EXTENDED TO NOVEMBER 15, 2023 Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

AF	or th	e 2022 calendar year, or tax year beginning and	ending		
B c	heck if pp l icab	le: C Name of organization	D Employer identifie	cation number	
	Addre	COMMITTEE TO PROTECT JOURNALISTS, INC.			
	Name			13-30815	00
	nitia		Room/suite	E Telephone number	r
]Final returr				5-1004
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	12,128,697.
	Amer returr	ded NEW YORK, NY 10018		H(a) Is this a group re	eturn
	Appli tion	F Name and address of principal officer: OODIE GINGDERG		for subordinates	? Yes X No
	pendi	^{ng} SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
11	ax-ex	empt status: 🔀 501(c)(3) 📃 501(c) () (insert no.) 🗌 4947(a)(1) (or 📃 527	If "No," attach a	list. See instructions
	Vebsi			H(c) Group exemptio	n number
		f organization: 🚺 Corporation 📄 Trust 📄 Association 📄 Other	L Year	of formation: 1981	A State of legal domicile: NY
Pa	art I	Summary			
đ	1	Briefly describe the organization's mission or most significant activities: TO Pl	ROMOTE	PRESS FREEI	MOC
uč.		WORLDWIDE AND DEFEND THE RIGHT OF JOURNAL	ISTS 1	O REPORT TH	E NEWS
Activities & Governance	2	Check this box if the organization discontinued its operations or dispos	sed of more	than 25% of its net ass	
ove	3			3	32
с З	4	Number of independent voting members of the governing body (Part VI, line 1b)		32	
es	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)		48	
<u>viti</u>	6	Total number of volunteers (estimate if necessary)		6	32
Acti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		<u>7a</u>	0.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>	7b	0.
				Prior Year	Current Year
ē	8	Contributions and grants (Part VIII, line 1h)		11,381,967.	9,654,602.
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		788,559.	661,559.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		16,950.	388,852.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		12,187,476.	10,705,013.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		345,718.	601,209.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		5,457,041.	5,698,495.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		80,000.	80,000.
ğ		Total fundraising expenses (Part IX, column (D), line 25) 1,389,95		4 201 716	
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		4,321,716.	5,195,767.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		10,204,475.	11,575,471.
	19	Revenue less expenses. Subtract line 18 from line 12		1,983,001.	-870,458.
IS OF			Be	ginning of Current Year	End of Year
Assets (Balanc		Total assets (Part X, line 16)	······	41,395,492.	37,742,019.
et A nd F	21	Total liabilities (Part X, line 26)	5,638,179.	5,500,501.	
Ž	22	Net assets or fund balances. Subtract line 21 from line 20		35,757,313.	32,241,518.
Pa	art II	Signature Block			

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

Sign Here	Signature of officer JODIE GINSBERG, PRESIDENT Type or print name and title	Lod Buinsberg (Nov 6, 2023 12:40 EST)	Date Nov 6, 2023				
Paid	Print/Type preparer's name MIKE SCHALL	Preparer's signature Mul Sul Date MIKE SCHALL 11/01	/23 Check PTIN if self-employed P02024184				
Preparer	Firm's name SAX LLP	· · · · · ·	Firm's EIN 81-2950760				
Use Only	Firm's address 1040 AVENUE OF TH	E AMERICAS-16TH FL					
	NEW YORK, NY 1001	8	Phone no.212-661-8640				
May the IRS discuss this return with the preparer shown above? See instructions							
	Form 990 (2022)						

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2022) COMMITTEE TO PROTECT JOURNALISTS, INC. 13-3081500 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE COMMITTEE TO PROTECT JOURNALISTS PROMOTES PRESS FREEDOM WORLDWIDE
	AND DEFENDS THE RIGHT OF JOURNALISTS TO REPORT THE NEWS SAFELY AND
	WITHOUT FEAR OF REPRISAL. CPJ ENSURES THE FREE FLOW OF NEWS AND COMMENTARY BY TAKING ACTION WHEREVER (CONTINUED ON SCHEDULE O)
2	Did the organization undertake any significant program services during the year which were not listed on the
2	
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
•	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 8,186,394. including grants of \$ 601,209.) (Revenue \$)
	SINCE 1981, CPJ HAS DEFENDED THE RIGHT OF JOURNALISTS TO REPORT THE
	NEWS SAFELY AND FREELY ALL OVER THE WORLD. OUR ORGANIZATION IS MADE UP
	OF JOURNALISTS AND ADVOCATES WHO USE JOURNALISM TO EXPOSE AND ADVOCATE
	ON A BROAD RANGE OF VIOLATIONS. WE FOCUS ON REDUCING THE NUMBER OF
	JOURNALISTS IN PRISON, FIGHTING AGAINST INJUSTICE, AND BATTLING
	CENSORSHIP AND REPRESSIVE LEGISLATION THAT GOVERNS OUR WORLD'S
	INCREASINGLY COMPLEX INFORMATION LANDSCAPE. WE DOCUMENT VIOLATIONS AND
	MEET WITH GOVERNMENT LEADERS TO PUSH FOR CHANGE, SECURE CONVICTIONS IN
	MURDERS, AND FREE JAILED JOURNALISTS. OUR REPORTING AND DOCUMENTATION INFORM AND EMPOWER OUR ADVOCACY. IN DOING SO, WE ENSURE ACCESS TO
	INFORM AND EMPOWER OUR ADVOCACI. IN DOING SO, WE ENSURE ACCESS TO INDEPENDENT INFORMATION THAT ENABLES ALL PEOPLE TO MAKE DECISIONS AND
	HOLD THE POWERFUL TO ACCOUNT.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
-10	(Code) (Lxpenses #) (nevenue #) (nevenue #)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 8,186,394.
	Form 990 (2022)
232002	12-13-22 PLOTE SCHEDULE O FOR CONTINUATION(S)

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Form	990	(2022)	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			<u></u>
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			<u></u>
	Schedule D, Part III	8		X X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		v	
	Part VI	11a	Х	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total		v	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	44.		x
4	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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	114		x
~	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11d 11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	<u> </u>		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	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? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	┣──
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? /f "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21		X

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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			37
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	<u>25a</u>		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	0.51		v
~~	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	0		x
07	controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i>	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? //			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
~ ~	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	04		x
25.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	358		
D	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 48			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	-		

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

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Pai	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)						
			Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	filed for the calendar year ending with or within the year covered by this return 2a 48	<u>1</u>					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	x			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?						
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X			
b	If "Yes," enter the name of the foreign country						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>		 			
6a							
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		X			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts						
	were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required						
	to file Form 8282?	7c		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the						
_	sponsoring organization have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.	_					
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:						
a	Initiation fees and capital contributions included on Part VIII, line 12	-					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-					
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders						
a		-					
D	Gross income from other sources. (Do not net amounts due or paid to other sources against						
100	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	100					
		<u>12a</u>					
		-					
13 a	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a					
а	Note: See the instructions for additional information the organization must report on Schedule O.	138					
b	Enter the amount of reserves the organization is required to maintain by the states in which the						
b	organization is licensed to issue qualified health plans						
с	Enter the amount of reserves on hand	-					
		14a		x			
		14b					
15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or						
10	excess parachute payment(s) during the year?	15		x			
	If "Yes," see the instructions and file Form 4720, Schedule N.						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x			
10	If "Yes," complete Form 4720, Schedule O.						
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities						
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17					
	If "Yes," complete Form 6069.						
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COMMITTEE TO PROTECT JOURNALISTS, INC.

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

Check if Schedule O contains a response or note to any line in this Part VI	 X
Section A. Governing Body and Management	

000	tion A. doverning body and Management					
		Ι.	32		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>	54			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		32			
	Enter the number of voting members included on line 1a, above, who are independent	1b	•			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship			•		Х
~	officer, director, trustee, or key employee?			2		
3	Did the organization delegate control over management duties customarily performed by or under the			~		х
			a filod0	3 4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4 5		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5 6		X
6	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or ap			0		
7a				70		х
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, si			7a		
b				7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			70		21
-				8a	Х	
a b				oa 8b	X	
ь 9	Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea			00	- 23	
9	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re			9		21
000	tion Bin onoices (This Section B requests information about policies not required by the internal Re	evenue	Code.)		Yes	No
10-2	Did the organization have local chapters, branches, or affiliates?			10a	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such ch			104		
D.		•	, anniatos,	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod			11a	х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	y 00101		110		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Y			12.0		
Ŭ	on Schedule O how this was done	,		12c	х	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approva					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent w	ith a			
	taxable entity during the year?			16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its p	articipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	-				
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed NY					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	nd 990	-T (section 501(c)(3)s	only)	availat	ble
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain	n on Sc	hedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	financ	cial	
	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 boo JODIE GINSBERG - (212) 465-1004	oks and	d records			
	509 WEST 38TH STREET, NEW YORK, NY 10018					
232006	12-13-22 Public Disclosure Conv			Form	990	(2022)

Form 990 (2022)	COMMITTEE	TO PROTECT	JOURNALISTS,	INC.	13-3081500	Page 7				
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated										
Employees, and Independent Contractors										
Check if Schedule O contains a response or note to any line in this Part VII										
Section A. Officers, Dir	ectors, Trustees, Key Em	ployees, and Highe	st Compensated Employ	yees						
 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. 										

