

990

Return of Organization Exempt From Income Tax

OMB No. 1545-

0047 2021

Open to Public Inspection

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

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

Form 990
Department of the Treasury

For the 2021 calendar year, or tax year beginning 07-01-2021, and ending 06-30-2022

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: FOUNDATION FOR NATIONAL PROGRESS
Doing business as: MOTHER JONES MAGAZINE
Number and street (or P.O. box if mail is not delivered to street address): 222 SUTTER STREET 600
Room/suite:
City or town, state or province, country, and ZIP or foreign postal code: SAN FRANCISCO, CA 941084457

D Employer identification number: 94-2282759
E Telephone number: (415) 321-1700
G Gross receipts \$ 25,557,087

F Name and address of principal officer: MONIKA BAUERLEIN
222 SUTTER STREET 600
SAN FRANCISCO, CA 941084457

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
H(c) Group exemption number

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: WWW.MOTHERJONES.COM

K Form of organization: Corporation Trust Association Other

L Year of formation: 1975 M State of legal domicile: CA

Part I Summary

Table with 3 main sections: Activities & Governance (lines 1-7), Revenue (lines 8-12), Expenses (lines 13-19), and Net Assets or Fund Balances (lines 20-22). Includes columns for Prior Year and Current Year.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here: Signature of officer MADELEINE BUCKINGHAM CFO, Date 2022-12-22

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date 2022-12-21, Firm's name ARMANINO LLP, Firm's address SAN RAMON, CA 945834600

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

SEE SCHEDULE O

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

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 13,427,400 including grants of \$ 103,800) (Revenue \$ 2,471,732) PROGRAM SERVICE 1: INVESTIGATIVE REPORTING SEE SCHEDULE O

4b (Code:) (Expenses \$ 445,292 including grants of \$) (Revenue \$) PROGRAM SERVICE #2: BEN BAGDIKIAN FELLOWSHIP PROGRAM: SEE SCHEDULE O

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

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

4e Total program service expenses 13,872,692

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Question text, and Yes/No response columns. Rows include questions 1 through 21 regarding organizational requirements and schedules.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding tax-exempt bond issues, excess benefit transactions, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and gaming winnings.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with 17 main rows (2a-17) and sub-rows (a-e) for various questions. Includes columns for question text, a small table for numerical answers (e.g., 2a, 7d, 10a-11b, 13b-13c), and a large table for Yes/No/No answers.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year... 1b Enter the number of voting members included in line 1a... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of assets... 6 Did the organization have members or stockholders... 7a Did the organization have members, stockholders, or other persons who had the power to elect... 7b Are any governance decisions reserved to members, stockholders, or persons other than the governing body... 8 Did the organization contemporaneously document the meetings held or written actions... 8a The governing body? 8b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address?

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed. 18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records:

AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, MO, NY, NC, OR, PA, RI, SC, TN, UT, VA, WV, WI

Own website Another's website Upon request Other (explain in Schedule O)

