Form	99	0
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Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

OMB No. 1545-0047

A	Fort	he 2023 calen	dar year, or tax year beginning , 2023, and ending			. 20	
		if applicable:			mplover i	dentification nu	mber
U		ddress change	SUSTAINABLE JOURNALISM FOUNDATION	_		96856	
	_	-	3800 N CLASSEN BLVD STE C-80		elephone		
	_	ame change	OKLAHOMA CITY, OK 73118				
		itial return			570-6	34-5837	
		nal return/terminated				Å	
		mended return	F		iross recei		666,821.
	A	pplication pending		H(a) Is this a grou			Yes X No
			Same As C Above	H(b) Are all subord If "No," attach	n a list. Se	e instructions.	Yes No
<u> </u>		exempt status:	X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527				
J				H(c) Group exemp			
ĸ		n of organization:	X Corporation Trust Association Other L Year of formation	on: 2019	M State	e of legal domici	le: OK
Pa	rt I	Summar	у				
	1	Briefly descri	be the organization's mission or most significant activities: See Sched	<u>ule_0</u>			
e							
an(
'ern	•		ox if the organization discontinued its operations or disposed of mo		6 :1		
Gol	2	Check this bo	ting members of the governing body (Part VI, line 1a)			3	6
8	4		dependent voting members of the governing body (Part VI, line 1b)			4	0
ies	5		of individuals employed in calendar year 2023 (Part V, line 2a)			5	0
Activities & Governance	6		of volunteers (estimate if necessary)			5	0
Aci	7a		ed business revenue from Part VIII, column (C), line 12			7a	0.
	b	Net unrelated	I business taxable income from Form 990-T, Part I, line 11			7b	0.
				Prior `	í ear	Cur	rent Year
е	8		and grants (Part VIII, line 1h)		468,356.		666,787.
Revenue	9		vice revenue (Part VIII, line 2g)				
eve	10		ncome (Part VIII, column (A), lines 3, 4, and 7d)		17	7.	34.
œ	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				666 001
	12		e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	8,373	3.	666,821.
	13		imilar amounts paid (Part IX, column (A), lines 1-3)				
	14		to or for members (Part IX, column (A), line 4)				
Se	15		er compensation, employee benefits (Part IX, column (A), lines 5-10)		0,073	3.	275,562.
Expenses	16a	Professional	fundraising fees (Part IX, column (A), line 11e)				
xpe	b	Total fundrais	sing expenses (Part IX, column (D), line 25) 35, 398.				
ш	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)	g	9,566	5.	107,788.
	18	Total expens	es. Add lines 13-17 (must equal Part IX, column (A), line 25)	35	9,639).	383,350.
	19	Revenue less	expenses. Subtract line 18 from line 12	10	8,734	1.	283,471.
or ces				Beginning of (Current Ye	ear Enc	d of Year
Net Assets or Fund Balances	20		(Part X, line 16)		1,431	L.	454,902.
t As: d B;	21	Total liabilitie	s (Part X, line 26)		().	0.
Fun	22	Net assets or	fund balances. Subtract line 21 from line 20	17	1,431	L.	454,902.
Pa	rt II	Signatur	e Block				· · · · · ·
Unde	er pena	Ities of perjury, I de	eclare that I have examined this return, including accompanying schedules and statements, and to the rer (other than officer) is based on all information of which preparer has any knowledge.	ne best of my know	vledge and	l belief, it is true	, correct, and
comp	olete. D	eclaration of prepa	rer (other than officer) is based on all information of which preparer has any knowledge.	T			
			<i>1</i> 0				
Sig	jn	Signature of	officer	Date			
He	re			resident			
			name and title				
			preparer's name Preparer's signature Date	Check	k it	PTIN	
Pai			Means, CPA	self-e	mployed	P0124	1223
Pre	epare	Firm's name					
Us	e Or	Firm's addre		Firm's	S EIN	73120217	/4
			OKLAHOMA CITY, OK 73116	Phone	e no. (4	405) 848	-1488
Ma	/ the	IRS discuss th	is return with the preparer shown above? See instructions			Х Үе	

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form	n 990 (2023)	SUSTAINABLE JOURNAI	LISM FOUNDATION	84-38968	56 Page 2
Par		ement of Program Servic			37
1		k if Schedule O contains a resp ribe the organization's mission:	onse or note to any line in this Part III		Х
•	See Sche				
	<u>500_5010</u>				
2	-		program services during the year which w	· · · ·	Vee V Ne
		cribe these new services on Sched			Yes X No
3			nake significant changes in how it cond	ducts, any program services?	Yes X No
		cribe these changes on Schedule (
4	Section 501	e organization's program service (c)(3) and 501(c)(4) organization e, if any, for each program servi	accomplishments for each of its three ns are required to report the amount o ce reported.	e largest program services, as measu f grants and allocations to others, the	red by expenses. total expenses,
4a	(Code:) (Expenses \$ 2	99,259. including grants of \$	478,510.)(Revenue \$	188,278.)
		, <u>NonDoc journalists</u>	produced important cove	erage of local, county,	state and
			ys, our team covered the		
			<u>a_comprehensive_manner</u> , with state-tribal relat		
			_ <u>2023_election_cycles,</u>		
			Project, which offers gr		
			oma that lost its tradit		n 2020. Our
	journal	ists revealed signif	icant_concerns_about_pro	pposed public projects c	arrying
	<u>multi-m</u>	<u>illion-dollar price</u>	tags.		
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4.	Codor) (Evenness C	including grants of C		
40	(Code:) (Expenses \$)	including grants of \$) (Revenue \$))
					·
4d		am services (Describe on Sched			
	(Expenses		cluding grants of \$) (Revenue \$)
4e	i otal progra	am service expenses	299,259.		Form 990 (2023)