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

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

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

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

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

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

(A)	(B) (C)							(D)	(E)	(F)
Name and title	Average	(do	not cł	Pos	ition		ne	Reportable	Reportable	Estimated
	hours per	box	, unles cer an	ss per	rson i	s both	an	compensation	compensation	amount of
	week		cer an	aaa	recto	r/trus	.ee)	from	from related	other
	(list any	individual trustee or director						the	organizations	compensation
	hours for related	e or d	fee			sated		organization (W-2/1099-M I SC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ustee	trust		ee	npens		1099-NEC)	1099-NEC)	and related
	below	dual t	utiona	L	nploy	st cor iyee	я	1000 NEO,		organizations
	line)	ndivi	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			- · J · · · · · · · · · · · · · · · · ·
(1) ROBERT MAHONEY	40.00									
DIRECTOR OF SPECIAL PROJECTS					Х			249,921.	0.	38,217.
(2) JOHN D. WEIS	40.00									
SEC'Y/DIR. DEV.				Х				209,535.	0.	37,464.
(3) JODIE GINSBERG	40.00									
PRESIDENT		1		х				212,814.	Ο.	26,374.
(4) HILDA ROMERO	40.00									
DIRECTOR OF FINANCE		1		х				183,719.	Ο.	41,567.
(5) ARLENE GETZ	40.00									
EDITORIAL DIRECTOR		1				X		170,013.	Ο.	24,621.
(6) GYPSY GULLEN KAISER	40.00									
DIRECTOR OF COMMUNICATIONS & ADVOCAC						X		156,174.	0.	31,422.
(7) CARLOS MARTINEZ DE LA SERNA	40.00									
PROGRAM DIRECTOR						Х		147,584.	0.	38,688.
(8) MARGARET ABAM-DEPASS	40.00									
DEPUTY DIR OF FIN						Х		129,631.	0.	40,696.
(9) MICHELE LOUHISDON	40.00									
HR DIRECTOR						Х		145,239.	0.	20,652.
(10) JOEL SIMON	40.00									
EXECUTIVE DIR.				Х				130,768.	0.	9,154.
(11) KATHLEEN CARROLL	5.00									
CHAIR		Х		Х				0.	0.	0.
(12) JACOB WEISBERG	1.00									
VICE CHAIR		Х		Х				0.	0.	0.
(13) DIANE BRAYTON	1.00									
TREASURER		Х		Х				0.	0.	0.
(14) STEPHEN J. ADLER	1.00									
DIRECTOR		Х						0.	0.	0.
(15) ANDREW ALEXANDER	1.00									
DIRECTOR		Х						0.	0.	0.
(16) ALAN RUSBRIDGER	1.00									
DIRECTOR		Х						0.	0.	0.
(17) AMANDA BENNETT	1.00							_	_	
DIRECTOR		Х						0.	0.	0.
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	TO PRO	TE	СТ	J	OUF	RNA	۱L	ISTS, INC.	13-308	1500	Page 8	
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A)	(B)			(C				(D)	(E)	1 ((F)	
Name and title	Average	(do		Posit	tion nore th		~	Reportable	Reportable	Esti	mated	
	hours per	box	, unles	ss pers	son is b	both a	an	compensation	compensation	amo	ount of	
	week		cer an	d a dir	rector/t	truste	e)	from	from related		ther	
	(list any hours for	irecto						the	organizations		ensation	
	related	e or di	tee		catad	sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)		m the nization	
	organizations	ruste(trus		66	npen		1099-NEC)	1033-1120)	-	related	
	below	Individual trustee or director	Institutional trustee	_	Key employee	st col	J.				izations	
	line)	Indivi	Instit	Officer	Key el Hinhe	Highest compensated employee	Former					
(18) MATTHEW WINKLER	1.00											
DIRECTOR		X						0.	0	•	Ο.	
(19) SUSAN CHIRA	1.00											
DIRECTOR		x						0.	0		Ο.	
(20) SHEILA CORONEL 1.00												
DIRECTOR X O.											Ο.	
(21) ANNE GARRELS 1.00												
DIRECTOR		x						0.	0		0.	
(22) CHERYL GOULD	1.00											
DIRECTOR		x						0.	0		Ο.	
(23) LESTER HOLT	1.00											
DIRECTOR		x						0.	0		Ο.	
(24) JONATHAN KLEIN	1.00									-		
DIRECTOR		x						0.	0		Ο.	
(25) JANE KRAMER	1.00											
DIRECTOR		x						0.	0		Ο.	
(26) ISAAC LEE	1.00									-		
DIRECTOR		x						0.	0		Ο.	
1b Subtotal								1,735,398.	0		,855.	
c Total from continuation sheets to Part VI								0.	0		0.	
<u>d</u> Total (add lines 1b and 1c)								1,735,398.	0		,855.	
2 Total number of individuals (including but no							re				<u>,</u>	
compensation from the organization		000	1010	a ab	0.0)						10	
compendation non the organization										۲	es No	
3 Did the organization list any former officer,	director trust	ee k	ev e	mplo	ovee	or h	niał	hest compensated emp	ovee on			
line 1a? If "Yes," complete Schedule J for su			-	•			-			3	x	
4 For any individual listed on line 1a, is the su	m of reportabl	 e co	mpe	ensat	ion a	and c	oth	er compensation from t	he organization			
and related organizations greater than \$150	-								-	4	x	
5 Did any person listed on line 1a receive or a	,											
rendered to the organization? If "Yes." com	-				-			-		5	x	
Section B. Independent Contractors		501	<u> </u>	<u>ch p</u>	1301	11						
1 Complete this table for your five highest cor	npensated ind	lepe	nder	nt co	ntrac	ctors	th	at received more than §	S100.000 of compen	sation from		
the organization. Report compensation for t	-											
(A)	<u> </u>			3			Ť	(B)		(C)		
Name and business	address							Description of s	services	Compens		
HP RISK MANAGEMENT, SALCO	T LODGE	W	OR'	тну	Z							
RD, WINCHESTER, HAMPSHIRE							F	RISK MANAGEM	ENT	304	,874.	
SAFEGUARD WORLD INTERNATI							T				<u>/ - · _ ·</u>	
24-25 EDWIN FODEN BUSINES							F	REPRESENTATI	VE	231	,204.	
GLASSHOUSE, 660 12TH AVEN					JEW	7	T				<u>, </u>	
YORK, NY 10019			- /	, -		•	b	IPFA VENUE		172	,815.	
WESTEND STRATEGY, 2401 PE	NNSYLVA	NT	A	AVF	RNU	IE	_	MEDIA RELATI	ONSHIP		<u>,</u>	
NORTHWEST SUITE 410, WASH						-	- L	CONTRACTOR		165	,565.	
FAIRDINKIUM, 15 EAST 32 S				OR .			Ť				<u>,</u>	
NEW YORK, NY 10016	,	-		,			k	CONSULTANT		165	,015.	
2 Total number of independent contractors (ir	nc l uding but p	ot lin	nited	to ti	hose	liste			ore than		, • •	
\$100,000 of compensation from the organiz	-				11							
SEE PART VII, SECTION		IN	UΑ			SH	E	ETS		Form 9	90 (2022)	
		_	-	-							- (-0)	
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								ISTS, INC.		1500
Part VII Section A. Officers, Directors, Tr		nplo	yee			lighe	est (
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours	(C	neck	all t	that	app	y)	compensation	compensation	amount of
	per week					a		from the	from related organizations	other compensation
	(list any	tor				ploye		organization	(W-2/1099-MISC)	from the
	hours for	direc				ed em		(W-2/1099-MISC)	(W 2/1000 MICC)	organization
	related	tee or	ustee			ensate				and related
	organizations	trus.	nal tri		oyee	omp(organizations
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
	line)	Ind	Ins	Offi	Key	Hig	For			
(27) REBECCA MACKINNON	1.00								0	0
DIRECTOR	1 0 0	X						0.	0.	0.
(28) KATI MARTON	1.00	x						0.	0.	0.
DIRECTOR (29) MICHAEL MASSING	1.00	<u>^</u>						U .	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(30) GERALDINE FABRIKANT METZ	1.00				-			0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(31) MATT MURRAY	1.00							``		<u> </u>
DIRECTOR	100	x						0.	0.	0.
(32) VICTOR NAVASKY	1.00									
DIRECTOR		x						0.	Ο.	Ο.
(33) CLARENCE PAGE	1.00									
DIRECTOR		x						0.	0.	0.
(34) NORMAN PEARLSTINE	1.00									
DIRECTOR		X						0.	Ο.	0.
(35) LYDIA POLGREEN	1.00									
DIRECTOR		Х						0.	0.	0.
(36) AHMED RASHID	1.00									
DIRECTOR		Х						0.	0.	0.
(37) KAREN AMANDA TOULON	1.00									
DIRECTOR	1.00	X						0.	0.	0.
(38) DARREN WALKER	1.00									
DIRECTOR	1 00	X						0.	0.	0.
(39) ROGER WIDMANN	1.00								0	•
DIRECTOR	1 0 0	X						0.	0.	0.
(40) DAVID REMNICK DIRECTOR	1.00	x						0.	0.	0
(41) MARIA TERESA RONDEROS	1.00	<u>^</u>						U.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(42) JON WILLIAMS	1.00							0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(43) NIKA SOON-SHIONG	1.00				-			0.		<u> </u>
DIRECTOR		x						0.	0.	0.
		<u> </u>							.	
		1								
Total to Part VII, Section A, line 1c		<u></u>								

				то	PROTECT	JOURNALISTS	S, INC.	13-3081	500 Page 9
Pa	rt \	/11	Statement of Revenue						
			Check if Schedule O contains a res	sponse	or note to any l in				
						(A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
						Total revenue	function revenue	business revenue	from tax under
				-					sections 512 - 514
nts nts	1		Federated campaigns1						
Gra			Membership dues1						
ts, (Am			Fundraising events1		1,370,875.				
Giff Ilar			Related organizations1						
ns,			Government grants (contributions)	e					
er		f	All other contributions, gifts, grants, and		0 000 505				
-ie			similar amounts not included above	_	8,283,727.				
Contributions, Gifts, Grants and Other Similar Amounts		-		g \$		0 654 600			
<u>0</u>		h	Total. Add lines 1a-1f		Business Code	9,654,602.			
	_				Business Code				
ice	2	a							
ue v		b							
ven S Ven		С							
Bei		d							
Program Service Revenue		e 4	All other program service revenue						
-			Total. Add lines 2a-2f						
	3		Investment income (including dividend						
	Ŭ					661,782.			661,782.
	4		Income from investment of tax-exempt			, -			, .
	5		Royalties						
	Ŭ			ea	(ii) Personal				
	6	а	Gross rents						
	•		Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Net rental income or (loss)						
	7		Gross amount from sales of (i) Sec		(ii) Other				
				9,304.					
		b	Less: cost or other basis						
e			and sales expenses	9,527.					
venue		с	Gain or (loss)	-223.					
			Net gain or (loss)	<u></u>		-223.			-223.
Other Re	8	а	Gross income from fundraising events (not						
đ			including \$1,370,875. o	f					
			contributions reported on line 1c). See						
			Part IV, line 18	<u>8a</u>	604,157.				
		b	Less: direct expenses	8b	604,157.				
			Net income or (loss) from fundraising e			0.			
	9	а	Gross income from gaming activities. S						
			Part IV, line 19						
			Less: direct expenses						
			Net income or (loss) from gaming activ	ties	 T				
	10	а	Gross sales of inventory, less returns						
			and allowances						
			Less: cost of goods sold						
		С	Net income or (loss) from sales of inver	ntory					
S	.		MISCELLANEOUS INCOME		Business Code	300 050			300 050
ne ol	11					388,852.			388,852.
scellaneo Revenue		b							
Miscellaneous Revenue		с С	All other revenue						
Σ			All other revenue		L	388,852.			
	10		Total. Add lines 11a-11d			10,705,013.	0.	0.	1050411.
	12		Total revenue. See instructions		. D:		<u> </u>	J. J.	Eorm 990 (2022)

70, 1	50, 90, and 100 of Fart VIII.		expenses [general expenses	expenses
1	Grants and other assistance to domestic organizations				
~	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
~	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	601,209.	601,209.		
4	Benefits paid to or for members	001,205.	001,205.		
4 5	Compensation of current officers, directors,				
5	trustees, and key employees	1,290,564.	589,131.	328,484.	372,949
6	Compensation not included above to disqualified	1,250,5040		520,4040	572,545
Ŭ	persons (as defined under section $4958(f)(1)$) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	3,269,680.	2,670,555.	350,273.	248,852
8	Pension plan accruals and contributions (include	5,205,0000	2707070000		210,002
0	section 401(k) and 403(b) employer contributions)	171,248.	129,963.	33,965.	7.320
9	Other employee benefits	657,666.	483,141.	114,262.	7,320
10	Payroll taxes	309,337.	213,121.	60,478.	35,738
11	Fees for services (nonemployees):		,		
a	Management				
b	Legal				
	Accounting				
	Lobbying				
e	Professional fundraising services. See Part IV, line 17	80,000.			80,000
f	Investment management fees	73,762.		73,762.	
g	Other. (If line 11g amount exceeds 10% of line 25,			,	
3	column (A), amount, list line 11g expenses on Sch O.)	3,131,283.	2,415,298.	569,270.	146,715
12	Advertising and promotion				
13	Office expenses	235,305.	85,935.	50,872.	98,498
14	Information technology	112,495.	77,383.	15,389.	19,723
15	Royalties				
16	Occupancy	263,852.	184,886.	49,890.	29,076
17	Travel	339,142.	212,403.	48,094.	78,645
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	143,196.		143,196.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	480,441.	343,666.	81,375.	55,400
23	Insurance	89,306.	65,926.	12,753.	10,627
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	OTHER	179,472.	95,617.	64,226.	19,629
b	POSTAGE	90,463.	11,419.	1,767.	77,277
с	FEES	57,050.	6,741.	1,065.	49,244
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	11,575,471.	8,186,394.	1,999,121.	1,389,956
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)				

COMMITTEE TO PROTECT JOURNALISTS, INC. Form 990 (2022) Part IX Statement of Functional Expenses

(A) Total expenses

(B) Program service expenses

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

Page 10 13-3081500

(C) Management and general expenses

(D) Fundraising expenses

X

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

Do not include amounts reported on lines 6b,

7b, 8b, 9b, and 10b of Part VIII.

