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.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Αŀ	or the	2022 calendar year, or tax year beginning UUL I, 2022 and	ں enaing	UN 30, 404	3
B c	Check if pplicable	C Name of organization		D Employer ident	fication number
	Addres	RELIGION NEWS FOUNDATION			
	Name change	Doing business as		31-1650	883
	Initial return Final	Number and street (or P.O. box if mail is not delivered to street address) PO BOX 1808	Room/suite	E Telephone numb 844-767	
	return/ terminated			G Gross receipts \$	6,645,587.
	Ameno			H(a) Is this a group	
	Application			for subordinate	
	pendin	SAME AS C ABOVE		H(b) Are all subordinates	
	Tax-exe	empt status: $X = 501(c)(3) = 501(c)(3)$ (insert no.) 4947(a)(1) of the status in the	or 527	1 ` ′	a list. See instructions
	Nebsit		51 021	H(c) Group exempt	
		organization: X Corporation Trust Association Other	I Year		M State of legal domicile: OH
		Summary	L 1001	orrormation, =====	We oldto or logal dominolo,
	_	Briefly describe the organization's mission or most significant activities: TO AI	DVANCE	THE PUBLIC	2
Se		UNDERSTANDING OF RELIGION AND THE DEVELOP			
nar	l	Check this box if the organization discontinued its operations or dispos			
Activities & Governance	l	·		1	
ဗွ	1	Number of independent voting members of the governing body (Part VI, line 1b)			
<u>«</u>		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			
ij		Total number of volunteers (estimate if necessary)			
₹		Total unrelated business revenue from Part VIII, column (C), line 12			
Ă		Net unrelated business taxable income from Form 990-T, Part I, line 11			
	_~	The difference business taxable moonle nem reminess 1, rate 1, mile 11		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		2,337,019	
Jue	9	Program service revenue (Part VIII, line 2g)		302,341	. 325,860.
Revenue	10	investment income (Part VIII, column (A), lines 3, 4, and 7d)		558	
Be	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		691	
~	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,640,609	1
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		25,691	
	1			0	
	45	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,556,213	
ses	162	Professional fundraising fees (Part IX, column (A), line 11e)		0	
Expenses	h	Total fundraising expenses (Part IX, column (D), line 25) 228,11	19.		
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,306,677	. 1,495,300.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,888,581	
	1	Revenue less expenses. Subtract line 18 from line 12		-247,972	3,619,867.
	15	Teveride less experises. Oubtract line to from line 12		ginning of Current Yea	
ets C	20	Total assets (Part X, line 16)		2,784,139	
Net Assets or	21	Total liabilities (Part X, line 26)		149,557	
Net	22	Net assets or fund balances. Subtract line 21 from line 20		2,634,582	
Pa	art II	Signature Block			0 0 1 1 1 1 1 1 1 1
		ties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of i	ny knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of wh			.,,
	,	,,,,,,			
Sigi	n	Signature of officer		Date	
Her		DEBORAH CALDWELL, CEO/PRESIDENT			
1101	C	Type or print name and title			
		Print/Type preparer's name Preparer's signature	[Date Check	PTIN
Paid		LEE A. MERRICK		if self-emp	P03008854
	arer	Firm's name WILLIAMS-KEEPERS LLC	1		43-1126847
-	Only	Firm's address 2005 WEST BROADWAY, SUITE 100		I IIIII 5 EIN	
200	Jilly	COLUMBIA, MO 65203-		Dhone no (573) 442-6171
Mar	tha I	IS discuss this return with the preparer shown above? See instructions		Fillotte fio. (77
ivia)	, այ ս լի	io discuss this return with the preparer shown above? See Instructions			X Yes No

Other program services (Describe on Schedule O.)

Total program service expenses

including grants of \$

2,433,714.

) (Revenue \$

Form 990 (2022) RELIGION NEWS FOUNDATION Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		37	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			,,
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			,,
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			,,
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in 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,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
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? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	•	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

Form 990 (2022) RELIGION NEWS FOUNDATION
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			٦,
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			٦,
	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%			7,7
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			x
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		Х
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	28c		х
20	"Yes," complete Schedule L, Part IV	29		X
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		25
30		30		x
31	contributions? If "Yes," complete Schedule M	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
52	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 02		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	X	
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		Х
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		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			X
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	000	

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022) RELIGION NEWS FOUNDATION
Statements Regarding Other IRS Filings and Tax Compliance (continued) Form 990 (2022) **Part V** Sta

					Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		4.5			
	filed for the calendar year ending with or within the year covered by this return	2a	17			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	าร?		2b	X	
3а	, , , , , , , , , , , , , , , , , , , ,			3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	O		3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthorit	y over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccoun	t)?	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 Ad	ccount	s (FBAR).			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orgar	nization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons 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 ser	vices pr	ovided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ıs requ	ired			
	to file Form 8282?			7с		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 co	ontract	?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 889	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file	e a Form 1098-C?	7h		
8	$\textbf{Sponsoring organizations maintaining donor advised funds.} \ \ \textbf{Did a donor advised fund maintained}$	by the	;			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b				9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against	l l				
	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	1 1		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			10-		
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
L	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	13b				
_	organization is licensed to issue qualified health plans					
	Enter the amount of reserves on hand	13c		140		Х
				14a 14b		
ъ 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner			1+D		
IJ				15		х
	excess parachute payment(s) during the year?			13		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incom	ne?	16		Х
	If "Yes," complete Form 4720, Schedule O.			.0		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any actions.	tivitios				
••	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Ves " complete Form 6060			.,		

Form 990 (2022) RELIGION NEWS FOUNDATION 31-1650883 Page
Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below to lines 2 through 7b belo