Form 990 (2023) SUSTAINABLE JOURNALISM FOUNDATION

Pa	t IV Checklist of Required Schedules		-	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete		Yes	No
	Schedule A	1	X	
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates	2	Х	
4	for public office? If "Yes," complete Schedule C, Part I	3		X
-	in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian	0		Λ
5	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		Х
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		Х
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.			
a	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	
Ł	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
c	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
C	I 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
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
	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
1 4 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17		Х
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	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
Ł	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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		Х

Form 990 (2023)

84-3896856

Form 990 (2023) SUSTAINABLE JOURNALISM FOUNDATION

Par	t 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? <i>If "Yes," complete Schedule I, Parts I and III.</i>	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? <i>If "Yes," complete Schedule J</i> .	23		х
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.	25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		Х
	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? <i>If</i> "Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
	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		
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		Х
	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	Х	
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			

.F.	JOURNALTSM	FOUNDATION	84-3896856

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Form 990 (2023)

Yes

0

0

1c

No

1a

1b

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

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

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.....

Form	990 (2023) SUSTAINABLE JOURNALISM FOUNDATION 84-389685	6	F	Page 5						
Part	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)									
			Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return 2a									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b								
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х						
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								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х						
b	If "Yes," enter the name of the foreign country									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X						
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х						
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>						
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х						
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b								
	Organizations that may receive deductible contributions under section 170(c).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7u 7b								
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х						
d	If "Yes," indicate the number of Forms 8282 filed during the year									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g								
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
	Section 501(c)(7) organizations. Enter:									
	Initiation fees and capital contributions included on Part VIII, line 12 10a									
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b									
	Section 501(c)(12) organizations. Enter:									
	Gross income from members or shareholders									
12-	against amounts due or received from them.)	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120								
	Section 501(c)(29) qualified nonprofit health insurance issuers.									
	Is the organization licensed to issue qualified health plans in more than one state?	13a								
	Note: See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans									
с	Enter the amount of reserves on hand									
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х						
	If "Yes," see the instructions and file Form 4720, Schedule N.	10		Х						
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		^						
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would	17								
	result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17								

Form	1 990 (2023) SUSTAINABLE JOURNALISM FOUNDATION 84-3896856		F	Page 6
Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b b a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or char Schedule O. See instructions.	pelow nges	, and on	d for
	Check if Schedule O contains a response or note to any line in this Part VI.			. Х
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 1a 6 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent			
	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
	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		х
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
	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
	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? <i>If "Yes," provide the names and addresses on Schedule O</i>			Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	eveni	ie Co	ode.)
			Yes	-
	Did the organization have local chapters, branches, or affiliates?	10a		Х
	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?			
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i>	12c		
13	Did the organization have a written whistleblower policy?	13		Х
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?			

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?	16b			
Sec	ction C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed None			_	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 50 available for public inspection. Indicate how you made these available. Check all that apply.)1(c)(3	3)s onl	y)	
	Own website Another's website Upon request Other (explain on Schedule O)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements availa	ble to			

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

a The organization's CEO, Executive Director, or top management official.....

b Other officers or key employees of the organization.

taxable entity during the year?.....

If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.

the public during the tax year. See Schedule 0 20 State the name, address, and telephone number of the person who possesses the organization's books and records.

WILLIAM W SAVAGE III 804 NW 35TH ST OKLAHOMA CITY OK 73118 570-634-5837

Х

Х

Х

15a

15b

16a

Form 990 (2023) SUSTAINABLE JOURNALISM FOUNDATION	84-3896856	Page 7								
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highe Independent Contractors	est Compensated Employe	es, and								
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 endi organization's tax year.	ing with or within the									

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

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

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

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

		(C)								
(A) Name and title	(B) Average hours per week (list any hours for related organiza- tions below dotted line)	box.	unles er and	s per	rson i	than of s both r/truster mployee	an	(D) Reportable compensation from the organization (W-2/1099- MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099- MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) WILLIAM W SAVAGE III	40									
Trustee	0			Х				50,500.	0.	0.
(2) VICTORIA STILL Trustee	0	Х						0.	0.	0.
(3) GRACE FRANKLIN	0	Λ						0.	0.	0.
Trustee	0	Х						0.	0.	0.
(4) MICHAEL DUNCAN	0									
Secretary	0			Х				0.	0.	0.
(5) JIM QUILLEN	0									
Treasurer	0			Х				0.	0.	0.
WARREN_VIETH	0 0	-		v				0	0	0
Chairman (7)	U			Х				0.	0.	0.
		1								
(10)										
(11)										
(12)										
(13)	 									
BAA	TEEA0	107L	08/23	/23						Form 990 (2023)