MADELEINE BUCKINGHAM CFO 222 SUTTER STREET SUITE 600 SAN FRANCISCO, CA 94108 (415) 321-1700

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JUDY WISE BOARD CHAIR	5.00	X		X				0	0	0
(2) RICHARD MELCHER BOARD MEMBER - VICE CHAIR	5.00	X		X				0	0	0
(3) STEVE HENDRICKSON TREASURER	5.00	X		X				0	0	0
(4) SARA FRANKEL SECRETARY	5.00	X		X				0	0	0
(5) PHIL STRAUS BOARD MEMBER	5.00	X						0	0	0
(6) HARRIET BARLOW BOARD MEMBER	5.00	X						0	0	0
(7) JANE BUTCHER BOARD MEMBER	5.00	X						0	0	0
(8) KEN PELLETIER BOARD MEMBER	5.00	X						0	0	0
(9) ANDRE CAROTHERS BOARD MEMBER	5.00	X						0	0	0
(10) DIANE FILIPPI BOARD MEMBER	5.00	X						0	0	0
(11) ADAM HOCHSCHILD BOARD MEMBER	5.00	X						0	0	0
(12) CAROLYN MUGAR BOARD MEMBER	5.00	X						0	0	0
(13) LINDA GRUBER BOARD MEMBER	5.00	X						0	0	0
(14) BICH NGOC CAO BOARD MEMBER	5.00	X						0	0	0
(15) RINKU SEN BOARD MEMBER	5.00	X						0	0	0
(16) VINCENT ROBINSON BOARD MEMBER	5.00	X						0	0	0
(17) EDGAR VILLANUEVA BOARD MEMBER (LEFT 03/22)	5.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) EKOW YANKAH BOARD MEMBER	5.00	X						0	0	0
(19) LAURA FITZ-PEGADO BOARD MEMBER (START 06/22)	5.00	X						0	0	0
(20) BILL GEE BOARD MEMBER (START 03/22)	5.00	X						0	0	0
(21) ANGIE JEAN-MARIE BOARD MEMBER (START 10/21)	5.00	X						0	0	0
(22) NATHALIE BAPTISTE BOARD MEMBER - STAFF REP (LEFT 12/21)	37.50	X						68,172	0	8,549
(23) MONIKA BAUERLEIN PRESIDENT	37.50	X		X				205,513	0	45,220
(24) BRIDGET BOTELHO BOARD MEMBER - STAFF REP (LEFT 10/21)	37.50	X						109,845	0	9,592
(25) CLARA JEFFERY VICE PRESIDENT/EDITOR-IN-CHIEF	37.50	X		X				207,444	0	16,918
(26) STEVEN KATZ VICE PRESIDENT/PUBLISHER (LEFT 04/22)	37.50	X		X				186,666	0	33,968
(27) JACKIE MORGENSEN BOARD MEMBER - STAFF REP (START 09/21)	37.50	X						59,180	0	6,165
(28) AMANDA SILVERMAN BOARD MEMBER - STAFF REP (START 09/21)	37.50	X						107,488	0	14,493
(29) JAHNA BERRY GUEST OF BOARD - COO	37.50			X				170,072	0	21,477
(30) MADELEINE BUCKINGHAM CFO	37.50			X				111,704	0	21,144
(31) KHARY BROWN VP MEDIA SALES	37.50				X			191,987	0	26,903
(32) TERRI CARHART LEADERSHIP GIFTS DIRECTOR	37.50				X			134,314	0	37,933
(33) DAVID CORN BUREAU CHIEF	37.50				X			177,650	0	8,400
(34) BETH EISENSTAEDT ASSOCIATE DIRECTOR OF DEV	37.50				X			133,246	0	9,070
(35) BRENDEN O HANLON NATIONAL ACCTS MANAGER	37.50				X			142,757	0	20,862
(36) MITCHELL GRUMMON FORMER OFFICER	37.50					X		122,619	0	6,955
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								2,128,657	0	287,649

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **29**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MAL WARWICK & ASSOCIATES INC - ACH 2550 NINTH STREET SUITE 103 BERKELEY, CA 94710	DIRECT MAIL FUNDRAISING CONSULTANT	581,527
BALLANTINE CORPORATION 1700 ROUTE 23 NORTH WAYNE, NJ 07470	DIRECT MAIL	391,786
KINETIX TECHNOLOGY SERVICES INC 1825 SOUTH GRANT STREET 850 SAN MATEO, CA 94402	IT CONTRACTOR	325,260
QUAD GRAPHICS INC PO BOX 644840 PITTSBURGH, PA 15264	PRINTER	289,026
ROBERT HALF MANAGEMENT RESOURCES PO BOX 743295 LOS ANGELES, CA 90074	PERSONNEL CONSULTING	120,224
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 6		

Part VIII Statement of Revenue

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

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and Other Amt Similar Amounts				
1a Federated campaigns		1a		
b Membership dues		1b	4,405,676	
c Fundraising events		1c		
d Related organizations		1d		
e Government grants (contributions)		1e	1,957,941	
f All other contributions, gifts, grants, and similar amounts not included above		1f	11,396,987	
g Noncash contributions included in lines 1a - 1f:\$		1g	4,065,570	
h Total. Add lines 1a-1f				17,760,604