COMMITTEE	то	PROTECT	JOURNALISTS,	INC.	
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	1 990 () rt X	2022) COMMITTEE TO PROTECT JOURNALIST Balance Sheet	TS, INC.	13-	3081500 Page 11
		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	3,044,829.	1	3,029,327.
	2	Savings and temporary cash investments	4,167,064.	2	3,789,673.
	3	Pledges and grants receivable, net	3,087,652.	3	1,419,362.
	4	Accounts receivable, net		4	432,731.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
Ŋ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ä	9	Prepaid expenses and deferred charges	224,738.	9	71,130.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 14,559,905.			
	b	Less: accumulated depreciation 10b 1,535,598.	13,477,098.	10c	13,024,307.
	11	Investments - publicly traded securities	13,909,886.	11	12,501,316
	12	Investments - other securities. See Part IV, line 11	3,484,225.	12	3,474,173
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	41,395,492.	16	37,742,019
	17	Accounts payable and accrued expenses	615,697.	17	622,617.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ŝ	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
abi		controlled entity or family member of any of these persons		22	
3	23	Secured mortgages and notes payable to unrelated third parties	5,022,482.	23	4,877,884
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	5,638,179.	26	5,500,501.
		Organizations that follow FASB ASC 958, check here			
š		and complete lines 27, 28, 32, and 33.	1 - 0 0 0 0 0		
llan	27	Net assets without donor restrictions	15,803,094.	27	15,465,492.
Ba	28	Net assets with donor restrictions	19,954,219.	28	16,776,026.
oun		Organizations that do not follow FASB ASC 958, check here			
ř		and complete lines 29 through 33.			
ts c	29	Capital stock or trust principal, or current funds		29	
sse	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
Ne	32	Total net assets or fund balances	35,757,313.	32	32,241,518.
	33	Total liabilities and net assets/fund balances	41,395,492.	33	37,742,019.

Form 990 (2022)

Form	1 990 (2022) COMMITTEE TO PROTECT JOURNALISTS, INC.	13-3	081500	Pa	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,70		
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,57		
3	Revenue less expenses. Subtract line 2 from line 1	3	-87		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	35,75		
5	Net unrealized gains (losses) on investments	5	-2,64	<u>5,3</u>	<u>37.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	32,24	1,5	<u>18.</u>
Pa	rt 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: 🗌 Cash 🛛 🗶 Accrual 📃 Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	э О .			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b					1 -
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2022)

SCHE	DULE A		Dublic Obe						OMB No. 1545-0047
(Form 9	90)		Public Cha	つつつつ					
				ization is a section 501 17(a)(1) nonexempt cha			or a section		2022
	of the Treasury		At	tach to Form 990 or Fo	rm 990-E	Z.			Open to Public
Internal Reve			Go to www.irs.gov/	Form990 for instructior	ns and the	latest inf	ormation.		Inspection
Name of	the organization						-		identification number
Part	Beason f	COMM	<u>TTTEE TO P</u>	ROTECT JOURNA (All organizations must c		5, LNC			3-3081500
							ee instruction	s.	
Ē.		•		For lines 1 through 12, cl		,			
				n of churches described		on 170(b)(1	1)(A)(I).		
2				Attach Schedule E (Form			::		
3	•	•		nization described in se njunction with a hospital				Viii) Entor	the bospital's name
4	city, and state	-	ation operated in col		described	in sectio		Min). Enter	ine nospital s name,
5	•		or the benefit of a col	lege or university owned	or operate	ed by a go	vernmentalu	nit describe	ed in
•	-		Complete Part II.)						-
6				nental unit described in	section 17	70(b)(1)(A)	(v).		
7 X				ntial part of its support fr				ne general p	oublic described in
	section 170(I)(1)(A)(vi). (C	omplete Part II.)						
8	A community	trust describe	ed in section 170(b)	1)(A)(vi). (Complete Par	t II.)				
9	An agricultura	al research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college
	or university o	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or
	university:								
10	-			than 33 1/3% of its supp					
			•	t to certain exceptions; a	• •				-
				(less section 511 tax) fro	m busines	sses acqui	red by the org	janization a	fter June 30, 1975.
			mplete Part III.)	volute test for public est	fatu Caa	a a ati a m E(O(-)(4)		
11 <u>1</u> 12 <u>1</u>	•	•	•	vely to test for public sat				rny out the	ourpages of one or
	•	•	•	vely for the benefit of, to d in section 509(a)(1) o					•
			-	f supporting organization					Sheek the box off
a	-	•		upervised, or controlled				•	aivina
-			•	gularly appoint or elect a		•			
		•	complete Part IV, Se		, ,				
b			-	or controlled in connect	ion with it:	s supporte	ed organizatio	n(s), by hav	ing
	control or n	nanagement o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	orted
	organizatio	n(s). You mus	t complete Part IV,	Sections A and C.					
c 🗌	Type III fur	ctionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functional	ly integrate	d with,
	_ its supporte	ed organizatio	n(s) (see instructions)). You must complete I	Part IV, Se	ctions A,	D, and E.		
d 🗌		-	• •	orting organization oper					
		-	•	ation generally must sat	•		•	an attentiv	reness
_	- ·		,	nplete Part IV, Sections					
e		0		vritten determination fro			lype I, lype	II, Type III	
f Ent	-	•		nally integrated supporti	• •	ation.			
	er the number of wide the followi		about the supporte	d organization(s)					
	(i) Name of suppo		(ii) EIN	(iii) Type of organization	(iv) i s the orga in your governi	anization listed	(v) Amount o	fmonetary	(vi) Amount of other
	organization			(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)

Schedule A (Form 990) 2022 COMMITTEE TO PROTECT JOURNALISTS, INC. 13-3081500 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	8863648.	10465241.	17192207.	11381967.	9654602.	57557665.				
2	Tax revenues levied for the organ-										
	ization's benefit and either paid to										
	or expended on its behalf										
3	The value of services or facilities										
	furnished by a governmental unit to										
	the organization without charge										
4	Total. Add lines 1 through 3	8863648.	10465241.	17192207.	11381967.	9654602.	57557665.				
	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)						9222396.				
~							48335269.				
	Public support. Subtract line 5 from line 4.						40333209.				
		(-) 0010	(1-) 0010	(-) 0000	(-1) 0001	(-) 0000	(f) Tatal				
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c)2020 17192207.	(d) 2021	(e) 2022	(f) ⊺otal 57557665 •				
	Amounts from line 4	0003040.	10405241.	1/19220/.	11301907.	9054002.	57557665.				
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,	400 004	CO4 010	615 000			2110610				
	and income from similar sources \dots	429,204.	624,710.	615,382.	788,559.	661,762.	3119617.				
9	Net income from unrelated business										
	activities, whether or not the										
	business is regularly carried on										
10	Other income. Do not include gain										
	or loss from the sale of capital										
	assets (Explain in Part VI.)	4,775.	1,331.	36,655.	16,950.		448,563.				
11	Total support. Add lines 7 through 10						61125845.				
12	Gross receipts from related activities,	etc. (see instructio	ons)			12					
13	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3)					
	organization, check this box and stor	here									
Sec	ction C. Computation of Publi	c Support Per	centage								
	Public support percentage for 2022 (I			column (f))		14	79.08 %				
15	Public support percentage from 2021	Schedule A, Part	II, l ine 14			15	77.10 %				
	33 1/3% support test - 2022. If the c					ore, check this bo	x and				
	stop here. The organization qualifies	as a publicly supp	orted organization				X				
b	33 1/3% support test - 2021. If the o	organization did no	ot check a box on l								
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation							
17a	and stop here. The organization qualifies as a publicly supported organization										
	and if the organization meets the fact										
	meets the facts-and-circumstances te			•							
h	10% -facts-and-circumstances test	•			•						
	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the										
	organization meets the facts-and-circu										
19	Private foundation. If the organizatio										
18	i mate roundation. It the organizatio	and not critter d		a, 100, 17a, 01 17k	, oncon this box d		S				

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022				JOURNALISTS,	INC.	13-3081500	Page 3
Part III Support Schedule for	or Organizations	Des	cribed in Se	ection 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	<u></u>					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
	(-) 0010	(1-) 0010	(-) 0000	(-1) 0001	(-) 0000	(f) Tatal
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6 10a Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties,						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b					-	
11 Net income from unrelated business activities not included on line 10b,						
whether or not the business is						
regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the	ne organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) orgar	ization,
check this box and stop here						
Section C. Computation of Publ	ic Support Per	rcentage				
15 Public support percentage for 2022 (co l umn (f))		15	%
16 Public support percentage from 202					16	%
Section D. Computation of Inves						
17 Investment income percentage for 2					17	%
18 Investment income percentage from	2021 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2022. If the	organization did r	not check the box	on line 14, and line	e 15 is more than a	33 1/3%, and I	ine 17 is not
more than 33 1/3%, check this box a	nd stop here. The	organization qua l i	fies as a publicly s	supported organization	ation	
b 33 1/3% support tests - 2021. If the	organization did r	not check a box on	line 14 or line 19a	a, and l ine 16 is m	ore than 33 1/3	3%, and
line 18 is not more than 33 1/3%, che	ck this box and s	top here. The orga	nization qualifies a	as a publicly supp	orted organiza	tion
20 Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check th	nis box and see in	structions	

7

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

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Yes

1

2

За

Зb

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

No

Schedule A (Form 990) 2022 COMMITTEE TO PROTECT JOURNALISTS, INC. 13-3081500 Page 5

-		capporting organizations (continued)			
				Yes	No
11	Has t	he organization accepted a gift or contribution from any of the following persons?			
а	A per	son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c b	elow, the governing body of a supported organization?	11a		
b	A fan	nily member of a person described on line 11a above?	11b		
c	A 359	% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
		in Part VI.	11c		
Sec	ction	B. Type I Supporting Organizations			
				Yes	No
1	more direct effect	the governing body, members of the governing body, officers acting in their official capacity, or membership of one or supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, tors, or trustees at all times during the tax year? <i>If "No," describe in</i> Part VI <i>how the supported organization(s)</i> tively operated, supervised, or controlled the organization's activities. <i>If the organization had more than one supported</i> <i>hization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i>			
	•	orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		ne organization operate for the benefit of any supported organization other than the supported			
	orgar	ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised, or controlled the supporting organization.	2	
Section C. Type II Supporting Organizations		
		Yes

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Section D	. All Typ	e III Supporting	Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	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 Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year	(see instructions).
•		(000 1110 a ao ao 110)

- a ____ The organization satisfied the Activities Test. *Complete* line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с		The organization supported a g	overnmental entity.	Describe in Part VI how	vou supported a government	al entity (see instructions).
---	--	--------------------------------	---------------------	-------------------------	----------------------------	-------------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a 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? *If* "Yes" or "*No*" *provide details in* **Part VI.**
- **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* **Part VI** *the role played by the organization in this regard.*

Yes No

No

1

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Schedule A (Form 990) 2022

_	dule A (Form 990) 2022 COMMITTEE TO PROTECT J			3-3081500 Page 6
Pa				
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	lov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optiona l)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	inization (see

instructions).