	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
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	9		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b		9		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	<u> </u>	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			37
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	401		
500	exempt status with respect to such arrangements? tion C. Disclosure	16b		
17	List the states with which a copy of this Form 990 is required to be filed CA, FL, MO, NY, OH, PA	(a cal: .)	01/0:1-1	ole.
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	is only)	avallal	JIE
	for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O)			
10	X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, are	d finan	oial	
19	statements available to the public during the tax year.	u iiiiaii(ıaı	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
20	LAURA WILSON - 573-884-1327			
		DLUM:	BIA	
				-

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key 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.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)	(B)	l		((C)		oarc	(D)	(E)	(F)
Name and title	Average		not c		more	than o		Reportable	Reportable	Estimated
	hours per week	offic	unles	ss per id a d	rson i irecto	s both or/trus	an tee)	compensation from	compensation from related	amount of other
	(list any	ector						the	organizations	compensation
	hours for	Individual trustee or director	ee			ated		organization	(W-2/1099-MISC/ 1099-NEC)	from the
	related organizations	trustee	Institutional trustee		yee	Highest compensated employee		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	idual t	tution	e	Key employee	est co loyee	ıer			organizations
	line)	Indiv	Instii	Officer	Key	High	Former			
(1) DEBORAH CALDWELL	40.00									
CEO AND PUBLISHER	40.00	Х		Х				175,644.	0.	9,264.
(2) PAUL O'DONNELL	40.00							100 200		24 844
EDITOR-IN-CHIEF	40.00					Х		108,370.	0.	34,711.
(3) ROXANNE STONE	40.00					3,7		101 507	_	10 000
MANAGING EDITOR	2 00					Х		101,507.	0.	12,222.
(4) KEN CHITWOOD VICE CHAIR	1.00	Х		х				7,200.	0.	0
(5) BESTY SHIRLEY	1.00	Λ		^				7,200.	0.	0.
BOARD MEMBER	1.00	Х						0.	0.	0.
(6) STEVEN WALDMAN	1.00							0.	0.	0 •
BOARD MEMBER	1.00	х						0.	0.	0.
(7) THOMAS LEVINSON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) KIM WON	1.00							-	-	-
BOARD MEMBER		Х						0.	0.	0.
(9) DAVE ROBERSON	2.00									
TREASURER		Х		Х				0.	0.	0.
(10) DAWN ARAUJO-HAWKINS	1.00									
BOARD MEMBER	1.00	X						0.	0.	0.
(11) JOHN TERRILL	2.00								_	_
BOARD CHAIR	1.00	Х		Х				0.	0.	0.
(12) MUHAMMED CHAUDHRY	1.00									_
PAST BOARD CHAIR		Х		Х				0.	0.	0.
		-								
					\vdash					
-										
		1								
			_				_	1	1	

232007 12-13-22 Form **990** (2022)

Section A. Officers, Directors, Trust	ees, Key Emp	ploye	ees,	and	ΙΗις	gnes	t C	ompensated Employee	s (continued)				
(A)	(B)			(C) Position				(D)	(E)		_	(F)	
Name and title	Average hours per		not cl	heck r	more '	than c s both		Reportable compensation	Reportable compensation			timate nount o	
	week	offic				r/trust		from	from related			other	5 1
	(list any hours for	Individual trustee or director						the	organization (W-2/1099-MIS			pensation the	
	related	ee or d	stee			Highest compensated employee		organization (W-2/1099-MISC/	1099-NEC)			anizati	
	organizations	al trust	nal tru		oyee	som pe		1099-NEC)	,		_	d relate	
	below line)	dividua	Institutional trustee	Officer	Key employee	ghest	Former				orga	anizatio	ons
		II	ll	JO.	Ke	er Hi	꼰						
						Н							
						Н							
1b Subtotal	<u> </u>					Ш		392,721.		0.	5	6,19	97.
c Total from continuation sheets to Part VII	, Section A							0.		0.			0.
d Total (add lines 1b and 1c)								392,721.		0.	5	6,19	97.
2 Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	d ab	ove) wh	o re	ceived more than \$100,	000 of reportable	Э			3
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director, trust	ee, k	кеу е	mple	oye	e, or	hig	hest compensated empl	oyee on				
line 1a? If "Yes," complete Schedule J for su											3		X
4 For any individual listed on line 1a, is the su and related organizations greater than \$150			-					•	-		4	х	
5 Did any person listed on line 1a receive or a			•										
rendered to the organization? If "Yes," com											5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest cor the organization. Report compensation for t	•	-							· · · · · · · · · · · · · · · · · · ·	oensat	ion fro	om	
(A)						<u> </u>	T	(B)			(C	;)	
Name and business	address	NC	ONE	3			\dashv	Description of s	ervices	С	ompei	nsatior	1
							\dashv						
							\dashv						
2 Total number of independent contractors (ir \$100,000 of compensation from the organiz		ot lin	nited	to t	thos 0		ted	above) who received mo	ore than				