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Part VII Section A. Officers, Directors, T	rustees,	Key	Em	iplo	bye	es, a	anc	Highest Com	pensated Emp	loyees	(conti	nued)
(A) Name and title	(B) Average hours per week	box, offic	unles er an	Posi neck i ss pei d a d	rson i irecto	than or s both r/truste	an e)	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations	compe	(F) ited amo f other isation	from
	(list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-NEC) MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	and	ganizati relatec inization	1
(15)		•										
(16)		•										
(17)		•										
(18)												
(19)												
(20)												
(21)		•										
(22)		•										
(23)												
(24)												
(25)												
1b Subtotal								50,500.	0.			0.
c Total from continuation sheets to Part VII, Se	ction A						. •	0.	0.			0.
d Total (add lines 1b and 1c)							-	50,500.	0.			0.
2 Total number of individuals (including but not limit from the organization 0	ed to those I	isted	abov	ve) v	who	receiv	ved	more than \$100,00	0 of reportable comp	ensatior	ו	
3 Did the organization list any former officer, dir	ector, truste	e. ke	ev ei	mpla	over	e. or h	niah	est compensated	employee		Yes	No
on line 1a? If "Yes, "complete Schedule J for s	uch individu	al								. 3		Х
4 For any individual listed on line 1a, is the sum the organization and related organizations gressuch individual	ater than \$1	50,0	00?	<i>lf</i> ")	Yes,	" con	nple	ete Schedule J for		. 4		Х
5 Did any person listed on line 1a receive or acc for services rendered to the organization? If "	rue comper <i>Yes," compl</i>	nsatio ete S	on fr Sche	om dule	any 9 <i>J f</i> a	unrel or suc	ate ch p	d organization or person	individual	. 5		Х
Section B. Independent Contractors 1 Complete this table for your five highest comp	oncotod ind	onon	don	1 001	otro	atore	tha	t received more th	222 \$100 000 of			
compensation from the organization. Report comp	ensation for	the c	alen	dar <u>y</u>	year	endir	ina ng w	vith or within the or	ganization's tax year			
(A) Name and business a	ddress							(B) Description of	of services	(Compe	;) nsatio	n
2 Total number of independent contractors (includin \$100,000 of compensation from the organization	•	ited t	o tho	ose l	isteo	d abov	/e) \	who received more	than			

Form 990 (2023) SUSTAINABLE JOURNALISM FOUNDATION Part VIII Statement of Revenue

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ı uı	• • •	Check if Schedule O contains a re	esponse or note to any	line in this Part VI	11		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
হ, হ	1a		a				
Contributions, Gifts, Grants, and Other Similar Amounts	b		b				
A S		-	c				
lar Gin		-	d				
Sir, S		Government grants (contributions) 1 All other contributions, gifts, grants, and	e				
ributio Other			f 666,787.				
đi	g	Noncash contributions included in	g				
Con	h	lines 1a-1f		666,787.			
			Business Code	000,707.			
Program Service Revenue	2a						
Be	b						
vice	С						
Sen	d		_				
an	e						
ogr	t	All other program service revenue.					
ā	_	Total. Add lines 2a-2f					
	3	Investment income (including dividends other similar amounts)	s, interest, and	34.	34.		
	4	Income from investment of tax-exen	npt bond proceeds	54:	51.		
	5	Royalties					
		(i) Real	(ii) Personal				
		Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)					
	7a	Gross amount from sales of assets					
		other than inventory /a					
	D	Less: cost or other basis and sales expenses 7b					
	с	Gain or (loss) 7c					
	d	Net gain or (loss).					
e	8a	Gross income from fundraising events					
ent		(not including \$					
ŝ		of contributions reported on line 1c). See Part IV, line 18	8-				
Other Revenue	Ь	Less: direct expenses	8a 8b				
Ť		Net income or (loss) from fundraisin					
0		Gross income from gaming activities.					
	Ja	See Part IV, line 19.	9a				
		Less: direct expenses	9b				
	С	Net income or (loss) from gaming a	ctivities				
	10a	Gross sales of inventory, less					
	h	returns and allowances	10a 10b				
		Net income or (loss) from sales of ir					
5			Business Code				
Miscellaneous Revenue	11a						
ane	11a b c d						
eve	с						
, S v							
		Total. Add lines 11a-11d					
	12	Total revenue. See instructions		666,821.	34.	0.	0.

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 r	(A)	(B)	(C)	(D)
6b, 7b	t include amounts reported on lines , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
0	Grants and other assistance to domestic organizations and domestic governments.				
2 G	arants and other assistance to domestic ndividuals. See Part IV, line 22				
0	Grants and other assistance to foreign rganizations, foreign governments, and for- ign individuals. See Part IV, lines 15 and 16				
4 B	Benefits paid to or for members				
t r	Compensation of current officers, directors, rustees, and key employees	50,500.	50,500.	0.	0
d	Compensation not included above to lisqualified persons (as defined under ection 4958(f)(1)) and persons described n section 4958(c)(3)(B)	0.	0.	0.	0
	Other salaries and wages	187,810.	143,773.	14,746.	29,291
8 P (i	Pension plan accruals and contributions include section 401(k) and 403(b) mployer contributions)	1077010.	110/770.	11//10.	257251
	Other employee benefits				
10 P	Payroll taxes	37,252.	28,517.	2,925.	5,810
11 F	ees for services (nonemployees):				
	lanagement				
b∟	egal	5,285.		5,285.	
сA					
d∟	obbying				
еP	rofessional fundraising services. See Part IV, line 17				
f Ir	nvestment management fees				
	ther. (If line 11g amount exceeds 10% of line 25, column				
	A), amount, list line 11g expenses on Schedule O.)	10 100	10 100		
		12,168.	12,168.		
	Office expenses				
	Royalties				
		E 10E	- 10-		
		7,127.	7,127.		
е	Payments of travel or entertainment xpenses for any federal, state, or local ublic officials				
	Conferences, conventions, and meetings				
20 Ir	nterest				
21 P	Payments to affiliates				
22 D	Depreciation, depletion, and amortization	1,300.		1,300.	
	nsurance	1,508.		1,508.	
C 0 0	Other expenses. Itemize expenses not overed above. (List miscellaneous expenses n line 24e. If line 24e amount exceeds 10% f line 25, column (A), amount, list line 24e xpenses on Schedule O.)				
	Contract_Labor	52,842.	52,842.		
	Office Supplies & Software	11,730.	02/012.	11,730.	
	Rent	9,700.		9,700.	
	PayPal Fees	1,979.	1,979.	5,100.	
	All other expenses	4,149.	2,353.	1,499.	297
	otal functional expenses. Add lines 1 through 24e	383,350.	299,259.	48,693.	35,398
26 J th jc C	oint costs. Complete this line only if ne organization reported in column (B) oint costs from a combined educational ampaign and fundraising solicitation. Check here if following		233,233.		
S	OP 98-2 (ASC 958-720)				