Schedule A (Form 990) 2022

COMMIT	ΓEE	то	PROTECT	JOU	JRNAL	JIS	TS,	INC.	13-30	081500	Pag
			1 1 1 2 2		-						

Sche Pai		PROTECT JOURNAI (a)(3) Supporting Orga	ISTS, INC. nizations (continu	<u>1</u> /ed)	3-3081500 Page 7
Sect	on D - Distributions		•		Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	ıs	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
-	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
-	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

Schedule A	(Form 990) 2022	COMMITTEE	TO PROTECT	JOURNALISTS	. INC. 1	3-3081500 p	Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D, I Section D, lines 5, 6, and 6 (See instructions.)	nation. Provide th 2, 3b, 3c, 4b, 4c, 5a lines 2 and 3; Part IV,	e explanations requ , 6, 9a, 9b, 9c, 11a, Section E, lines 1c	ired by Part II, line 10; Pa 11b, and 11c; Part IV, Se , 2a, 2b, 3a, and 3b; Part	rt II, line 17a or 17b otion B, lines 1 and V, line 1; Part V, Se	; Part III, line 12; 2; Part IV, Section C ction B, line 1e; Part V	,

Schedule A

13-3081500

2022

** Do Not File ** *** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
KLARMAN FAMILY FDN.	1,350,000.	127,483.
KNIGHT FOUNDATION	4,740,015.	3,517,498.
LEON LEVY FOUNDATION	2,000,000.	777,483.
OPEN SOCIETY INSTITU	2,775,000.	1,552,483.
SOMELAND FOUNDATION	1,300,000.	77,483.
THE FORD FOUNDATION	4,000,000.	2,777,483.
THOMSON REUTERS	1,615,000.	392,483.
Total Excess Contributions to Schedule A, Part II, Line 5		9,222,396.

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

2022

Employer identification number

6		
	COMMITTEE TO PROTECT JOURNALISTS, INC.	13-3081500
Organization type (che	eck one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	

501(c)(3) taxable private foundation

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

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

General Rule

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

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

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

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

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

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

me of organiza	ation	Emp	loyer identification numbe
ን MMTጥጥ ፑ ፑ	E TO PROTECT JOURNALISTS, INC.	1	3-3081500
	ntributors (see instructions). Use duplicate copies of Part I in	· · · · ·	5 5001500
			(.))
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1		\$1,665,015.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$200,000.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$275,000.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u>4</u>		\$550,000.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$275,000.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Nanit, auu 533, anu ZIF + 4		
<u> 6 </u>		\$675,000.	Person X Payroll Image: Complete Part II for

lame of or	rganization		Employer identification number
OMMI	TTEE TO PROTECT JOURNALISTS, INC.		13-3081500
Part I	Contributors (see instructions). Use duplicate copies of Part I if add	litional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
7		\$250,0	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
8		\$426,6	Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
9		\$418,2	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
		\$	Person Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Part II	Noncash Property (see instructions). Use duplicate copies of Part	Il if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
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		\$	
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		\$	
223453 11-15-	Public Disclosu	re Copy	Schedule B (Form 990) (2022

COMMITTEE TO PROTECT JOURNALISTS, INC.

Name of organization

Employer identification number

13-3081500

COMMITTEE TO PROTECT JOURNALISTS, INC. 13-3081500 PartI Exclusively religious, duritable, etc., contributions to contributions to construction is based to 2010(x)? (b) or 100 that bail more based \$1000 for they are manufactors. Some contribution, etc., contributions to contribution is to construct and \$1000 for the total more based \$1000 for they are manufactors. Some contribution is a constructed \$1000 fees for the set. Substrates		B (Form 990) (2022)			Page 4
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Image: Constraint of transferee's name, address, and ZIP + 4 Relationship of transferor to transferee Image: Constraint of transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part 1 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Image: Constraint of transferee's name, address, and ZIP + 4 Relationship of transferor to transferee Image: Constraint of transferor to transferee Image: Constraint of transferee's name, address, and ZIP + 4 Relationship of transferor to transferee Image: Constraint of transferee Image: Constraint of transferee's name, address, and ZIP + 4 Relationship of transferor to transferee Image: Constraint of transferee Image: Constraint of transferee's name, address, and ZIP + 4 Relationship of transferor to transferee Image: Constraint of transferee	-		(a) Transfor of gif	•	
(a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				·	
from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held	-	Transferee's name, address, a	nd ZIP + 4	Relationship of	f transferor to transferee
from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held					
from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held					
from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held	(a) No.				
Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee	from	(b) Purpose of gift	(c) Use of gift	(d) [Description of how gift is held
Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee			<u></u>		
Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
	Γ		(e) Transfer of gif	t	
		Transferee's name, address, a	nd ZIP + 4	Relationship of	f transferor to transferee
	F				
223454 11-15-22 Public Disclosure Copy Schedule B (Form 990) (2)	223454 11-15-	-22 Dub	lic Disclosuro	Conv	Schedule B (Form 990) (2022)

60	HEDULE D	Supplementa	I Financial	Statements	OMB No. 1545-0047
	n 990)	Complete if the organ			2022
•	•	Part IV, line 6, 7, 8, 9, 10,	, 11a, 11b, 11c, 11d ttach to Form 990.	, 11e, 11f, 12a, or 12b.	Open to Public
	tment of the Treasury I Revenue Service	Go to www.irs.gov/Form990		nd the latest information.	Inspection
Nam	e of the organizati	on COMMITTEE TO PROTEC	T JOURNAL	STS, INC.	Employer identification number 13-3081500
Pa	rt I Organiza	ations Maintaining Donor Advised			
	organizatio	n answered "Yes" on Form 990, Part IV, line	ə 6.		·
			(a) Donor ad	vised funds	(b) Funds and other accounts
1	Total number at e	nd of year			
2	Aggregate value o	f contributions to (during year)			
3	Aggregate value o	f grants from (during year)			
4	Aggregate value a	t end of year			
5	Did the organization	on inform all donors and donor advisors in v	vriting that the asset	s he l d in donor advised fun	ds
	are the organization	on's property, subject to the organization's e	exclusive legal contr	ol?	Yes No
6	Did the organization	on inform all grantees, donors, and donor a	dvisors in writing tha	t grant funds can be used c	only
	for charitable purp	ooses and not for the benefit of the donor or	,		·
_	impermissible priv				
Pa	rt II Conserv	ation Easements. Complete if the org	anization answered	"Yes" on Form 990, Part IV	/, line 7.
1	Preservation	servation easements held by the organization of land for public use (for example, recreat of natural habitat of open space		Preservation of a hist	orically important land area iified historic structure
2		through 2d if the organization held a qualifi	ied conservation cor	tribution in the form of a co	onservation easement on the last
2	day of the tax yea		ed conservation cor		Held at the End of the Tax Year
а					2a
b					2b
c	•	vation easements on a certified historic stru			2c
d		vation easements included in (c) acquired a			
		· · · · · · · · · · · · · · · · · · ·			2d
3		vation easements modified, transferred, rela			
-	year	,,			
4	-	where property subject to conservation eas	ement is located		
5	Does the organiza	tion have a written policy regarding the peri	odic monitoring, ins	pection, handling of	
	violations, and enf	orcement of the conservation easements it	holds?		
6	Staff and voluntee	r hours devoted to monitoring, inspecting, I			
7	Amount of expens	es incurred in monitoring, inspecting, hand	ling of vio l ations, and	d enforcing conservation ea	asements during the year
8	Does each conser and section 170(h	vation easement reported on line 2(d) above)(4)(B)(ii)?			
9	In Part XIII, descril	be how the organization reports conservation	on easements in its r	evenue and expense staten	nent and
	balance sheet, and	d include, if applicable, the text of the footn	ote to the organizati	on's financial statements th	at describes the
-		ounting for conservation easements.			
Pa		ations Maintaining Collections of		Freasures, or Other S	Similar Assets.
	Comp l ete i	f the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization	elected, as permitted under FASB ASC 958	3, not to report in its	revenue statement and bal	ance sheet works
	of art, historical tre	easures, or other similar assets held for pub	lic exhibition, educa	tion, or research in furthera	nce of public

service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

232051 09-01-22

b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance shee	t works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public	ublic service,
	provide the following amounts relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1	\$

LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule D (Form 990) 2022
b	Assets included in Form 990, Part X	\$
а	Revenue included on Form 990, Part VIII, line 1	\$
	the following amounts required to be reported under FASB ASC 958 relating to these items:	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provid	e
	(ii) Assets included in Form 990, Part X	\$
		Ψ

	dule D (Form 990) 2022 COMMITT: t III Organizations Maintaining C	EE TO PROTE ollections of Art	CT JOURNA	LISTS, 1 asures.or	INC . Other S		308150 ets (conti	
3	Using the organization's acquisition, accessi							nueu)
5	collection items (check all that apply):		s, check any of the i	ollowing that i	nake sign	incant use of	11.5	
~	Public exhibition	d		hange progran	n			
a h	Scholarly research	e		nange progran				
b	Preservation for future generations	e						
c 4	-	lastions and synlain	how that further th	o organization	'a avamat	t nurnana in F	ort VIII	
4	Provide a description of the organization's co	•	•	•			art All.	
5	During the year, did the organization solicit o to be sold to raise funds rather than to be ma						Vee	
Par	t IV Escrow and Custodial Arran						V line 0 or	No No
1 0	reported an amount on Form 990, Par		te il the organizatio	n answered i	es on FC	onn 990, Pan	IV, line 9, or	
10	Is the organization an agent, trustee, custodi		on for contribution	or other and	to not ino	udad		
Id			-				Yes	No
Ь	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII							
u			owing table.				Amoun	nt
	Beginning balance					10	, arroan	
	Additions during the year					1d		
_	Distributions during the year					1e		
f	Ending balance							
	Did the organization include an amount on Fe				-		Yes	No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete i							
1 41		(a) Current year	(b) Prior year	(c) Two years) Three years ba	ack (a) Fou	r years back
4-	Designing of year belongs	17,343,197.	14,389,921.	., ,		12,433,22		,327,915.
1a	Beginning of year balance	1,415,000.	1,585,000.			12,455,22	.,. 15	,527,515.
	Contributions	-1,988,194.			736	2 055 87	77	646 688
	Net investment earnings, gains, and losses	-1,900,194.	1,850,634.	1,492,	,730.	2,055,85	· / .	-646,688.
	Grants or scholarships							
е	Other expenditures for facilities	000 400	400 250		0.24	700 00		040 000
_	and programs	833,499.	482,358.	890,	,934.	700,98	, oo	248,000.
f	Administrative expenses	15 000 504	10 242 100	14 200	0.01	12 800 11	10	422 007
g	End of year balance	15,936,504.	17,343,197.	, ,	921.	13,788,11	19. 12	,433,227.
2	Provide the estimated percentage of the curr) he l d as:				
а	Board designated or quasi-endowment	.0100	_%					
	Permanent endowment 99.9900	%						
С		%						
	The percentages on lines 2a, 2b, and 2c sho							
3a	Are there endowment funds not in the posse	ssion of the organizat	tion that are he l d ar	nd administere	d for the			
	organization by:							Yes No
	(i) Unrelated organizations							X
	(ii) Related organizations						<u>3a(ii)</u>	<u> </u>
b	If "Yes" on line 3a(ii), are the related organiza						3b	
4	Describe in Part XIII the intended uses of the		vment funds.					
Par	t VI Land, Buildings, and Equipm			E		. 10		
	Complete if the organization answere							
	Description of property	(a) Cost or ot		or other	• •	umulated	(d) Boo	k value
		basis (investm	ient) basis	(other)	depre	eciation		
	Land						10 85	0 100
	Buildings		13,50	3,026.	./4	15,850.	12,75	7,176.
	Leasehold improvements						~ ~ ~	- 1 - 1
d	Equipment		1,05	<u>6,879.</u>	78	39,748.	26	7,131.
	Other						10 00	4 0 0 -
<u>Tota</u>	. Add lines 1a through 1e. <i>(Column (d) must</i> e	<u>qual Form 990. Part ≻</u>	K. column (B). line 1	0c.)				4,307.
						Scheo	dule D (Forr	n 990) 2022

