURES TO STOP A SERIAL RAPIST IN THE NFL.

SEVERAL OF OUR ILLUSTRATIONS WERE HONORED BY AMERICAN ILLUSTRATION, SELECTED FOR THE ORGANIZATION'S ANNUAL SHOWCASE OF EXCELLENCE IN ILLUSTRATION. THEIR HARDCOVER COLLECTION OF WINNING IMAGES WILL FEATURE THREE ORIGINAL ILLUSTRATIONS FROM TWO PROPUBLICA INVESTIGATIONS: "THE NARCO-TERROR TRAP," WHICH RAISES QUESTIONS ABOUT ALLEGED CONNECTIONS BETWEEN DRUG TRAFFICKING AND TERRORISM, AND "DEALS, DEVILS AND THE DEA" ABOUT HOW THE DEA BROUGHT DOWN A VICIOUS MEXICAN DRUG CARTEL WITH AN UNSATISFYING AFTERMATH.

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



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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 DIRECTOR OF FINANCE & HUMAN RESOURCES 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 BOARD MEMBERS, OFFICERS, AND EMPLOYEES. EACH OF THE BOARD MEMBERS AND OFFICERS ARE REQUIRED SIGN TO 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 BOARD MEMBER 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 REASONABLE 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 BOARD MEMBER OR OFFICER WITH WHOM THE CONFLICT PERTAINS TO IS EXCLUDED FROM VOTING ON THE ISSUE. HE/SHE WILL LEAVE THE ROOM AND THE OTHER BOARD MEMBERS 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 BOARD MEMBER OR OFFICER HAS A CONFLICT OF INTEREST,

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THE MINUTES OF THE BOARD COMMITTEE MEETING WILL REFLECT THE BOARD'S DELIBERATIONS AND VOTING PROCESS.

IN CASE OF AN INTEREST PARTY WHO IS NOT A BOARD MEMBER 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 EMPLOYEE CANNOT PARTICIPATE IN THE DECISION MAKING OF THE CONFLICTED TRANSACTION.

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

SALARIES FOR THE CEOS, OFFICERS AND KEY EMPLOYEES 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 2012 CAPLIN & DRYSDALE UPDATED THE COMPENSATION STUDY FOR THREE KEY EMPLOYEES. CAPLIN & DRYSDALE STUDIED COMPENSATION OF SELECT NATIONAL NEWSPAPERS AND RELIED ON THEIR UNDERSTANDING OF PRO PUBLICA'S OPERATIONS AND STATUS IN THE FIELD OF JOURNALISM. THE BOARD ESTABLISHED COMPENSATION FOR THE CEO, OFFICERS AND KEY EMPLOYEES USING COMPARABLE DATA AND DETERMINED THAT THE SALARY IS REASONABLE. COMPARABLE DATA INCLUDES VARIETY OF INFORMATION FROM JOURNALISM OUTLETS AND OTHER NOT FOR PROFIT ORGANIZATIONS. APPROVED SALARY CHANGES ARE DOCUMENTED IN HUMAN RESOURCES FILES AND REQUIRE THE SIGNATURE OF BOTH THE EMPLOYEE AND THE EXECUTIVE CHAIRMAN. THE BOARD'S CONSIDERATION OF THIS MATTER ARE ALSO DOCUMENTED IN THE MINUTES OF THE EXECUTIVE SESSION. THIS PROCESS WAS LAST COMPLETED IN 2016.

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, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

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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 XII, LINE 2C:

PRO PUBLICA HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND FOR THE SELECTION OF AN INDEPENDENT ACCOUNTANT. THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.