Form 990 (2023) SUSTAINABLE JOURNALISM FOUNDATION Part X Balance Sheet

10	ΠLΛ	Check if Schedule O contains a response or note to	o anv li	ine in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing			90,650.	1	452,248.
	2	Savings and temporary cash investments			77,921.	2	,
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these per	l contri	butor, or 35%		5	
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), and persons described in section				6	
	7	Notes and loans receivable, net.				7	
S	8	Inventories for sale or use		-		8	
Assets	9	Prepaid expenses and deferred charges				9	
As	-		1 1				
	TUa	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	7,053.			
		Less: accumulated depreciation		4,399.	2,860.	10c	2,654.
	11	Investments – publicly traded securities			· · ·	11	
	12	Investments - other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11.				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line	33)		171,431.	16	454,902.
	17	Accounts payable and accrued expenses				17	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
ies	21	Escrow or custodial account liability. Complete Part I				21	
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribu- controlled entity or family member of any of these per		22			
Ξ	23	Secured mortgages and notes payable to unrelated th				23	
	24	Unsecured notes and loans payable to unrelated third				24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	•			25	
	26	Total liabilities. Add lines 17 through 25			0.	26	0.
es.		Organizations that follow FASB ASC 958, check here					
anc	07	and complete lines 27, 28, 32, and 33.		_		07	
sala	27	Net assets without donor restrictions				27	
dE	28	Net assets with donor restrictions				28	
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.					
IO S	29	Capital stock or trust principal, or current funds			26,603.	29	283,472.
je tr	30	Paid-in or capital surplus, or land, building, or equipm				30	
As:	31	Retained earnings, endowment, accumulated income,			144,828.	31	171,430.
et	32	Total net assets or fund balances			171,431.	32	454,902.
	33	Total liabilities and net assets/fund balances			171,431.	33	454,902.
BA	A		IEEA01	11L 08/23/23			Form 990 (2023)

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Form	990 (2023) SUSTAINABLE JOURNALISM FOUNDATION 84-	38968	356	Pa	ge 12	
Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI.					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	(666,8	321.	
2	Total expenses (must equal Part IX, column (A), line 25)	2		83,3		
3	Revenue less expenses. Subtract line 2 from line 1	3	2	83,4	171.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4		.71,4		
5	Net unrealized gains (losses) on investments.	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
D	column (B))	10	4	54,9	02.	
Par	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990: X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both.	ved on a	3			
Ь			2b		х	
U	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.					
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audi review, or compilation of its financial statements and selection of an independent accountant?	t,	2c			
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Guidance, 2 C.F.R. Part 200, Subpart F?	Uniforr	n 3a		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required au or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b			
BAA	TEEA0112L 08/23/23		Forr	n 990 ((2023)	

SCHEDULE	Α
(Form 990)	

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.

OMB No. 1545-0047 2023

Open to Public

Departi Interna	Department of the Treasury nternal Revenue ServiceGo to www.irs.gov/Form990 for instructions and the latest information.Inspection								
Name	of the	organization						Employer identifica	ation number
SUS	TA	INABLE JO	URNALISM B	FOUNDATION				84-389685	6
Par					rganizations must				ctions.
The c	rga	nization is no	t a private found	dation because it is: (For lines 1 through 12,	check o	nly one	box.)	
1		A church, con	vention of church	es, or association of cl	nurches described in sec	tion 1 70(b)(1)(A)(i).	
2		A school des	cribed in sectio	n 170(b)(1)(A)(ii). (Att	ach Schedule E (Form	990).)			
3					ization described in sec				
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's								
	name, city, and state:								
5			ion operated for b)(1)(A)(iv). (Co		ge or university owned	or oper	ated by	a governmental unit de	escribed in
6		A federal, sta	ate, or local gov	ernment or governme	ental unit described in s	section 1	70(b)(1)	(A)(v).	
7	Х	An organization in section 17	on that normally r 7 0(b)(1)(A)(vi). (eceives a substantial p Complete Part II.)	part of its support from a	governm	ental uni	t or from the general pul	blic described
8		A community	rtrust described	in section 170(b)(1)(A)(vi). (Complete Part	ll.)			
9		An agricultura	I research organi	zation described in sec	tion 170(b)(1)(A)(ix) oper	ated in c	onjunctio	on with a land-grant colle	ege
		-	-		e (see instructions). Enter		-	and state of the college of	or
10		An organizat from activitie	ion that normall s related to its encome and unre	y receives (1) more the exempt functions, sub	nan 33-1/3% of its supp bject to certain exception e income (less section	oort from	contrib (2) no r	nore than 33-1/3% of i	ts support from gross
11					ly to test for public saf	ety. See	sectior	n 509(a)(4).	
12		An organizat	ion organized a	nd operated exclusive	ely for the benefit of, to	perform	the fun	ctions of, or to carry o	ut the purposes of one
		or more publ	icly supported o	rganizations describe	ed in section 509(a)(1) o	or sectio	n 509(a)(2). See section 509(a	(3). Check the box on
а					upporting organization d, or controlled by its sup				1 the supported
-		organization(s	s) the power to re	gularly appoint or elect	a majority of the directo	rs or trus	tees of t	he supporting organizati	on. You must
			rt IV, Sections A						
b		management	pporting organiz of the supporting ete Part IV, Sect	organization vested in	ontrolled in connection the same persons that c	ontrol or	support manage	the supported organization (s), by	having control or ion(s). You
с		Type III functi	onally integrated	. A supporting organizat	ion operated in connectio	n with, a	nd functio	onally integrated with, its	supported
d		functionally i	ntegrated. The c	proanization generally	anization operated in con must satisfy a distribu s A and D, and Part V.	nnection Ition req	with its s uiremen	supported organization(s) t and an attentiveness) that is not requirement (see
е		Check this be	ox if the organiz	ation received a writt	en determination from	the IRS	that it is	а Туре I, Туре II, Тур	e III functionally
4	E 2				supporting organizatior				
n N	Pr	ovide the follo	wing informatio	n about the supported	d organization(s).				
9		me of supported		(ii) EIN	(iii) Type of organization	1	s the	(v) Amount of monetary	(vi) Amount of other
					(described on lines 1-10 above (see instructions))		ion listed	support (see instructions)	support (see instructions)
							nent?		
						Yes	No		
(A)									
(B)									
(a)									
(C)						<u> </u>			
(D)									
(E)									
Total									1