Schedule D (Fo		O PROTECT JOUR	RNALISTS,	INC.	13-3081500 Page 3
	vestments - Other Securities.				
	mplete if the organization answered "Yes"				
	of Security or Category (including name of security)	(b) Book va l ue	(c) Method o	f valuation: Cost c	or end-of-year market value
(1) Financial de					
	d equity interests				
(3) Other (A) HEDG	E FUND	3,474,173.	END-OF-	YEAR MARK	
(B)		3/1/1/1/1/30			
(C)					
(D)					
(E)					
(F)					
(G)					
<u>(H)</u>		2 404 102			
Total. (Col. (b) m	ust equal Form 990, Part X, col. (B) line 12.)	3,474,173.			
	omplete if the organization answered "Yes"	on Form 990 Part IV line ⁻	11c See Form 99) Part X line 13	
	a) Description of investment	(b) Book value			or end-of-year market value
(1)		(2) 20011 0200	(0)		
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)	ust squal Farm 000 Dart V, sol. (D) line 10.)				
	ust equal Form 990, Part X, col. (B) line 13.) ther Assets.				
	omplete if the organization answered "Yes" of	on Form 990, Part IV, line ⁻	11d. See Form 99	0, Part X, line 15.	
	-	Description			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
<u>(6)</u>					
<u>(7)</u>					
<u>(8)</u> (9)					
	(b) must equal Form 990, Part X, col. (B) line	15.)			
	ther Liabilities.	,			
Cc	mplete if the organization answered "Yes" of	on Form 990, Part IV, line ⁻	11e or 11f <mark>.</mark> See Fo	rm 990, Part X, l in	ne 25.
1.	(a) Description of liability				(b) Book value
(1) Federa	income taxes				
(2)					
(3)					
<u>(4)</u>					
(5)					
<u>(6)</u> (7)					
(8)					
(9)					
	(b) must equal Form 990. Part X. col. (B) line	25.)	<u></u>	<u>.</u>	
	uncertain tax positions. In Part XIII, provide		the organization's	financial stateme	nts that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Χ

-	edule D (Form 990) 2022 COMMITTEE TO PROTECT JOURN				-3081500	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents With	h Revenue pe	r Return	•	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			•	
1	Total revenue, gains, and other support per audited financial statements			1	9,821	<u>,974.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				_	
а	Net unrealized gains (losses) on investments	2a	-2,645,33	37.	_	
b	Donated services and use of facilities	. 2b	1,836,00	50.	_	
с	Recoveries of prior year grants	. 2c			_	
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		<u>,277.</u>
3	Subtract line 2e from line 1			3	10,631	<u>,251.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				_	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	73,70	52.	_	
b	Other (Describe in Part XIII.)	. 4b				
с	Add lines 4a and 4b				73	<u>,762.</u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.)			5	10,705	.013.
	The second of th					<u>/ • = • · ·</u>
	rt XII Reconciliation of Expenses per Audited Financial Statem	ents Wi	th Expenses p			,
	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 123	ents Wi	th Expenses p		rn.	
	rt XII Reconciliation of Expenses per Audited Financial Statem	ients Wi a.	th Expenses p	ber Retu	rn.	
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12:	ients Wi a.	th Expenses p	ber Retu	rn.	
Pa 1	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements	ients Wi	th Expenses p	ber Retu	rn.	
Pa 1 2	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 122 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	a. 2a	th Expenses p	ber Retu	rn.	
Pa 1 2 a	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ents Wit	th Expenses p	ber Retu	rn.	
Pa 1 2 a b	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b 2c	th Expenses p	ber Retu	rn.	,769.
Pa 1 2 a b	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other work in Part XIII.)	2a 2b 2c 2d	th Expenses p	50.	rn.	<u>,769.</u>
Pa 1 2 a b c d	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	th Expenses p	60. 2e	rn.	<u>,769.</u>
Pa 1 2 a b c d e	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12; Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	th Expenses p	2e	rn.	<u>,769.</u>
Pa 1 2 b c d 3	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2c 2d	th Expenses p	2e	rn.	<u>,769.</u>
Pa 1 2 a b c d e 3 4	TXII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	a. 2a 2b 2c 2d	th Expenses p	2e	rn. 13,337 1,836 11,501	<u>,769.</u> ,060. ,709.
Pa 1 2 a b c d e 3 4 a	TXII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	2a 2b 2c 2d 2d	th Expenses p	2e 52. 4c	rn. 13,337 1,836 11,501 73	<u>,769.</u> ,060. ,709.
Pa 1 2 b c d e 3 4 b c 5	TXII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 2d	th Expenses p	2e 52. 4c	rn. 13,337 1,836 11,501	<u>,769.</u> ,060. ,709.

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:

CPJ DOES NOT BELIEVE ITS FINANCIAL STATEMENTS INCLUDE ANY UNCERTAIN TAX

POSITIONS. TAX FILINGS FOR THE PERIODS ENDING DECEMBER 31, 2019 AND LATER

ARE SUBJECT TO EXAMINATION BY APPLICABLE TAXING AUTHORITIES.

SCHEDULE F	Statomo	nt of Act	ivities Outside the Ur	nitad Sta	ntae 🗆	OMB No. 1545-0047
(Form 990)			nswered "Yes" on Form 990, Part IV,			2022
. ,		organization a	Attach to Form 990.			Den to Public
Department of the Treasury Internal Revenue Service	Go to _W	ww.irs.gov/Form	1990 for instructions and the latest i	nformation.		nspection
Name of the organization					Employer ide	entification number
COMMITTEE TO PR					13-3081	
		ctivities Out	side the United States. Compl	ete if the orgar	ization answere	ed "Yes" on
Form 990, Part I						
-	-		ds to substantiate the amount of its gra the selection criteria used to award the			Yes X No
2 For grantmakers. Deso United States.	cribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and ot	her assistance	outside the
3 Activities per Region. (T	he following Part		an be duplicated if additional space is n	needed.)		
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in (d)	(f) Total
	offices	èmployees, agents, and	(by type) (such as, fundraising, pro-		gram service,	expenditures for and
	in the region	independent contractors	gram services, investments, grants to		e specific type	investments
		in the region	recipients located in the region)	of service	(s) in the region	in the region
				JOURNALIST	DISTRESS	
AFRICA		7	JOURNALIST DISTRESS GRANT	GRANT	DIDIREDO	81,794.
		,		SIGNI		
				JOURNALIST	DISTRESS	
ASIA		5	JOURNALIST DISTRESS GRANT	GRANT		161,474.
CENTRAL & SOUTH				JOURNALIST	DISTRESS	
AMERICA		6	JOURNALIST DISTRESS GRANT	GRANT		105,230.
				JOURNALIST	DISTRESS	
EUROPE/CENTRAL ASIA		4	JOURNALIST DISTRESS GRANT	GRANT		218,028.
MIDDLE EAST & NORTH				JOURNALIST	DISTRESS	
AFRICA		2	JOURNALIST DISTRESS GRANT	GRANT		27,983.
				JOURNALIST		
NORTH AMERICA			JOURNALIST DISTRESS GRANT	GRANT	DIDIKESS	6,700.
						, í
3 a Subtotal	0	24				601,209.
b Total from continuation						
sheets to Part I	0	0				0.
c Totals (add lines 3a	0	24				601 209.

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

Schedule F (Form 990) 2022

OMB No. 1545-0047

URNALISTS, INC. 13-3081500 Page 2 United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any itional space is needed. Page 2	Purpose of grant(e) Amount(f) Manner of noncash(g) Amount of noncash(h) Description(i) Method of valuation (book, FMV, assistancePurpose of grantof cash grantcash disbursement assistanceassistanceappraisal, other)					as charities by the foreign country, recognized as a tax as provided a section 501(c)(3) equivalency letter
TO PROTECT JOURNALIST ins or Entities Outside the United States.	e of (e) Amount of cash grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
COMMITTEE Assistance to Organizatio	(b) IRS code section and EIN (if applicable)					Enter total number of recipient organizations listed a exempt 501(c)(3) organization by the IRS, or for whi
Schedule F (Form 990) 2022 Part II Grants and Othe recipient who rec	1 (a) Name of organization					2 Enter total number of r exempt 501(c)(3) orgar

232072 10-17-22

Schedule F (Form 990) 2022 C Part III Grants and Other Assistant	COMMITTEE TO PROTECT	PROTECT J the United Stat	JOURNALISTS , ates. Complete if the o	INC . ganization answered "Yee	13-3081500 s" on Form 990, Part	IV, line 16.	Page 3
(a) Type of grant or assistance (b) Region	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	 (h) Method of valuation (book, FMV, appraisal, other)
JOURNALIST DISTRESS GRANT	AFRICA	0	81,794.	WIRE	•0		
JOURNALIST DISTRESS GRANT	ASIA	0	161,474 . V	WIRE			
JOURNALIST DISTRESS GRANT	CENTRAL & SOUTH AMERICA	0	105,230.	WIRE	0.		
JOURNALIST DISTRESS GRANT	EUROPE/CENTRAL ASIA	0	218,028.0	WIRE	°.		
JOURNALIST DISTRESS GRANT	MIDDLE EAST & NORTH AFRICA	0	27,983. V	WIRE	.0		
JOURNALIST DISTRESS GRANT	NORTH AMERICA	0	6,700.	WIRE			
					-	Sched	Schedule F (Form 990) 2022

			то	PROTECT	JOURNALISTS,	INC.	13-3081500	Page 4
Part IV	Foreign For	ms						

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

Schedule F (Form 990) 2022

Schedule F	(Form 990) 2022 Supplementa	COMMITTEE	TO PRC	TECT	JOURNALIST	S, INC	. 13-3081500	Page 5
	Provide the inform	mation required by Pa					(accounting method; amounts of	
							ng method); and Part III, column (c) nal information. See instructions.	