31-1650883

		Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
		Officer if Gericadic G contains a response	or note to any iin	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
							Sections 512 - 514
nts nts		Federated campaigns1a					
ira ou		Membership dues1b					
s, (Am	С	Fundraising events 1c					
Sift ar	d	Related organizations 1d					
s, (mi	е	Government grants (contributions) 1e					
Sign	f	All other contributions, gifts, grants, and					
out		similar amounts not included above 1f 6,	260,479.				
Ē	a	Noncash contributions included in lines 1a-1f 1g \$					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f		6,260,479.			
			Business Code				
ø.	2 a	SUBSCRIPTION REVENUE	516210	95,852.	95,852.		
ķ		ADVERTISING	541800	93,726.	293.	93,433.	
Ser		PRESS RELEASE INCOME	516210	82,167.		22,715.	
m S		CONTRACTUAL INCOME	516210	49,500.	49,500.	22,713.	
gra Re			516210	4,615.	4,615.		
Program Service Revenue		REPRINT INCOME	210210	4,013.	4,013.		
ш.		All other program service revenue		325,860.			
-		Total. Add lines 2a-2f		343,000.			
	3	Investment income (including dividends, intere		E7 204			F7 204
		other similar amounts)		57,294.			57,294.
	4	Income from investment of tax-exempt bond p	roceeds	0.7.7	0.77		
	5	Royalties		877.	877.		
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a	1,077.				
	b	Less: cost or other basis					
ē		and sales expenses 7b	2,790.				
enr	С	Gain or (loss) 7c	-1,713.				
Revenue		Net gain or (loss)		-1,713.			-1,713.
er		Gross income from fundraising events (not		,			,
Ğ	O u	including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18 8a					
	h	Less: direct expenses 8b					
		Net income or (loss) from fundraising events	<u> </u>				
	э а	Gross income from gaming activities. See					
		Part IV, line 19 9a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities	 T				
	10 a	Gross sales of inventory, less returns					
		and allowances10a					
		Less: cost of goods sold 10b					
-	С	Net income or (loss) from sales of inventory	T				
<u>s</u>			Business Code				
eon	11 a						
Miscellaneous Revenue	b						
cel 3ev	С						
Mis		All other revenue					
		Total. Add lines 11a-11d		6 640 505	010 500	116 116	FF 504
	12	Total revenue See instructions		6.642.797.	1 210 589.	1 1 1 h 1 1 X X .	. אא א א או

Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising expenses (B)
Program service
expenses (C) Management and general expenses (A) Total expenses Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 20,500. 20,500. individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 184,914. 22,800. 20,063. 142,051. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 990,573. 760,958. 122,138. 107,477. 7 Pension plan accruals and contributions (include 54,040. 41,514. 6,663. 5,863. section 401(k) and 403(b) employer contributions) 277,603. 213,255. Other employee benefits 34,228. 30,120. 9 10 Payroll taxes 11 Fees for services (nonemployees): Management 28,349. 18,316. 10,033. Legal 69,377. 69,377. Accounting Lobbying Professional fundraising services. See Part IV, line 17 353. 353. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 1,059,904. 952,801. 73,241. 33,862. column (A), amount, list line 11g expenses on Sch O.) <u>22,</u>527. 22,527.Advertising and promotion 12 6,835. 5,250. 843. 742. 13 Office expenses 54,150. 41,598. 6,677. 5,875. 14 Information technology Royalties 15 9,466.7,272. 1,027. 1,167. 16 Occupancy 47,460. 36,317. 11,143. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 75,345. 75,345. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 4,116. 33,380. 25,642. 3,622. Depreciation, depletion, and amortization 22 22,675. 17,419. 2,796. 2,460. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 40,611. 31,499. 4,847. 4,265. LICENSE AND SUBSCRIPTIO PROCESSING FEES 12,967. 9,961. 1,599. 1,407. 10,125. 10,125. TRAINING AND DEVELOPMEN 1,776. 219. 193. d REGISTRATION FEES 1,364. e All other expenses _ 3,022,930. 2,433,714. 361,097. 228,119. Total functional expenses. Add lines 1 through 24e 25 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)

Form 990 (2022)
Part X Balance Sheet

Par	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to any lin	e in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		285,439.	1	2,919,911.	
	2	Savings and temporary cash investments			348,506.	2	1,195,084.
	3	Pledges and grants receivable, net			2,012,000.	3	2,193,608.
	4	Accounts receivable, net			17,442.	4	29,381.
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su	bstantial cont	ributor, or 35%			
		controlled entity or family member of any of t	hese persons			5	
	6	Loans and other receivables from other disqu	ualified person				
		under section 4958(f)(1)), and persons descri	bed in section	4958(c)(3)(B)		6	
Ø	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use		8			
Ä	9	Prepaid expenses and deferred charges			48,563.	9	60,608.
	10a	Land, buildings, and equipment: cost or other	er				
		basis. Complete Part VI of Schedule D	10a	38,296.			
	b	Less: accumulated depreciation	16,626.	10c	14,650.		
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, lir		12			
	13	Investments - program-related. See Part IV, li		13			
	14	Intangible assets	55,563.	14	28,379.		
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must e			2,784,139.	16	6,441,621.
	17	Accounts payable and accrued expenses			126,842.	17	175,740.
	18	Grants payable	00 515	18	16 242		
	19	Deferred revenue		22,715.	19	16,348.	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
es	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, su		ributor, or 35%			
iab.		controlled entity or family member of any of t	-			22	
_	23	Secured mortgages and notes payable to un		·····		23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,		1			
		parties, and other liabilities not included on li	•	•			
		of Schedule D			149,557.	25	192,088.
	26			X	149,337.	26	192,000.
S		Organizations that follow FASB ASC 958, of and complete lines 27, 28, 32, and 33.	check here	A			
nce	27	Net assets without donor restrictions			482,114.	27	358,207.
ala	28	Net assets with donor restrictions			2,152,468.	28	5,891,326.
g B	20	Organizations that do not follow FASB AS			2,132,400.	20	3,031,320.
Fu		and complete lines 29 through 33.					
ō	29	Capital stock or trust principal, or current fun	ıde			29	
ets	30	Paid-in or capital surplus, or land, building, o			30		
Ass	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			2,634,582.	32	6,249,533.
Z	33	Total liabilities and net assets/fund balances			2,784,139.	33	6,441,621.
	- 55	Total nabilities and not assets/fully balances			-,,	55	0,, 021.