SUSTAINABLE JOURNALISM FOUNDATION

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84-3896856 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Section A. Public Support

	tion A. I ublic ouppoit							
Cale begi	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		354,231.	355,895.	468,357.	666,771.	1,845,254.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.	
4	Total. Add lines 1 through 3	0.	354,231.	355,895.	468,357.	666,771.	1,845,254.	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.	
6	Public support. Subtract line 5 from line 4						1,845,254.	
Sec	tion B. Total Support							
	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total	
7	Amounts from line 4	0.	354,231.	355,895.	468,357.	666,771.	1,845,254.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources			11.	17.	24.	52.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.	
11	Total support. Add lines 7 through 10						1,845,306.	
12	Gross receipts from related activ	vities, etc. (see ins	tructions)			12	0.	
13	First 5 years. If the Form 990 is organization, check this box and						X	
	tion C. Computation of Pu							
	Public support percentage for 20						%	
15	Public support percentage from a	2022 Schedule A,	Part II, line 14			15	%	
16a	33-1/3% support test-2023. If t and stop here. The organization	he organization di qualifies as a pub	d not check the b licly supported or	ox on line 13, and ganization	d line 14 is 33-1/3	% or more, check	this box	
b	33-1/3% support test-2022. If the and stop here. The organization	e organization dic qualifies as a pul	l not check a box blicly supported o	on line 13 or 16a rganization	i, and line 15 is 3	3-1/3% or more, c	check this box	
17a	a 10%-facts-and-circumstances test-2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization							
	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-and d-circumstances te	nd-circumstances est. The organizat	test, check this t ion qualifies as a	box and stop here publicly supporte	. Explain in Part d organization	VI how the	
18	Private foundation. If the organized	zation did not che	ck a box on line 1	3, 16a, 16b, 17a	, or 17b, check th	s box and see ins	structions	

Schedule A (Form 990) 2023

SUSTAINABLE JOURNALISM FOUNDATION

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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.) Part III

Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include						
	any "unusùal 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 business under section 513.						
4	Tax revenues levied for the organization'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						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disgualified 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.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						()
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
с	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9,						
14	10c, 11, and 12.) First 5 years. If the Form 990 is organization, check this box and						
Sec	tion C. Computation of Pu						
15	Public support percentage for 20			ine 13. column (f))		0/0
16	Public support percentage from			-			0/0
						10	0
-	tion D. Computation of Inv		<u> </u>				٥
	Investment income percentage f	-		-			00
18	Investment income percentage f						8
	33-1/3% support tests -2023. If is not more than 33-1/3%, check	k this box and sto	p here. The organ	nization qualifies	as a publicly supp	orted organization	
	33-1/3% support tests – 2022. If i line 18 is not more than 33-1/3%	6, check this box a	and stop here. Th	ne organization qu	ualifies as a public	ly supported organ	ization
_	Private foundation. If the organi	zation did not che			CHECK THIS DOX AND		
RΔΔ			TEEA04031	08/14/23		Schodulo A	(Form 990) 2023

Page 4

 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

			Yes	No			
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	1					
	the designation. If historic and continuing relationship, explain.	1					
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).	2					
2	- Did the experimetion have a suprested experimetion described in particu $E(1/2)/4$ (E), as (C), if (V/2) if expression $2h$						
38	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a					
ł	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.	3b					
(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.	3c					
4a	a 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.	4a					
ł	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.	4b					
(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.	4c					
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).	5a					
ł	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?	5b					
(c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c					
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? <i>If "Yes," provide detail in Part VI.</i>	6					
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? <i>If "Yes," complete Part I of Schedule L (Form 990)</i> .	7					
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).	8					
9a	a Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified 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.	9a					
ł	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? <i>If "Yes," provide detail in Part VI.</i>	9b					
(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.	9с					
10a	a 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.	10a					
ł	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.)	1 0 b					

Schedule A (Form 990) 2023 SUSTAINABLE JOURNALISM FOUNDATION Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
 - a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?
 - **b** A family member of a person described on line 11a above?

c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.

Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *If "No," describe in Part VI how the supported* organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the 1 organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? *If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).* 2 2 3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant

voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - The organization satisfied the Activities Test. Complete line 2 below. а
 - The organization is the parent of each of its supported organizations. Complete line 3 below. h
 - The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). С

2 Activities Test. Answer lines 2a and 2b below.

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

3

Yes

No

11a

11b

11c

3a

Schedule A (Form 990) 2023 SUSTAINABLE JOURNALISM FOUNDATION Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

|--|

Part V Type III Non-Functionally Integrated 509(a)(5) Supporting (organizati	0115	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organi	g trust on Nov zations must	v. 20, 1970 (explain ir complete Sections A	n Part VI). See through E.
Section 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 ground income or for management, conservation, or maintenance of property held for production of income (see instructions)	oss 6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section 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 s tax year or assets held for part of year):	short		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e 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		
Section 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		
		. :	