(Form 990) Department of the Treasury Internal Revenue Service		e organization answered "Ye organization entered more th		990. F	Part IV line 17 19 o				
	Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or 16, or 17 the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.								
nternal Revenue Service								Open to Public	
Name of the organization		to www.irs.gov/Form990 for	instructions	and t	he latest information			Inspection Intification number	
Name of the organizatio		EE TO PROTECT J	OTTRNAT.	гсто	S TNC		3081		
Part Fundrai		Complete if the organization							
	complete this par		answered	63 01	11 0iiii 330, 1 ait iv, 1		550-LZ	iners are not	
 a Mail solicita b Internet and c Phone solicita d In-person solicita 2 a Did the organization key employees listic b If "Yes," list the 1 	tions d email solicitations ditations olicitations on have a written o ted in Form 990, P	f c f g X s or oral agreement with any ind Part VII) or entity in connection viduals or entities (fundraisers)	Solicitation of Solicitation of Special fundra ividual (includ with professi	non-g gover aising ling of ona l fu	overnment grants nment grants events ficers, directors, trus undraising services?		X Yes		
					1	<i></i>		I	
(i) Name and addre or entity (fun		(ii) Activity	fund have o or co	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	(v) Amoun to (or retain fundrais listed in c	ed by) ser	(vi) Amount paid to (or retained by) organization	
BUCKLEY HALL - 33	KATONAH		Yes	No					
AVENUE, KATONAH, N					000.	1,895,032.			
Total 3 List all states in whor licensing. NY	nich the organizatio	on is registered or licensed to s	solicit contrib	utions	1,975,032. For has been notified) , 000 . from re	1,895,032. gistration	

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

Schedule G (Form 990) 2022

COMMITTEE TO PROTECT JOURNALISTS, INC. 13-3081500 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising overt contributions and gross income on Form 000 F7 lines 1 and 6b. List events with gross receipte groster than \$5,000

		or fundraising event contributions and gro			wents with gross receipt	3 greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
anu					(,	
Revenue	1	Gross receipts	1,975,032.			1,975,032.
ш	2	Less: Contributions	1,370,875.			1,370,875.
	3	Gross income (line 1 minus line 2)	604,157.			604,157.
	4	Cash prizes				
	4					
	5	Noncash prizes				
penses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Ц	8	Entertainment				
	9	Other direct expenses	604,157.			604,157.
	10	Direct expense summary. Add lines 4 through				604,157.
Pa	11 rt	Net income summary. Subtract line 10 from line II Gaming. Complete if the organization a		990 Part IV line 19 or i		0.
		\$15,000 on Form 990-EZ, line 6a.				
Ð			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(4) =	bingo/progressive bingo	(-,	col. (a) through col. (c))
Re	1	Gross revenue				
ses	2	Cash prizes				
xpe	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	<u> </u>	Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary. Add lines 2 through	15 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1 column (d)			
	0	The gaming income summary. Subtract line r				I
9	Ent	ter the state(s) in which the organization condu	cts gaming activities:			
		he organization licensed to conduct gaming ac	tivities in each of these s	states?		Yes No
b	lf "	No," explain:				
10a	We	ere any of the organization's gaming licenses re	voked, suspended, or te	rminated during the tax y	/ear?	Yes No
b	lf "	Yes," explain:				

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Sch	edu l e G (Form 990) 2022	COMMITTEE	то	PROTECT	JOURNALISTS,	INC. 13-	-3081500	Page 3
11	Does the organization conduct ga						Yes	No
12	Is the organization a grantor, ben							
	to administer charitable gaming?						Yes	No
13	Indicate the percentage of gaming							
	The organization's facility							%
	An outside facility						13b	%
14	Enter the name and address of th	e person who prepar	es the	e organization's g	gaming/special events bo	oks and records:		
	Name							
	Address							
15a	Does the organization have a con	tract with a third part	y fron	n whom the orga	nization receives gaming	revenue?	Yes	No
b	If "Yes," enter the amount of gam	ing revenue received	by th	e organization	\$	and the amount		
	of gaming revenue retained by the	e third party \$				_		
c	If "Yes," enter name and address	of the third party:						
	Name							
	Address							
16	Gaming manager information:							
	Name							
	Gaming manager compensation	\$						
	Description of convises provided							
	Description of services provided							
	Director/officer	Employee		Indepen	dent contractor			
17	Mandatory distributions:							
a	Is the organization required under	r state law to make ch	naritat	ole distributions	from the gaming proceed	s to	Yes	
					o other exempt ergenizet			No
Ľ	 Enter the amount of distributions organization's own exempt activit 			\$	o other exempt organizat	ions of spent in the		
Pa	rt IV Supplemental Infor				ed by Part I. line 2b. colur	nns (iii) and (v): and F	Part III. lines 9, 9b	. 10b.
	15b, 15c, 16, and 17b, as						, ,	

Schedule G	i (Form 990)	COMMITTEE TO	PROTECT	JOURNALISTS,	INC.	13-3081500	Page 4
Part IV	Supplemental Info	COMMITTEE TO rmation (continued)					

sc	HEDULE J	Compensation Information	1	OMB No.	545 - 004	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest	ľ	20	20)
		Compensated Employees		20	22	-
Dena	rtment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Pub	ic
nterr	a Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nan	ne of the organization			identificatio		nber
		COMMITTEE TO PROTECT JOURNALISTS, INC.	13-3	308150	0	
Pa	rt I Question	s Regarding Compensation				—
		at the second state and the second state of the state of the state of the second state of t	000		Yes	No
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
	First-class or c	line 1a. Complete Part III to provide any relevant information regarding these items.				
	Travel for com					
	_	ation and gross-up payments Either the social club dues or initiation fee				
		spending account				
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
				1b		
2		require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?		2	Х		
3	Indicate which, if ar	ny, of the following the organization used to establish the compensation of the organization's	5			
	CEO/Executive Dire	ctor. Check all that apply. Do not check any boxes for methods used by a related organization	on to			
	establish compensa	ation of the CEO/Executive Director, but explain in Part III.				
	X Compensation					
		ompensation consultant <u>X</u> Compensation survey or study				
	X Form 990 of o	ther organizations X Approval by the board or compensation c	ommittee			
4	• •	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re	-				v
a		e payment or change of control payment?				X X
b	•	eive payment from a supplemental nonqualified retirement plan?				X
С	•	eive payment from an equity-based compensation arrangement?		<u>4c</u>		
	I res to any or in	les 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		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n			
-	contingent on the r					
а						X
b	Any related organiz	ation?				X
		r 5b, describe in Part III.				
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatic	n			
	contingent on the n	et earnings of:				
а	The organization?			<u>6</u> a		X
b	Any related organiz	ation?		<u>6</u> b		X
	If "Yes" on line 6a c	or 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
		nes 5 and 6? If "Yes," describe in Part III		7		X
8	=	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	ıe			
				8		X
9		id the organization also follow the rebuttable presumption procedure described in				
		1 53.4958-6(c)?				
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Scheo	dule J (Forn	n 990)	, 2022

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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.	be re orm	ported on Schedule J 990, Part VII.	, report compensati	on from the organiza	ation on row (i) and from	n related organizations	, described in the instr	uctions, on row (ii).
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	ed in	dividual must equal th	le total amount of Fo	orm 990, Part VII, Se	ection A, line 1a, applica	tble column (D) and (E) amounts for that indi	vidual.
		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	-2 and/or 1099-MISC compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) ROBERT MAHONEY	Û	249,921.	.0	.0	17,935.	20,282.	288,138.	.0
DIRECTOR OF SPECIAL PROJECTS		.0	• 0	.0	.0	.0	.0	0.
(2) JOHN D. WEIS	Ξ	209,535.	0.	• 0	15,227.	22,237.	246,999.	0.
SEC'Y/DIR. DEV.	(ii)	0.	0.	0.				.0
(3) JODIE GINSBERG	Ξ	212,814.	.0	• 0	7,236.	19,138.	239,188.	0.
PRESIDENT	(ii)	• 0	• 0	• 0	• 0	0.	• 0	• 0
(4) HILDA ROMERO	Ξ	183,719.	• 0	• 0	13,548.	28,019.	225,286.	• 0
DIRECTOR OF FINANCE	0	•0	• 0	• 0	• 0	•0	•0	•0
(5) ARLENE GETZ	Ξ	170,013.	.0	• 0	12,091.	12,530.	194,634.	0.
EDITORIAL DIRECTOR	(ii)	• 0	0.	• 0	• 0	0.	0.	•0
(6) GYPSY GULLEN KAISER	Ξ	156,174.	.0	• 0	11,140.	20,282.	187,596.	0.
DIRECTOR OF COMMUNICATIONS & ADVOCAC		• 0	0.	• 0	• 0	0.	0.	•0
(7) CARLOS MARTINEZ DE LA SERNA	(i)	147,584.	0.	• 0	10,669.	28,019.	186,272.	0.
PROGRAM DIRECTOR	(ii)	0.	0.	• 0	• 0	0.		0.
(8) MARGARET ABAM-DEPASS	(i)	129,631.	0.	• 0	9,889.	30,807.	170,327.	0.
DEPUTY DIR OF FIN	(ii)	0.	0.	0.	0.	0.	0.	.0
(6) MICHELE LOUHISDON	()	145,239.	0.	• 0	10,202.	10,450.	165,891.	•0
HR DIRECTOR	(ii)	• 0	.0	• 0	• 0	0.	0.	.0
	Ξ							
	0							
	Ξ							
	<u> </u>							
	Ξ							
	(ii)							
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	Ξ							
	0							
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	0							
	Ξ							
	(ii)							
							Schedu	Schedule J (Form 990) 2022

Page 2

Schedule J (Form 990) 2022 COMMITTEE TO PROTECT JOURNALISTS, INC. 13-3081500 Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

232112 10-18-22

Schedule J (Form 990) 2022 COMMITTEE TO PROTECT JOURNALISTS, INC.	13-3081500 P	Page 3
Part III Supplemental Information		
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.	ete this part for any additional information.	
	Schedule J (Form 990) 2022	90) 2022

SCHEDULE K (Form 990) Department of the Treasury Internal Revenue Service	Supplemental Information on Tax-Exempt Bonds Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptic explanations, and any additional information in Part VI. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.	Supplemental Info ganization answered " explanations, and a 990. Go to www.irs.go	pplemental Information on Tax-Exempt Bonds iization answered "Yes" on Form 990, Part IV, line 24a. Prc explanations, and any additional information in Part VI. J. Go to www.irs.gov/Form990 for instructions and the late	x-Exempt Bc , Part IV, line 24 mation in Part ¹ tructions and th	lental Information on Tax-Exempt Bonds answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, titions, and any additional information in Part VI. www.irs.gov/Form990 for instructions and the latest information.	ions,		5 5 5	OMB No. 1545-0047 2022 Open to Public Inspection	s-0047	
ation COMMITTEE T	TO PROTECT J	JOURNALISTS,	S, INC.				Employe 13-	Employer identification number 13-3081500	cation nu 5 0 0	umber	I. I
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price		(f) Description of purpose	(g) Defeas	d (h) On t of iss			
A BUILD NYC RESOURCE CORP	45-4040561	NONE	03/04/21	5,500,000	PURCHASE 0. BUILDING	OF SPACE	X	₹es	X No	2 ×	al _ l
в											I
U											I
۵											I
Part II Proceeds											
 Amound of housies raticad 			A		В	ပ			٥		Ι
3 Total proceeds of issue											
4 Gross proceeds in reserve funds											I
5 Capitalized interest from proceeds											I
											I
											I
 B Credit enhancement from proceeds D Working conital expanditures from proceeds 											I
											I
12 Other unspent proceeds											
13 Year of substantial completion											I
			Yes	No	Yes No	Yes	No	Yes	No	0	I
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	ssue of tax-exempt bo ue)?	onds (or,									
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if	ssue of taxable bonds	s (or, if									
issued prior to 2018, an advance refunding issue)?	ue)?										I
16 Has the final allocation of proceeds been made?	e?										I
17 Does the organization maintain adequate books and records to support th final allocation of proceeds?	s and records to sup	port the									
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ne Instructions for Fo	ırm 990.					Sci	Schedule K (Form 990) 2022	(Form 99	90) 202	ន