Form **990** (2022)

Pa	rt XI │ Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
		1			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,64		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,02	2,9	<u> 30.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	3,61	9,8	<u>67.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,63		
5	Net unrealized gains (losses) on investments	5	_	4,9	<u> 16.</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	6,24	9,5	<u>33.</u>
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis X 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	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	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	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				
			Form	990	(2022)

232012 12-13-22

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

RELIGION NEWS FOUNDATION 31-1650883 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) RELIGION NEWS 54-1486927 34,887 ASSOCIATION Х 34.887. 0.

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	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						
	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)						
6	Public support. Subtract line 5 from line 4.						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
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.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for th	ne organization's fi				01(c)(3)	_
	organization, check this box and stop	here			•••••		
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11, o	column (f))		14	%
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2022. If the	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m	ore, check this box	and
	$\ensuremath{\text{stop}}$ here. The organization qualifies		•				
b	33 1/3% support test - 2021. If the	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	- 2022. If the org	anization did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10% o	or more,
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organization	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is 1	10% or
	more, and if the organization meets the	ne facts-and-circum	nstances test, ched	ck this box and st	top here. Explain i	n Part VI how the	
	organization meets the facts-and-circu		-	•			
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	<u> </u>

Schedule A (Form 990) 2022 RELIGION NEWS FOUNDATION | Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Sed	ction A. Public Support	siow, picase comp	oicte i art ii.j				
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, 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						
	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.)						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(a) 2010	(6) 2019	(6) 2020	(4) 2021	(6) 2022	(i) iotai
	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						
	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	J		,	•	() ()	· —
	check this box and stop here						
	ction C. Computation of Publi					 	
	Public support percentage for 2022 (li	, ,,,	•	column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves			. 10 1 (0)		14-1	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	% 7 in
198	33 1/3% support tests - 2022. If the						
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2021. If the	organization did r	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	anization qualifies a	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

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.)

	Yes	No
1	Х	
2		X
3a	Х	
3b	х	
3с	Х	
4a		Х
4b		
4c		
5a		Х
5b		
5c		
6		X
7		X
		v
8		Х
9a		Х
9b		Х
9c		X
100		Х
10a		-22

Par	t IV	Supporting Organizations (continued)			
	•			Yes	No
11	Has th	he organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	-	elow, the governing body of a supported organization?	11a		Х
b	A fam	illy member of a person described on line 11a above?	11b		X
С	A 35%	6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
		<i>in</i> Part VI.	11c		X
Sec	tion E	3. Type I Supporting Organizations			
				Yes	No
1	Did th	ne 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,			
		ors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
		ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
		orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	Х	
2		ne organization operate for the benefit of any supported organization other than the supported			
	organ	ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part \	now providing such benefit carried out the purposes of the supported organization(s) that operated,			
	super	vised, or controlled the supporting organization.	2		X
Sec	tion C	C. Type II Supporting Organizations			
				Yes	No
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trus	stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or ma	nagement of the supporting organization was vested in the same persons that controlled or managed			
	the su	pported organization(s).	1		
Sec	tion L	D. All Type III Supporting Organizations			
				Yes	No
1	Did th	ne organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organ	ization'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			
	organ	ization'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			
	organ	ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	,	ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	-	ason of the relationship described on line 2, above, did the organization's supported organizations have a			
	•	cant voice in the organization's investment policies and in directing the use of the organization's			
		ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	_		
800	suppo	orted organizations played in this regard. E. Type III Functionally Integrated Supporting Organizations	3		
Jec					
1		k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
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.			
C		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see institute Text Annual lines On and Oh halow.	truction		NI.
2		ties Test. Answer lines 2a and 2b below.		Yes	No
а		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
		upported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		e supported organizations and explain how these activities directly furthered their exempt purposes,			
		he organization was responsive to those supported organizations, and how the organization determined	0-		
h		hese activities constituted substantially all of its activities.	2a		
D		ne activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
		r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		If the reasons for the organization's position that its supported organization(s) would have engaged in	2h		
2		activities but for the organization's involvement.	2b		
3		nt of Supported Organizations. Answer lines 3a and 3b below. The organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а		es of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	За		
h		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ju		

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations						
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.								
	All other Type III non-functionally integrated supporting organizations mus								
Sect	on 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							
	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)					
1	Aggregate fair market value of all non-exempt-use assets (see								
	instructions for short tax year or assets held for part of year):								
а	Average monthly value of securities	1a							
	Average monthly cash balances	1b							
	Fair market value of other non-exempt-use assets	1c							
d	Total (add lines 1a, 1b, and 1c)	1d							
	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	on 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-functional	ally integrated	d Type III supporting orga	nization (see					
	instructions).	, ,		,					

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

c Excess from 2020d Excess from 2021e Excess from 2022

Schedule A (Form 990) 2022 RELIGION NEWS FOUNDATION	31-1650883 Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17. Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part IV, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any add (See instructions.)	es 1 and 2; Part IV, Section C, art V, Section B, line 1e; Part V,
SCHEDULE A, PART IV, SECTION A, LINE 3B	
THE ORGANIZATION RETAINS A COPY OF THE IRS DETERMINATION L	ETTER OF ITS
SUPPORTED ORGANIZATION. THE ORGANIZATION ALSO RECEIVED A CO	OPY OF THE
SUPPORTED ORGANIZATION'S PRO FORMA SUPPORT TEST SHOWING TH	AT IT MEETS
THE 509(A)(2) TEST.	
SCHEDULE A, PART IV, SECTION A, LINE 3C	
THE SUPPORTED ORGANIZATION PROVIDES GRANT AND CONTRACTED R	EVENUE FUNDS
TO PAY FOR EDUCATIONAL SERVICES. TRAINING AND EDUCATION IS	THE
QUALIFIED CHARITABLE PURPOSE OF THE ORGANIZATION. STIPEND	AGREEMENTS
ARE SIGNED WITH SUMS DOCUMENTED FOR ALL CONFERENCE SCHOLAR	SHIP EXPENSES
TO THE SUPPORTED ORGANIZATION.	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