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). 7

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Schedule A (Form 990) 2023

Par	t V Type III Non-Functionally Integrated 509(a)(3) Su	upporting Organiza	tions (continue	d)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	irposes		1	
2	Amounts paid to perform activity that directly furthers exempt purposes of	S,			
	in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purposes of su	upported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide	e details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organizati in Part VI). See instructions.	ion is responsive (provide	details	8	
9	Distributable amount for 2023 from Section C, line 6			9	
	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)	110	(iii)
Sec	tion E – Distribution Allocations (see instructions)	Excess Distributions	Underdistributio Pre-2023	ons	Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
	Underdistributions, if any, for years prior to 2023 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2023				
	From 2018				
	From 2019				
	From 2020				
-	From 2021				
e	From 2022				
1	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D, line 7: \$				
a	Applied to underdistributions of prior years				
-	Applied to 2023 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2019				
	Excess from 2020				
c	Excess from 2021				
d	Excess from 2022				
-	Excess from 2023				

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Schedule A (Form 990) 2023

Schedule A (Form 990) 2023	SUSTAINABLE JOURNALISM FOUNDATION	84-3896856 F	Page 8
B, lines 1 and 2; Pa 3a, and 3b; Part V, I	nformation. Provide the explanations required by Part II, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11l rt IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part ine 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, so complete this part for any additional information. (See ins	IV, Section E, lines 1c, 2a, 2b, and 8; and Part V, Section E,	

Schedule B (Form 990)

OMB No. 1545-0047

Envelopment de stiffe

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization		Employer identification number
SUSTAINABLE JOURN	ALISM FOUNDATION	84-3896856
Organization type (check or	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private for	undation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	ation
	501(c)(3) taxable private foundation	

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

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

General Rule

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

Special Rules

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

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

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

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

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

Schedule B (Form 990) (2023)	1 5	Page 2
Name of organization	Employer identification number	
SUSTAINABLE JOURNALISM FOUNDATION	84-3896856	
Pout L Contributore (1997 - 1		

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>1_</u>	Oklahoma Hospital Association 4000 N Lincoln Blvd Oklahoma City, OK 73105	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
2	Fowler Auto Group 2721 36th Ave NW Norman, OK 73072	\$6,000.	Person X Payroll Image: Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
3	Home Creations 2240 N Broadway Moore, OK 73160	\$6,000.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
4	McSpadden, Milner & Robinson 901 N Lincoln Blvd, Ste 380 Oklahoma City, OK 73104	\$5,000.	Person X Payroll Noncash (Complete Part II for	
			noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions		
(a) No.	(b)	Total contributions \$6,000.	noncash contributions.)	
No.	(b) Name, address, and ZIP + 4 Firefighters Local 157 157 NW 6th St	Total contributions \$6,000.	ioncash contributions.) (d) Type of contribution Person X Payroll	
No. 5 (a)	(b) Name, address, and ZIP + 4 Firefighters Local 157 157 NW 6th St Oklahoma City, OK 73102 (b)	Total contributions \$6,000. (c) Total contributions \$12,500.	inoncash contributions.) (d) Type of contribution Person X Payroll Noncash (Complete Part II for noncash contributions.)	

Schedule B (Form 990) (2023)	2	5	Page 2
Name of organization	Employer identification numbe	r	
SUSTAINABLE JOURNALISM FOUNDATION	84-3896856		

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
7		\$111,000.	Person X Payroll Noncash (Complete Part II for	
<u>(a)</u>	Oklahoma City, OK 73102	(c)	noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>8_</u> _	Oklahoma State Chamber of Commerce 330 NE 10th St. Oklahoma City, OK 73104	\$ <u>5,000</u> .	PersonXPayrollNoncash(Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
9	PSO/AEP	\$ <u>5,000</u> .	Person X Payroll Image: Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>10</u> _	Walton Family Foundation PO Box 2030 Bentonville, AR 72712	\$100,000.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>11</u>	Arnall Family Foundation 911 NW 57th St Oklahoma City, OK 73118	\$ <u>25,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>12</u> _	Devon Energy 333 W Sheridan Ave Oklahoma City, OK 73102	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	

Schedule B (Form 990) (2023)	3	5	Page 2
Name of organization	Employer identification number	er	
SUSTAINABLE JOURNALISM FOUNDATION	84-3896856		

(a) No. <u>13</u> _ (a) No.	(b) Name, address, and ZIP + 4 Oklahoma Association of Realtors 9807 Broadway Ext Oklahoma City, OK 73114	(c) Total contributions	(d) Type of contribution Person X Payroll Noncash
	9807 Broadway Ext	\$ <u>5,000</u> .	Payroll
(a) No		-1	(Complete Part II for noncash contributions.)
	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Oklahoma Public School Resource Cen 309 NW 13th St, Ste 103 Oklahoma City, OK 73103	\$ <u>10,000.</u>	Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Oklahoma State Medical Association 313 NE 50th St Oklahoma City, OK 73105	\$ <u>5,000.</u> _	Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Petroleum Alliance of Oklahoma 500 NE 4th St, #200 Oklahoma City, OK 73104	\$ <u>5,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Urban Land Institute 2001 L Street, NW Washington, DC 20036	\$ <u>5,000.</u> _	Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>18</u> _	Oklahoma Energy Resources Board 500 NE 4th St, Ste 100 Oklahoma City, OK 73104 TEEA0702L 08/09/23	\$ <u>5,000</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)	4	5	Page 2
Name of organization	Employer identification number	ber	
SUSTAINABLE JOURNALISM FOUNDATION	84-3896856		