Schedule K (Form 990) 2022 COMMITTEE TO PROTECT JOURNALISTS Part III Private Business Use	TS, INC.		13-3	-3081500				Page 2
	V		8			0		
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	Yes	No	Yes	No	Yes	N	Yes	No
2 Are there any lease arrangements that may result in private business use of								
3a Are there any management or service contracts that may result in private business use of bond-financed property?								
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of								
bond-financed property?								
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other oriteide coursed to review any research arreaments relation to the financed promethy?								
4 Enter the percentage of financed property used in a private business use by entities								
other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a								
result of unrelated trade or business activity carried on by your organization,								
another section 501(c)(3) organization, or a state or local government		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?								
Ba Has there been a sale or disposition of any of the bond-financed property to a non-								
governmental person other than a 501(c)(3) organization since the bonds were issued?								
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or				;		:		;
disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
sections 1 141-12 and 1 145-2?								
9 Has the organization established written procedures to ensure that all								
nonqualified bonds of the issue are remediated in accordance with the								
Ξ.								
Part IV Arbitrage								
 Land the induce find form 0000 T Addition Data Viald Deduction and 	A CON		8 ~~~~	4		<u>با</u>		N
	100		63		691		163	
Z II NO 10 III IE 1, UIU II IE IOIIOWILIG APPIY ? 2 Debate not directory?								
a rebate flot due yet?								
If tes to line 20, provide in Part VI the date the repare computation was								
perioritied 2 le the hand iseus a variable rate iseus?								
						100	ן א גערטע מקויוסי	
232122 10-28-22						QCI	scneaule N (Form 390) 2022	7777 (NAA U

Schedule K (Form 990) 2022 COMMITTEE TO PROTECT JOURNALISTS, Part IV Arbitrage (continued)	TS, INC.	•	13-3	13-3081500				Page 3
4a Has the organization or the governmental issuer entered into a qualified	A	No	Yes	P B	C Yes	N	D Yes	No
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?								
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?								
7 Has the organization established written procedures to monitor the								
requirements of section 148?								
Part V Procedures To Undertake Corrective Action								
	4			B	U U			
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions.	on Schedule	K. See instru	ctions.					
232123 10-28-22						Sche	Schedule K (Form 990) 2022	n 990) 2022

SCHEDULE O (Form 990)

m 990) Complet For

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



COMMITTEE TO PROTECT JOURNALISTS, INC. 13-3081500

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

SAFELY AND WITHOUT FEAR FROM REPRISAL.

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

JOURNALISTS ARE ATTACKED, IMPRISONED, KILLED, KIDNAPPED, THREATENED,

CENSORED, OR HARASSED.

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

CPJ'S REGIONAL PROGRAMS COVER AFRICA, THE AMERICAS, ASIA, EUROPE AND CENTRAL ASIA, AND THE MIDDLE EAST AND NORTH AFRICA. THEY ARE LED BY EXPERTS FROM ALL OVER THE WORLD WHO REPORT DAILY ON PRESS FREEDOM ABUSES IN CLOSE COLLABORATION WITH OUR CORRESPONDENTS' CITIES. WHO HAVE DEEP TIES WITH LOCAL JOURNALISTS AND ADVOCATES. WE ARE UNIQUE IN OUR ABILITY TO ENGAGE GOVERNMENT LEADERS LOCALLY AND GLOBALLY, AND IN MOBILIZING THE MEDIA TO SUPPORT THE PRESS. OUR ADVOCACY TEAM LEADS OR COORDINATES STRATEGIC EFFORTS AND IMPACTFUL CAMPAIGNS THAT WEAVE CASES INTO THE MOST PRESSING ISSUES. THE TEAM ENGAGES WITH POLICYMAKERS AND LEADERS FROM THE UNITED STATES, THE EUROPEAN UNION, AND THE UNITED AMONG OTHER ENTITIES. IN PARTNERSHIP WITH TEAMS ACROSS THE NATIONS, ORGANIZATION, THEY INJECT OUR REPORTING INTO MULTILATERAL SYSTEMS AND MECHANISMS THAT CHAMPION PRESS FREEDOM, PROTECT JOURNALISTS AND HELP TO DELIVER JUSTICE. OUR EMERGENCIES TEAM PROVIDES PRE-EMPTIVE, TAILORED AND RAPID RESPONSE SUPPORT TO JOURNALISTS UNDER THREAT ALL OVER TOOLS THE WORLD. THEY ARE A PILLAR OF ASSISTANCE FOR JOURNALISTS FORCED TO FLEE FOR THEIR SAFETY AND PROVIDE TRAINING, CONSULTATIONS AND GUIDANCE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022 232211 10-28-22 Public Disclosure Copy

Schedule O (Form 990) 2022 Name of the organization	Page <u>2</u> Employer identification number		
COMMITTEE TO PROTECT JOURNALISTS, INC.	13-3081500		
TO PREVENT DEATHS, DETENTIONS, KIDNAPPINGS, AND OTHER DANG	ERS.		
CPJ'S VAST INTERNATIONAL NETWORKS AND COLLABORATIVE RELATI	ONSHIPS WITH		
LOCAL AND INTERNATIONAL FREEDOM OF EXPRESSION AND HUMAN RI	GHTS GROUPS,		
ALLOWS FOR JOINT ADVOCACY AND STRATEGIC INTERVENTIONS TOGE	THER WITH		
GROUPS LIKE HUMAN RIGHTS WATCH, ARTICLE 19, AMNESTY INTERN	ATIONAL, FREE		
PRESS UNLIMITED AND REPORTERS SANS FRONTIRES. CPJ IS A FOU	NDING MEMBER		
OF IFEX, AN ORGANIZATION OF 100 GLOBAL FREEDOM OF EXPRESSI	ON GROUPS.		
CPJ IS ALSO A MEMBER OF THE CONSULTATIVE NETWORK FOR THE M	EDIA FREEDOM		
COALITION (MFC), A GROUP OF 52 COUNTRIES COMMITTED TO SUPP	ORTING A FREE		
PRESS. AS SUCH, CPJ WORKS WITH THE MFC TO DEFEND SPECIFIC	JOURNALISTS		
AND PARTICIPATES IN DIPLOMATIC NETWORKS TO PROTECT MEDIA. THESE			
RELATIONSHIPS ARE PART OF ORGANIZATIONAL EFFORTS TO COLLABORATE WITH			
LOCAL, REGIONAL, AND INTERNATIONAL MEDIA AND HUMAN RIGHTS	GROUPS TO		
ENSURE THE PERSPECTIVE AND VOICE OF THOSE ON THE FRONT LIN	ES IS ALWAYS		
IN OUR WORK.			
IN FEBRUARY OF 2022, AS RUSSIA BEGAN ITS FULL-SCALE INVASI	ON OF		
UKRAINE, CPJ DECLARED AN ORGANIZATION-WIDE EMERGENCY, AN I	NTERNAL MOVE		
TO SHIFT RESOURCES AND PERSONNEL TO ADDRESS THE CRISIS. OV	ER THE PAST		
SEVERAL YEARS FROM THE CRIMINALIZATION OF JOURNALISTS AROU	ND THE WORLD,		
TO WAR IN UKRAINE AND A CRACKDOWN IN IRAN. CPJ HAS FINE-TU	NED A RAPID		
RESPONSE IN THE FACE OF THESE EMERGENCIES.			
IN RECENT YEARS, CPJ HAS RECORDED THE HIGHEST NUMBERS OF J	AILED		
JOURNALISTS SINCE THE EARLY 1990S. IN 2022, THE NUMBER OF	JOURNALISTS		
IMPRISONED GLOBALLY WAS THE HIGHEST ON RECORD, WITH 363 BE	HIND BARS AS		
POLITICAL UPHEAVAL AND MEDIA CRACKDOWNS REFLECT INCREASING	INTOLERANCE		
FOR INDEPENDENT REPORTING AROUND THE WORLD. BUT THIS IS WH	Y CPJ'S WORK		
IS SO IMPORTANT. WE DOCUMENT EACH IMPRISONMENT AND ADVOCAT	E AROUND IT.		
WE CARRY OUT ANNUAL "FREE THE PRESS" CAMPAIGNS AND RAISE I 232212 10-28-22 Public Disclosure Copy	NDIVIDUAL Schedule O (Form 990) 2022		

Schedule O (Form 990) 2022 Name of the organization	Page 2 Employer identification number
COMMITTEE TO PROTECT JOURNALISTS, INC.	13-3081500
CASES IN MEETINGS WITH RELEVANT LEADERS. AND OUR IMPACT IS	GLOBAL: IN
2022, CPJ HELPED WIN THE RELEASE OF AT LEAST 150 IMPRISONE	D
JOURNALISTS, THE MOST WE HAVE EVER HELPED FREE. THE PREVIO	US YEAR, CPJ
HELPED FREE AT LEAST 101 IMPRISONED JOURNALISTS FROM DOZEN	S OF
COUNTRIES. IN 2022, CPJ ALSO LAUNCHED A CAMPAIGN TO DEMAND	THE RELEASE
OF JOS RUBN ZAMORA, A FORMER CPJ AWARDEE IMPRISONED IN GUA	TEMALA UNDER
POLITICALLY MOTIVATED CHARGES. CPJ MOBILIZED MORE THAN FIF	TY NEWS
LEADERS FROM AROUND THE WORLD AND SECURED MEDIA ATTENTION	ON THE CASE,
AS WELL AS THE DETERIORATION OF PRESS FREEDOM AND DEMOCRAC	Y IN
GUATEMALA. IN ANOTHER CRITICAL CASE, CPJ ALSO MOBILIZED SU	PPORT FOR
IMPRISONED PUBLISHER AND FORMER AWARDEE, JIMMY LAI, WHO FA	CES A
POTENTIAL LIFE SENTENCE IN HONG KONG. CPJ ORGANIZED MEETIN	GS WITH
GOVERNMENT OFFICIALS IN WASHINGTON D.C. AND BRUSSELS, COMP	LEMENTED BY
SUSTAINED MEDIA COVERAGE TO EXERT PUBLIC PRESSURE.	
MURDER IS THE ULTIMATE FORM OF CENSORSHIP, AND IMPUNITY BR	EEDS FEAR.
THAT IS WHY CPJ HAS CARRIED OUT A GLOBAL CAMPAIGN FOR JUST	ICE IN
JOURNALIST MURDERS FOR MORE THAN A DECADE, AND WE ARE COMM	ITTED TO
FIGHTING FOR JUSTICE. WE REPORT ON EACH CASE, MEET WITH LE	ADERS, AND
CAMPAIGN FOR CONVICTIONS. WE PUBLISH AN ANNUAL IMPUNITY IN	DEX, WHICH
SPOTLIGHTS COUNTRIES WHERE JOURNALISTS ARE MURDERED, AND T	HEIR KILLERS
GO FREE. CPJ ADVOCACY HELPED WIN CONVICTIONS IN THE MURDER	S OF AT LEAST
12 JOURNALISTS IN 2022.	
IN OCTOBER 2022, FIVE YEARS AFTER LEADING INVESTIGATIVE JO	URNALIST
DAPHNE CARUANA GALIZIA WAS BRUTALLY MURDERED IN A BOMB ATT	ACK IN MALTA,
A COURT SENTENCED TWO BROTHERS TO 40 YEARS EACH FOR THEIR	ROLE AS
HITMEN. FURTHER LEGAL PROCEEDINGS ARE PENDING AGAINST THE	ALLEGED
MASTERMIND, AND TWO MEN WHO ALLEGEDLY SUPPLIED THE BOMB. Y	EARS OF
ADVOCACY BY CPJ AND ITS PARTNERS HAS HELPED BRING JUSTICE	FOR HER
Public Disclosure Copy	Schedule O (Form 990) 2022