RELIGION NEWS FOUNDATION

Employer identification number 31-1650883

Pai	TI Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	vriting that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	conferring
_	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	`	
	Preservation of land for public use (for example, recreat	ion or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		1 1
b			
	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included in (c) acquired a		
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax
	year		
4	Number of states where property subject to conservation ease		
5	Does the organization have a written policy regarding the peri		
_	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing con	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handle	ling of violations, and enforcing conserva	ation easements during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(i)
Ū	and section 170(h)(4)(B)(ii)?	•	
9	In Part XIII, describe how the organization reports conservation		
·	balance sheet, and include, if applicable, the text of the footnote	•	
	organization's accounting for conservation easements.		ionic that goodhood the
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement a	and balance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in for	urtherance of public
	service, provide in Part XIII the text of the footnote to its finan-	cial statements that describes these iten	ns.
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement and	balance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furt	herance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(m) 4		•
2	If the organization received or held works of art, historical trea	sures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under FASB AS	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		

1	6	5	0	8	8	3	Page	2
---	---	---	---	---	---	---	------	---

Par	rt III Organizations Maintaining Co	llections of Ar	t, Histo	orical Tre	easures, o	r Other	Similar	Assets	(contin	nued)
3	Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its									
	collection items (check all that apply):									
а	Public exhibition	c	i 🗌	Loan or exc	hange progra	am				
b	Scholarly research	e	, .	Other						
С	Preservation for future generations									
4	Provide a description of the organization's coll	lections and explair	n how th	ey further th	ne organizatio	on's exem	pt purpos	e in Part	XIII.	
5	During the year, did the organization solicit or	receive donations	of art, his	storical trea	sures, or othe	er similar a	ssets			
	to be sold to raise funds rather than to be main	ntained as part of t	he organ	ization's co	llection?				Yes	☐ No
Par	rt IV Escrow and Custodial Arrang	ements. Comple	ete if the	organizatio	n answered '	"Yes" on F	orm 990,	Part IV,	line 9, or	
	reported an amount on Form 990, Part			_						
1a	Is the organization an agent, trustee, custodia	n or other intermed	liary for o	contribution	s or other ass	sets not in	cluded			
	on Form 990, Part X?							\square	Yes	☐ No
b										
									Amount	t
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year									
f	Ending balance						1f			
2a							y?		Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII. (Check here if the ex	planatio	n has been	provided on	Part XIII				
	rt V Endowment Funds. Complete if).			
		(a) Current year	(b) P	rior year	(c) Two yea	rs back (d) Three ye	ears back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	011 111 1 1 1 1111									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curre	nt year end balance	e (line 1c	ı, column (a)) held as:				•	
а	Board designated or quasi-endowment		%	,, ,	,,					
b	Permanent endowment	%	_							
С	Term endowment 9/									
	The percentages on lines 2a, 2b, and 2c should	ld equal 100%.								
За	Are there endowment funds not in the possess	sion of the organiza	ation that	t are held ar	nd administer	red for the	,			
	organization by:								[Yes No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organizati								3b	
4	Describe in Part XIII the intended uses of the o	organization's endo	wment f	unds.						
Par	rt VI Land, Buildings, and Equipme	ent.								
	Complete if the organization answered	"Yes" on Form 990), Part IV	, line 11a. S	See Form 990	, Part X, li	ne 10.			
	Description of property	(a) Cost or o	ther	(b) Cost	t or other	(c) Ac	cumulated	b	(d) Bool	k value
		basis (investr	nent)	basis	(other)	dep	reciation			
1a	Land									
b	Buildings									
С	Leasehold improvements									
d		I		3	8,296.		23,64	6.	14	4,650.
е	Other									
Total	I. Add lines 1a through 1e. (Column (d) must ea	ual Form 990. Part	X. colum	n (B). line 1	0c.)				14	4,650.

Part VII	Investments - Other Securities. Complete if the organization answered "Yes"	on Form 990 Part IV line	11h See Form 990 Part X line 12	
(a) Descrip	otion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
	al derivatives	,		
	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.			
	Complete if the organization answered "Yes"	on Form 990, Part IV, line		
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.	F 000 D-+ IV I'	44 d O Faura 000 Davi V line 45	
	Complete if the organization answered "Yes"	Description	11d. See Form 990, Part X, line 15.	(b) Book value
	(a)	Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
<u>(5)</u>				
(6) (7)				
(8)				
(9)				
	ımn (b) must equal Form 990, Part X, col. (B) line	15)		
Part X	Other Liabilities.	, 10.,		<u> </u>
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	
1.	(a) Description of liability			(b) Book value
	deral income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	ımn (b) must equal Form 990, Part X, col. (B) line	e 25.)		
	for uncertain tax positions. In Part XIII, provide			nat reports the
	ation's liability for uncertain tax positions under			