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>19</u> _	Gaylord Foundation 6305 Waterford Blvd, Ste 350 Oklahoma City, OK 73118	\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>20</u> _	George Kaiser Foundation 7030 S Yale Ave, #600 Tulsa, OK 74136	\$50,000.	Person X Payroll Image: Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>21</u> _	Masonic Foundation 3424 French Park Dr. Edmond, OK 73034	\$12,000.	Person X Payroll Image: Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
22_	Zarrow Foundation 401 S Boston, Ste 2700 Tulsa, OK 74103	\$70,000.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>23</u> _	Kirkpatrick Foundation 1001 W Wilshire Blvd Oklahoma City, OK 73116	\$ <u>35,000.</u>	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>24</u> _	Cresap Family Foundation 1024 E Britton Rd, Ste 100 Oklahoma City, OK 73131	\$ <u>10,000</u> .	Person X Payroll	

Schedule B (Form 990) (2023)	5	5	Page 2
Name of organization	Employer identification number		
SUSTAINABLE JOURNALISM FOUNDATION	84-3896856		

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>25</u> _	Local Media Foundation PO Box 450 Lake City, MI 49651	 \$ <u>5,175.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>26</u> _	NewsMatch 8549 Wilshire Blvd, #2294 Beverly Hills, CA 90211	\$22,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>27</u> _	Report_for_America 9450_SW_Gemini_Dr,_PMB_46837 Beaverton,_OR_97008	 \$ <u>13,335.</u> 	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 ^{\$}	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 ^{\$}	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 ^{\$}	Person
BAA	TEEA0702L 08/09/23	(Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)	1	1	Page 3
Name of organization	Employer ide	ntification n	umber
SUSTAINABLE JOURNALISM FOUNDATION	84-3896	5856	

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if add	itional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u>N/A</u>		
-		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		^{\$}	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-		 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		· · · · · · · · · · · · · · · · · · ·	
-		 \$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
AA	TEEA0703L 08/09/23		B (Form 990) (202

	B (Form 990) (2023)		1 1 Page 4		
Name of orga	anization NABLE JOURNALISM FOUNDATION		Employer identification number 84-3896856		
Part III	Exclusively religious, charitable, et	for the year from any one cor ompleting Part III, enter the total of (Enter this information once. See in:	tions described in section 501(c)(7), (8), htributor. Complete columns (a) through (e) and exclusively religious, charitable, etc.,		
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I	N7 / D				
	<u>N/A</u>				
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
			+		
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee		
		TEFA0704I 08/09/23	Schodulo B (Eorm 990) (2022)		

~~	Supplemental Financial Statements			OMB No.	1545-0047		
	SCHEDULE DSupplemental Financial StatementsForm 990)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.				20	23	
Depar	Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.				Open to Inspect	o Public	
	of the organization				Employer i	dentification n	
SUS		URNALISM FOUNDATIO			84-389		
Pa	tl Organiz Comple	zations Maintaining Do te if the organization ar	nor Advised Funds or Other Similar nswered "Yes" on Form 990, Part IV,	Funds or A line 6.	ccounts	;	
			(a) Donor advised funds	(b) F	unds and	other accou	unts
1	Total number at e	end of year					
2		ntributions to (during year)					
3		ants from (during year)					
4	Aggregate value	at end of year					
5	Did the organizat are the organizat	ion inform all donors and do ion's property, subject to the	nor advisors in writing that the assets held in a organization's exclusive legal control?	donor advised	funds	Yes	No
6	for charitable pur	poses and not for the benefit	rs, and donor advisors in writing that grant fur t of the donor or donor advisor, or for any othe	er purpose cor	nferring _	Yes	No
Pa		vation Easements					
			nswered "Yes" on Form 990, Part IV,	line 7.			
1			y the organization (check all that apply).	1			
		of land for public use (for exam		tion of a histo			area
		natural habitat	Preserva	tion of a certi	fied histori	c structure	
2		of open space	and a qualified concernation contribution in the fo	rm of a concor	votion acco	mont on the	_
2	last day of the tax		held a qualified conservation contribution in the fo		valion ease		5
	-			H	leld at the	End of the	Tax Year
ä	a Total number of o	conservation easements		2a			
I) Total acreage res	stricted by conservation ease	ments	2b			
(Number of conse	rvation easements on a certi	fied historic structure included on line 2a	2c			
(on line 2c acquired after July 25, 2006, and no ster.				
3	Number of conserv tax year	vation easements modified, tran	nsferred, released, extinguished, or terminated by	the organization	on during th	Ie	
4	Number of states	where property subject to co	onservation easement is located				
5			garding the periodic monitoring, inspection, hants it holds?	andling of viol	ations,	Yes	No
6	Staff and voluntee	r hours devoted to monitoring,	inspecting, handling of violations, and enforcing c	onservation ea	sements di	uring the yea	ar
7	Amount of expense	es incurred in monitoring, inspe	ecting, handling of violations, and enforcing conse	ervation easem	ents during	the year	
8	Does each conse and section 170(h	rvation easement reported or)(4)(B)(ii)?	n line 2d above satisfy the requirements of sec	ction 170(h)(4)(B)(i) 	Yes	No
9	In Part XIII, desc include, if applica conservation eas		oorts conservation easements in its revenue a to the organization's financial statements that	nd expense st describes the	atement a organizat	nd balance ion's accou	sheet, and nting for
Pa	t III Organiz Comple	zations Maintaining Co te if the organization a	llections of Art, Historical Treasures nswered "Yes" on Form 990, Part IV,	, or Other S line 8.	Similar A	ssets	
1a	historical treasure	es, or other similar assets he	r FASB ASC 958, not to report in its revenue s Id for public exhibition, education, or research Il statements that describes these items.	statement and in furtheranc	l balance s e of public	sheet works service, pr	s of art, rovide in
k	following amount	s relating to these items.	r FASB ASC 958, to report in its revenue state or public exhibition, education, or research in furth				
	(i) Revenue incl	uded on Form 990, Part VIII,	line 1		\$		
2	If the organization amounts required	received or held works of art, I I to be reported under FASB	nistorical treasures, or other similar assets for fina ASC 958 relating to these items.	ancial gain, pro	vide the fol	lowing	
а	Revenue includeo	d on Form 990, Part VIII, line	1		\$		
h	Assets included in	n Form 990, Part X			\$		