Name of the organization

Employer identification number 13 - 3081500

MURDER. CPJ'S EMERGENCIES TEAM, FORMED IN 2016, HELPS TO KEEP JOURNALISTS SAFER ALL OVER THE WORLD. THE TEAM DISSEMINATES PRACTICAL ADVICE TO JOURNALISTS AND, DURING HIGH-RISK SITUATIONS, WORKS WITH SECURITY EXPERTS TO PROVIDE TACTICAL INFORMATION AND PRACTICAL SUPPORT TO JOURNALISTS. THE TEAM ALSO PROVIDES GRANTS, INCLUDING FOR EVACUATION, TRAUMA THERAPY, AND LEGAL FEES. IN 2022, CPJ PROVIDED FINANCIAL AND NON-FINANCIAL ASSISTANCE TO MORE THAN 520 JOURNALISTS IN 49 COUNTRIES, WITH GRANTS TO JOURNALISTS WHO NEEDED SUPPORT FOR EMERGENCY RELOCATION, IMPRISONMENT, MEDICAL ISSUES, AND TRAUMA. AS RUSSIAN TROOPS UNDERTOOK A FULL INVASION OF UKRAINE IN FEBRUARY 2022, CPJ WORKED TO DISBURSE CRUCIAL SAFETY ADVICE FOR JOURNALISTS COVERING THE CONFLICT. ALMOST AS SOON AS THE WAR BEGAN, ATTACKS ON JOURNALISTS MADE CLEAR A NEED FOR PERSONAL PROTECTIVE EQUIPMENT (PPE) AND FIRST AID SUPPLIES. CPJ SET UP A TEMPORARY "HUB" IN BERLIN AND TRAVELED TO GEORGIA, NORWAY, AND POLAND TO UNDERSTAND THE THREATS JOURNALISTS WERE FACING. CPJ ALSO PARTNERED WITH MEDICAL SUPPLIES COMPANY MEDTRADE AND UKRAINIAN NEWS OUTLET ZABORONA, TO DISTRIBUTE HUNDREDS OF FIRST AID KITS. CPJ ALSO DISSEMINATED INFORMATION SAFETY MEASURES IN ENVIRONMENTS CONTAINING UNEXPLODED ORDNANCE (UXO) AND A GUIDE TO BRINGING PERSONAL PROTECTIVE EQUIPMENT (PPE) INTO UKRAINE. CRUCIALLY, THE ORGANIZATION UNDERTOOK AN INNOVATIVE STEP AND SET UP A WHATSAPP CHATBOT TO PROVIDE JOURNALISTS WITH ON-DEMAND SAFETY INFORMATION, AND ISSUED A GUIDE TO UNDERSTANDING RUSSIA'S "FAKE NEWS" LAWS, TO ASSIST THE DECIMATED

INDEPENDENT PRESS CORPS TRYING TO CONTINUE REPORTING WITHIN RUSSIA.

FINALLY, CPJ ALSO PROVIDED FINANCIAL AND NON-FINANCIAL ASSISTANCE TO

MORE THAN 200 JOURNALISTS AFFECTED BY THE WAR.

Schedule O (Form 990) 2022	Page 2					
Name of the organization COMMITTEE TO PROTECT JOURNALISTS, INC.	Employer identification number					
WHEN CPJ WAS FOUNDED BY A GROUP OF U.S. JOURNALISTS 40 YEARS AGO, IT						
WAS TO DEFEND THEIR INTERNATIONAL COLLEAGUES WHO WERE AT R	ISK. SINCE					
THEN, WE HAVE USED EVERY TOOL OF JOURNALISM TO CARRY OUT O	UR					
MISSIONFROM NEWS ALERTS TO SPECIAL REPORTS, TO DOCUMENTARIES, TO SOCIAL						
MEDIA. WE HAVE DEVELOPED AN UNPARALLELED REPUTATION FOR TH	E ACCURACY					
AND TIMELINESS OF OUR REPORTING, THE QUALITY OF OUR DATA,	AND OUR					
ABILITY TO OFFER INFORMED POLICY RECOMMENDATIONS AND CONDU	CT IMPACTFUL					
ADVOCACY. OUR REPORTING INFLUENCES POLITICAL, NEWS AND TEC	HNOLOGY					
LEADERS, DRIVES COVERAGE IN THE MEDIA, AND SHAPES PUBLIC D	ISCOURSE THAT					
LEADS TO CHANGE.						
BY ENSURING JOURNALISTS ARE ABLE TO REPORT THE NEWS FREELY	, CPJ DEFENDS					
THE RIGHT OF PEOPLE GLOBALLY TO ACCESS THE CRITICAL INFORM	ATION THEY					
NEED TO MAKE INFORMED DECISIONS IN ALL AREAS OF THEIR LIVE	S AND TO HOLD					
DECISION-MAKERS ACCOUNTABLE. WHEN A COUNTRY'S JOURNALISTS	ARE SILENCED,					
ITS PEOPLE ARE SILENCED. BY PROTECTING JOURNALISTS, CPJ PR	OTECTS					
FREEDOM OF EXPRESSION AND DEMOCRACY.						
A RECOGNIZED LEADER IN THE GLOBAL FIGHT TO PROTECT PRESS F	REEDOM, CPJ					
HAS BEEN HONORED WITH A RANGE OF AWARDS, INCLUDING THE 201	8 СНАТНАМ					
HOUSE PRIZE AND MOST RECENTLY, WITH THE NATIONAL UNION OF JOURNALISTS						
OF UKRAINE'S CERTIFICATE OF APPRECIATION, IN RECOGNITION OF CPJ'S						
CONTRIBUTIONS TO EMBATTLED UKRAINIAN JOURNALISTS. SIMILARLY, CPJ AND						
LAW FIRM ALLEN & OVERY, WON THE TRUSTLAW IMPACT AWARD FOR DEVELOPING A						
'KNOW YOUR RIGHTS' GUIDE FOR JOURNALISTS COVERING PROTESTS IN THE US.						
FORM 990, PART VI, SECTION B, LINE 11B:						
MANAGEMENT REVIEWS A DRAFT OF THE FORM 990 WITH THE BOARD	CHAIR AND FINANCE					
COMMITTEE CHAIR AND PROVIDES ANY EDITS TO THE TAX PREPARER. AFTER THIS						
PROCESS IS PERFORMED, THE FORM 990 IS SENT TO THE FULL BOARD OF DIRECTORS 232212 10-28-22 Public Disclosure Copy Schedule O (Form 990) 2022						
i unic Disclosure Copy						

	Employer identification number
COMMITTEE TO PROTECT JOURNALISTS, IN	NC. 13-3081500
PRIOR TO BEING FILED WITH THE IRS.	
KIOK IO BEING FILED WITH THE IKS.	

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

THE ORGANIZATION HAS A BOARD-APPROVED CONFLICT OF INTEREST POLICY. EACH

BOARD MEMBER MUST FILL OUT AN ANNUAL DECLARATION STATING THEY HAD NO

CONFLICTS OR IDENTIFYING THE NATURE OF THEIR INTERESTED PARTY TRANSACTIONS.

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

EVERY OTHER YEAR, THE EXECUTIVE COMMITTEE REVIEWS COMPARABLE SALARIES BASED

ON A RECOGNIZED STUDY AND REVIEWS THE PERFORMANCE OF THE EXECUTIVE

DIRECTOR, OFFICERS AND KEY EMPLOYEES TO DETERMINE IF THE EXISTING SALARY

FALLS WITHIN THESE RANGES. AFTER A DELIBERATION OF THIS MATTER, A NEW

PROPOSED SALARY AND BENEFIT PACKAGE IS VOTED ON. THE MINUTES OF THE BOARD

OF DIRECTORS REFLECT THE NATURE OF THIS PROCESS.

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

THE ORGANIZATION MADE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC DURING THE 2022 TAX YEAR BY POSTING THEM ON ITS WEBSITE AND MAKING THEM AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:OTHER PROFESSIONAL FEES:PROGRAM SERVICE EXPENSES2,415,298.MANAGEMENT AND GENERAL EXPENSES569,270.FUNDRAISING EXPENSES146,715.TOTAL EXPENSES3,131,283.TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A3,131,283.

(Rev. January 2022)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a	congrato	application	for each re	sturn

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Туре о	r Name of exempt organization or other filer, see instru	Name of exempt organization or other filer, see instructions.		Taxpayer identification number (TIN)				
print	COMMITTEE TO PROTECT JOURNALISTS, INC.				13-3081500			
File by the due date f filing your	or Number, street, and room or suite no. If a P.O. box, s	ee instruct	ions.					
return. Se instructior		oreign addı	ress, see instructions.					
Enter th	ne Return Code for the return that this application is for (file	e a separat	e application for each return)					
Applica	ation	Return	Application			Return		
ls For		Code	Is For			Code		
Form 9	90 or Form 990-EZ	01	Form 1041-A			08		
Form 4720 (individual)			Form 4720 (other than individua l)			09		
Form 990-PF			Form 5227			10		
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 9	90-T (trust other than above)	06	Form 8870			12		
Form 9	90-T (corporation)	07						
 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If request an automatic 6-month extension of time until <u>NOVEMBER 15, 2023</u>, to file the exempt organization return for the organization named above. The extension is for the organization's return for: Calendar year <u>2022</u> or tax year beginning, and ending 								
	this application is for Forms 990-PF, 990-T, 4720, or 6069 ny nonrefundable credits. See instructions.), enter the	tentative tax, less	3a	\$	0.		
b lf	this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and					
estimated tax payments made. Include any prior year overpayment allowed as a credit.			3b	\$	0.			
сB	alance due. Subtract line 3b from line 3a. Include your pa	ayment with	n this form, if required, by					
u	sing EFTPS (Electronic Federal Tax Payment System). See	e instructio	ns.	3c	\$	0.		
Caution instruct	n: If you are going to make an electronic funds withdrawal ions.	(direct det	bit) with this Form 8868, see Form 84	153-TE and	d Form 8879-TE	for payment		

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)