Pai	rt XI	Reconciliation of Revenue per Audited Financial S		Revenue per Re	turn.	
		Complete if the organization answered "Yes" on Form 990, Part IV	, line 12a.			
1	Total	revenue, gains, and other support per audited financial statements			1	6,761,758.
2		unts included on line 1 but not on Form 990, Part VIII, line 12:	1 1			
а		ınrealized gains (losses) on investments		$\frac{-4,916.}{124,230.}$		
b		ated services and use of facilities		124,230.		
С		overies of prior year grants				
d		r (Describe in Part XIII.)	2d			110 214
		lines 2a through 2d			2e	119,314. 6,642,444.
3		ract line 2e from line 1			3	6,642,444.
4		unts included on Form 990, Part VIII, line 12, but not on line 1:	1 . 1	252		
a		stment expenses not included on Form 990, Part VIII, line 7b		353.		
b		r (Describe in Part XIII.)				252
		lines 4a and 4b			4c	353. 6,642,797.
5 Da	lotal	revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line Reconciliation of Expenses per Audited Financial S	<u>12.) </u>	Evnenses ner E	5 Paturr	
Га	I L AII	-		Expenses per r	teturi	ı .
_	T-4-1	Complete if the organization answered "Yes" on Form 990, Part IV				3,146,807.
1		expenses and losses per audited financial statements			1	3,140,007.
2		unts included on line 1 but not on Form 990, Part IX, line 25:	2a	124,230.		
a		ated services and use of facilities		124,230.		
b		year adjustments				
C C		r losses				
d		r (Describe in Part XIII.) lines 2a through 2d			2e	124,230.
3		ract line 2e from line 1			3	3,022,577.
4		unts included on Form 990, Part IX, line 25, but not on line 1:				3,022,377
а		stment expenses not included on Form 990, Part VIII, line 7b	4a	353.		
b		r (Describe in Part XIII.)				
		lines 4a and 4b	·		4c	353.
5		expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line			5	3,022,930.
Pa	rt XII	Supplemental Information.	2 10.7			
Prov	ide the	e descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an	d 4; Part IV, lines 1b	and 2b; Part V, line 4	; Part X	(, line 2; Part XI,
		d 4b; and Part XII, lines 2d and 4b. Also complete this part to provide				,
			•			

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection

Employer identification number

RELIGION NEWS FOUNDATION 31-1650883 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (e) If activity listed in (d) (c) Number of (d) Activities conducted in the region (f) Total (a) Region employees, agents, and expenditures offices (by type) (such as, fundraising, prois a program service, for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region EUROPE (INCLUDING ICELAND & GREENLAND) PROGRAM SERVICES JOURNALISM 96,556. SOUTH ASIA 0 0 PROGRAM SERVICES JOURNALISM 1,785. SUB-SAHARAN AFRICA 0 0 PROGRAM SERVICES JOURNALISM 2,660.

and 3b) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Schedule F (Form 990) 2022

101,001.

101,001.

3 a Subtotal **b** Total from continuation

> sheets to Part I Totals (add lines 3a

recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.										
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
exempt 501(c)(3) orga	inization by the IRS, o	or for which the grantee	ecognized as charities by the or counsel has provided a section.	tion 501(c)(3) equ	uivalency letter			1		

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.									
(a) Type of grant or assistance	(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)		

Page 4

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," 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)	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? If "Yes,"		
	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)	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? If "Yes," 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)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	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)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see		
	Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2022

Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
PART I, LINE 3:
THE ORGANIZATION ACCOUNTS FOR FOREIGN EXPENDITURES ACCORDING TO THE
ACCRUAL BASIS OF ACCOUNTING USING EXPENSE REPORTS AND OTHER APPROPRIATE
DOCUMENTATION.

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public

Inspection

Employer identification number Name of the organization 31-1650883 RELIGION NEWS FOUNDATION Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection X Yes criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other)

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

3 Enter total number of other organizations listed in the line 1 table

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
RNA SCHOLARSHIP	8	4,500.	0.		
INTERFAITH AMERICA FELLOWSHIP	4	16,000.	0.		
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.	
SCHEDULE I, PART I, LINE 2					
RNA SCHOLARSHIP - A SELECTION COMM	ITTEE COM	POSED OF F	RNA AND RNF	BOARD	
AND STAFF WAS FORMED TO REVIEW RNF,	RNA CONF	ERENCE SCH	IOLARSHIP		
APPLICATIONS. UPON SELECTION, ALL	GRANTEES	SIGN A "SC	CHOLARSHIP		
ACCEPTANCE AGREEMENT" WHEREBY THEY				D	
EXCLUSIVELY FOR TRAVEL TO THE RNA					
		.L. ANI PON	IDD HOT ODE	<i>D</i> 10	
ATTEND THE CONFERENCE MUST BE RETURN	KNED.				

SCHEDULE J (Form 990)

Compensation Information

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

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

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Attach to Form 990.

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

RELIGION NEWS FOUNDATION

Employer identification number 31-1650883

		103000	J	
Pa	art I Questions Regarding Compensation			
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
•	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?			Х
	Participate in or receive payment from an equity-based compensation arrangement?	4-		Х
•	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
J	contingent on the revenues of:			
_	-	5a		Х
d h	The organization?			X
Ŋ	Any related organization?	30		21
_	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			37
	The organization?	<u>6a</u>		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

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

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

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

CO AND PUBLISHER (i)		(B) Breakdown of W	I-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)	
CO AND PUBLISHER (i)			compensation	incentive	reportable	·			on prior Form 990
CO AND PUBLISHER (i)	(1) DEBORAH CALDWELL	(i)	175,644.			8,556.	708.	184,908.	0.
	CEO AND PUBLISHER		0.	0.	0.	0.	0.	0.	0.
		(i)							
		(i)							
		(i)							
		(ii)							
		(i)							
(i) (i) (ii) (ii) (ii) (iii) ((ii)							
(i) (ii) (ii) (iii)									
(ii) (ii) (iii) (i									
(i) (ii) (ii) (iii) (iii									
(i) (i) (ii) (ii) (ii) (iii) (iiii) (iiii) (iiiii) (iiiiiii) (iiiiiiii									
(i) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii									
(ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii									
(i) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii									
(ii) (ii) (ii) (ii) (iii) (iii) (iii) (iiii) (iiiiiiii									
(i) (ii) (ii) (iii)									
(ii) (i) (ii)									
(i)									
		(ii)							