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	
b Assets included in Form 990, Part X	

TEEA3301L 07/20/23 Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 SUSTAINABLE			84-389	
Part III Organizations Maintaining (Collections of Art,	Historical Treasures,	or Other Similar As	ssets (continued)
3 Using the organization's acquisition, accessior items (check all that apply).	n, and other records, che	ck any of the following that m	nake significant use of its	collection
a Public exhibition	d La	oan or exchange program		
b Scholarly research	e Ot	ther		
c Preservation for future generations				
4 Provide a description of the organization's coll Part XIII.	ections and explain how	they further the organization'	s exempt purpose in	
5 During the year, did the organization solicit to be sold to raise funds rather than to be		of art, historical treasures, on the organization's collection	or other similar assets ?	Yes No
Part IV Escrow and Custodial Arran Complete if the organization Form 990, Part X, line 21.	answered "Yes" o			in amount on
1a Is the organization an agent, trustee, custo on Form 990, Part X?	dian, or other intermed	liary for contributions or oth	ner assets not included	Yes No
b If "Yes," explain the arrangement in Part XIII a				
				Amount
c Beginning balance			1c	
d Additions during the year			1d	
e Distributions during the year				
f Ending balance				
2a Did the organization include an amount on			-	Yes No
b If "Yes," explain the arrangement in Part X	III. Check here if the ex	xplanation has been provid	ed in Part XIII	
Part V Endowment Funds				
	anguarad "Vac" a	n Earm 000 Dart IV/	ina 10	
Complete if the organization	allswered tes o	11 FOITH 990, Part IV, I	ine iu.	
(a) Cur	rent year (b) Prior	r year (c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance				
b Contributions				
c Net investment earnings, gains,				
and losses				
d Grants or scholarships				
e Other expenditures for facilities				
and programs				
f Administrative expenses				
g End of year balance				
2 Provide the estimated percentage of the cu	-	e (line 1g, column (a)) held	as:	
a Board designated or quasi-endowment	00			
b Permanent endowment	010			
c Term endowment %				
The percentages on lines 2a, 2b, and 2c shou	ld equal 100%.			
3a Are there endowment funds not in the possess	sion of the organization th	hat are held and administered	d for the	r
organization by:				Yes No
(i) Unrelated organizations?				. 3a(i)
(ii) Related organizations?				. 3a(ii)
b If "Yes" on line 3a(ii), are the related organ				. 3b
4 Describe in Part XIII the intended uses of t	ş	wment funds.		
Part VI Land, Buildings, and Equip				
Complete if the organization answer	ed "Yes" on Form 990, F	Part IV, line 11a. See Form 9	990, Part X, line 10.	
Description of property	(a) Cost or other ba (investment)	sis (b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		5,959.	4,243.	1,716.
e Other		1,094.	156.	938.
Total. Add lines 1a through 1e. (Column (d) mus	t equal Form 990, Part	· · · · ·		2,654.
ВАА				ule D (Form 990) 2023

Part VII	Investments – Other Securities		N/A	
	Complete if the organization answered "Yes" on			
	bition of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-or	r-year market value
	I derivatives			
(3) Other				
(A) (B)				
(C)				
(D)				
(D) (E)				
(F)				
(G)				
<u>(H)</u>				
	r (h) must source Form 000. Dart V, ling 10, solumn (D)			
Part VIII	n (b) must equal Form 990, Part X, line 12, column (B))		N / 7	
Part VIII	Investments – Program Related Complete if the organization answered "Yes" on	Form 990, Part IV, line	N/A 11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6) (7)				
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, line 13, column (B))			
Part IX	Other Assets Complete if the organization answered "Yes" on	N/A		
	(a) De	scription	The See Form 550, Fart A, fille 15.	(b) Book value
(1)		·		••
(2)				
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Part X	Imn (b) must equal Form 990, Part X, line 15, c Other Liabilities	olumn (B))		
Farla	Complete if the organization answered "Yes" on	Form 990. Part IV. line	11e or 11f. See Form 990. Part X. line 2	5.
1.	(a) Descr	iption of liability		(b) Book value
	al income taxes			
(2)				
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)	mn (b) must equal Form 990, Part X, line 25, co	(D)		
1 0 0 1 1 0 0 1 1 1	nin (σ) must equal Form 390, Part X, line 25, co	линн (<i>D))</i>		

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

Schedule D (Form 990) 2023 SUSTAINABLE JOURNALISM FOUNDATION	84-3896856	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return N/A	
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	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments 2a		
b Donated services and use of facilities		
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIII.) 2d		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1.	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b		
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	er Return N/A	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities 2a		
b Prior year adjustments 2b		
c Other losses		
d Other (Describe in Part XIII.) 2d		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1.	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	-	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Part XIII Supplemental Information		

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

SUSTAINABLE JOURNALISM FOUNDATION

Employer identification number 84-3896856

Form 990, Part I, Line 1 - Organization Mission or Significant Activities

NonDoc's mission is to produce and distribute quality journalism with context that enables civic involvement. NonDoc's vision is to sustain reporting on under-covered civic issues while increasing public knowledge and encouraging public dialogue. NonDoc's core values include: accuracy, fairness, transparency, community, diversity and the historical record.

Form 990, Part III, Line 1 - Organization Mission

NonDoc's mission is to produce and distribute quality journalism with context that enables civic involvement. NonDoc's vision is to sustain reporting on under-covered civic issues while increasing public knowledge and encouraging public dialogue. NonDoc's core values include: accuracy, fairness, transparency, community, diversity

and the historical record.

Form 990, Part VI, Line 11b - Form 990 Review Process

No review was or will be conducted.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.