Tartin Cappicinental information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 3:
IN SPRING OF 2023 A COMPENSATION REVIEW WAS PERFORMED BY BOARD CHAIR JOHN
TERRILL. THE BOARD CHAIR CONDUCTED A 360-DEGREE REVIEW OF CEO DEBORAH
CALDWELL. THIS REVIEW REQUESTED FEEDBACK FROM ALL BOARD MEMBERS, ALL
MEMBERS OF THE LEADERSHIP TEAM AND A SELF REVIEW BY THE CEO. COMPENSATION
WAS DETERMINED BY REVIEW OF 360-DEGREE REVIEW RESULTS AS WELL AS A REVIEW
OF THE MOST RECENT GUIDESTAR (CANDID) NONPROFIT COMPENSATION REPORTS
AVAILABLE IN SPRING OF 2023. THIS REVIEW WAS CONDUCTED IN CLOSED EXECUTIVE
SESSION. JOHN TERRILL COMPLETED CONTEMPORANEOUS SUBSTANTIATION OF THE
DELIBERATION AND DECISION BY EMAIL TO OTHER BOARD MEMBERS.

SCHEDULE 0 (Form 990)

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.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

RELIGION NEWS FOUNDATION

Employer identification number 31-1650883

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
FROM RELIGION NEWS ASSOCIATION, THE RELIGION COMMUNICATORS COUNCIL, THE
ASSOCIATED CHURCH PRESS, AND WILBUR AWARDS.
AUDIENCE DEVELOPMENT: GREW WEBSITE TRAFFIC BY BETTER UNDERSTANDING THE
RNS AUDIENCE TO DEVELOP A MORE LOYAL READERSHIP; ENLARGED RNS'S EMAIL
LIST AND SOCIAL FOLLOWING; AND EXPANDED RNS'S DIGITAL FOOTPRINT,
ACHIEVING MILESTONES IN WEB AND SOCIAL MEDIA.
REVENUE GROWTH, DEVELOPMENT AND DIVERSIFICATION: GREW AND DIVERSIFIED
RNS'S REVENUE THROUGH INITIATIVES INCLUDING DEVELOPING A PLATFORM FOR
SMALL INDIVIDUAL AND MAJOR DONORS; EXPANDED FUNDRAISING OUTREACH TO
FOUNDATIONS AND HIGH NET WORTH INDIVIDUALS.
ORGANIZATIONAL DEVELOPMENT AND OPERATIONS: ALIGNED RNS/S PROCEDURES
WITH NONPROFIT JOURNALISM BEST PRACTICES AND IMPROVED RNS'S
TECHNOLOGICAL/WEB CAPACITY.
IMPACT: ENHANCED RNS'S REACH BY TAKING INTO ACCOUNT OUR READERS'
COMMENTS AND INCREASING CITATIONS AND REPUBLICATION IN OTHER
PUBLICATIONS.
FORM 990, PART V, LINE 2B
RNF USES A THIRD PARTY PROFESSIONAL EMPLOYER ORGANIZATION (PEO), AND
THE EMPLOYEES ARE REPORTED UNDER PEO'S EIN.

Schedule O (Form 990) 2022 Page **2**

Name of the organization RELIGION NEWS FOUNDATION

Employer identification number 31-1650883

FORM 990, PART VI, SECTION A, LINE 7A:

THE RELIGION NEWS ASSOCIATION HAS THE RIGHT TO APPOINT 51% OF THE MEMBERS

OF THE BOARD OF THE RELIGION NEWS FOUNDATION, WITH THE PRESUMPTION THAT THE

SUPPORTED ORGANIZATION'S (SO) BOARD OF DIRECTORS WOULD APPROVE CANDIDATES

WHO HAVE BEEN VETTED AND APPROVED BY A COMMITTEE MADE UP EQUALLY OF MEMBERS

APPOINTED BY THE SUPPORTED ORGANIZATION'S (SO) BOARD OF DIRECTORS AND THOSE

ELECTED BY THE FOUNDATION'S BOARD OF TRUSTEES.

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

AN INDEPENDEND ACCOUNTING FIRM PREPARES AND REVIEW THE FORM 990. THE FORM
990 IS THEN REVIEWED BY THE FINANCE DIRECTOR AND CEO. ANY QUESTIONS OR
CONCERNS MANAGEMENT HAS ARE ADDRESSED AND ANY CORRECTIONS OR CLARIFICATIONS
ARE MADE BEFORE FILING. A COPY OF THE FORM 990 IS PROIVDED TO THE BOARD OF
DIRECTORS BEFORE THE FORM IS FILED.

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

DIRECTORS, OFFICERS, AND COMMITTEE MEMBERS ARE REQUIRED TO DISCLOSE ANY

CONFLICTS OF INTEREST. RELIGION NEWS FOUNDATION REGULARLY MONITORS THE

POTENTIAL FOR CONFLICTS OF INTEREST AND RAISES POTENTIAL ISSUES WHEN THEY

ARISE FOR EVALUATION. IF A CONFLICT IS DISCLOSED, THE BOARD OF MEMBERS OF

COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS SHALL DECIDE IF A CONFLICT

OF INTEREST EXISTS. IF A CONFLICT DOES EXIST, THE PERSON IS REQUIRED TO

LEAVE THE MEETING DURING THE DISCUSSION AND VOTE ON THE TRANSACTION OR

ARRANGEMENT.

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

IN SPRING OF 2023 A COMPENSATION REVIEW WAS PERFORMED BY BOARD CHAIR JOHN

<u>Schedule O (Form 990) 2022</u> Page **2**

Schedule O (Form 990) 2022 Name of the organization	Page 2 Employer identification number
RELIGION NEWS FOUNDATION	31-1650883
TERRILL. THE BOARD CHAIR CONDUCTED A 360-DEGREE REVIEW OF	CEO DEBORAH
CALDWELL. THIS REVIEW REQUESTED FEEDBACK FROM ALL BOARD ME	EMBERS, ALL
MEMBERS OF THE LEADERSHIP TEAM AND A SELF REVIEW BY THE CE	CO. COMPENSATION
WAS DETERMINED BY REVIEW OF 360-DEGREE REVIEW RESULTS AS W	WELL AS A REVIEW
OF THE MOST RECENT GUIDESTAR (CANDID) NONPROFIT COMPENSATI	ON REPORTS
AVAILABLE IN SPRING OF 2023. THIS REVIEW WAS CONDUCTED IN	CLOSED EXECUTIVE
SESSION. JOHN TERRILL COMPLETED CONTEMPORANEOUS SUBSTANTIA	TION OF THE
DELIBERATION AND DECISION BY EMAIL TO OTHER BOARD MEMBERS.	
FORM 990, PART VI, SECTION C, LINE 19:	
ALL GOVERING DOCUMENTS ARE MADE AVAILABLE UPON REQUEST	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
HR FEES:	
PROGRAM SERVICE EXPENSES	27,345.
MANAGEMENT AND GENERAL EXPENSES	4,389.
FUNDRAISING EXPENSES	3,862.
TOTAL EXPENSES	35,596.
CONSULTING FEES:	
PROGRAM SERVICE EXPENSES	516,613.
MANAGEMENT AND GENERAL EXPENSES	68,852.
FUNDRAISING EXPENSES	30,000.
TOTAL EXPENSES	615,465.
STRINGERS:	
PROGRAM SERVICE EXPENSES	80,791.
MANAGEMENT AND GENERAL EXPENSES	0.

Schedule O (Form 990) 2022 Page **2**

Schedule O (Form 990) 2022	Page 2
Name of the organization RELIGION NEWS FOUNDATION	Employer identification number 31–1650883
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	80,791.
CONTRACTED COLUMNISTS:	
PROGRAM SERVICE EXPENSES	101,929.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	101,929.
CONTRACTED JOURNALISTS:	
PROGRAM SERVICE EXPENSES	191,809.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	191,809.
WIRE SERVICE:	
PROGRAM SERVICE EXPENSES	34,314.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	34,314.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,059,904.
FORM 990, PART XII, LINE 2C	
THE FOUNDATION HAS AN AUDIT COMMITTE THAT ASSUMES THE RES	SPONSIBILITY
FOR OVERSIGHT OF THE AUDIT, REVIEW, OR COMPILATION OF THE	
STATEMENTS. NO CHANGE HAS BEEN MADE TO THE PROCESS FROM	

SCHEDULE R (Form 990)

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

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

31-1650883

	(b)	(c)	(d)	(e)			(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)						g
RELIGION NEWS SERVICES, LLC								
C/O MU SCHOOL OF JOURNALISM, NEFF HALL, 309	1							
COLUMBIA, MO 65211	CHARITY	оніо	400	,665. 17	0,802.	RNF		
	-							
	-							
Part II Identification of Related Tax-Exempt Organizations during the tax year.	tions. Complete if the organization	n answered "Yes" on Form 990	0, Part IV, line 34, t	pecause it had one	or more	related tax-exer	mpt	
(a)	(b)	(c)	(d)	(e)		(f)	(g) 512(b)(13)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direc	ct controlling		512(b)(13) rolled
of related organization		foreign country)	section	status (if section		entity	ent	tity?
				501(c)(3))			Yes	No
RELIGION NEWS ASSOCIATION - 54-1486927	_							
PO #370258	_							
BROOKLYN, NY 11237	MEMBERSHIP ORGANIZATION	VIRGINIA	501(C)(6)					Х
	4							
	-							
	4							
		1			1		1	1

RELIGION NEWS FOUNDATION

Page 2

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)		(i)	((k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of end-of-year	Disprop	ortionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene	ral or	Percentage ownership
of related organization		(state or foreign	entity	(related, unrelated, excluded from tax under sections 512-514)	income	assets	alloca	tions?	20 of Schedule	partner?		Ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No	
							l	l		I	i l	

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		tion b)(13) rolled tity?
		country						Yes	No

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1a

Page 3

Yes No

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b	Gift, grant, or capital contribution to related organization(s)				1b						
С	Gift, grant, or capital contribution from related organization(s)				1c		X				
	Loans or loan guarantees to or for related organization(s)				1d		X				
е	Loans or loan guarantees by related organization(s)				1e		X				
f	Dividends from related organization(s)				1f		X				
g	Sale of assets to related organization(s)				1 g		X				
	Purchase of assets from related organization(s)				1h		X				
i	Exchange of assets with related organization(s)				1i		X				
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		_X_				
							Х				
k	k Lease of facilities, equipment, or other assets from related organization(s)										
ı	Performance of services or membership or fundraising solicitations for related organization	on(s)			11		_X_				
	Performance of services or membership or fundraising solicitations by related organization				1m		_X_				
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		_X_				
0	Sharing of paid employees with related organization(s)				10		X				
р	Reimbursement paid to related organization(s) for expenses				1 p		_X_				
q	Reimbursement paid by related organization(s) for expenses				1q		X				
	Other transfer of cash or property to related organization(s)				1r		<u>X</u>				
S	Other transfer of cash or property from related organization(s)				1s		X				
2	If the answer to any of the above is "Yes," see the instructions for information on who mu	ust complete thi	s line, including covered re	lationships and transaction thresholds.							
	· · · · · · · · · · · · · · · · · · ·	(b) ransaction type (a-s)	(c) Amount involved	(d) Method of determining amount inv	olved						
1)											
-,											
2)											
-											
3)											
4)											
			_								
5)											
6)											
32163	3 09-14-22			Schedule	R (Forn	n 990)	2022				

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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Disprition allocat	opor- late tions?	General manage partner	(k) Percentage ownership
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