Program Service Revenue		Business Code	(A)	(B)	(C)	(D)
2a PROGRAM REVENUE		511120	2,462,857	2,462,857		
b ADVERTISING		541800	1,413,207		1,413,207	
c						
d						
e						
f All other program service revenue.						
g Total. Add lines 2a-2f.			3,876,064			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		31,483			31,483
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties		256,161			256,161
	6a Gross rents	(i) Real	27,077			
	b Less: rental expenses	(ii) Personal				
	6b		29,769			
	c Rental income or (loss)		-2,692			
	6c					
	d Net rental income or (loss)			-2,692		-2,692
	7a Gross amount from sales of assets other than inventory	(i) Securities	3,560,723			
	b Less: cost or other basis and sales expenses	(ii) Other				
	7b		4,065,570			
	c Gain or (loss)		-504,847			
	7c					
	d Net gain or (loss)			-504,847		-504,847
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18					
	8a					
	b Less: direct expenses					
	8b					
	c Net income or (loss) from fundraising events					
9a Gross income from gaming activities. See Part IV, line 19						
9a						
b Less: direct expenses						
9b						
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances						
10a						
b Less: cost of goods sold						
10b						
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11a ACME		900099	36,100		36,100	
b EVENT REVENUE		900099	8,875	8,875		
c						
d All other revenue						
e Total. Add lines 11a-11d			44,975			
12 Total revenue. See instructions			21,461,748	2,471,732	1,449,307	-219,895

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	103,800	103,800		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,339,972	853,362	208,121	278,489
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	7,283,464	5,907,758	618,928	756,778
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	32,985	26,754	2,717	3,514
9 Other employee benefits	1,115,430	912,176	92,139	111,115
10 Payroll taxes	630,623	496,367	59,741	74,515
11 Fees for services (non-employees):				
a Management				
b Legal	337,020	317,653	13,062	6,305
c Accounting	42,400		42,400	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	104,052			104,052
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	881,873	775,103	78,715	28,055
12 Advertising and promotion	213,929	115,790		98,139
13 Office expenses	2,010,516	1,386,572	88,175	535,769
14 Information technology	157,352	124,160	17,379	15,813
15 Royalties				
16 Occupancy	1,241,747	1,112,082	48,170	81,495
17 Travel	96,548	63,284	23,033	10,231
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	6,480	3,146	3,334	
20 Interest	6,101		6,101	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	90,302	68,968	14,419	6,915
23 Insurance	124,861	103,824	21,037	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PRINT MAGAZINE	620,083	619,366	717	
b FULFILLMENT	372,843	346,072		26,771
c MANUSCRIPTS & ARTWORK	328,975	328,975		
d OTHER	261,705	131,607	124,021	6,077
e All other expenses	75,873	75,873		
25 Total functional expenses. Add lines 1 through 24e	17,478,934	13,872,692	1,462,209	2,144,033
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash-non-interest-bearing	3,088,327	1	3,414,398
	2 Savings and temporary cash investments	803,520	2	3,189,687
	3 Pledges and grants receivable, net	236,000	3	361,000
	4 Accounts receivable, net	311,903	4	169,143
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	267,953	9	302,083
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,983,883		
	b Less: accumulated depreciation	10b 1,789,639	220,524	10c 194,244
	11 Investments—publicly traded securities	760	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	113,330	15	113,330
16 Total assets: Add lines 1 through 15 (must equal line 33)	5,042,317	16	7,743,885	
Liabilities	17 Accounts payable and accrued expenses	1,910,285	17	1,518,176
	18 Grants payable		18	
	19 Deferred revenue	1,225,848	19	1,708,798
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	1,947,941	24	500,000
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	207,271	25	283,125
	26 Total liabilities. Add lines 17 through 25	5,291,345	26	4,010,099
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	-1,743,471	27	-1,995,087
	28 Net assets with donor restrictions	1,494,443	28	5,728,873
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	-249,028	32	3,733,786
33 Total liabilities and net assets/fund balances	5,042,317	33	7,743,885	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	21,461,748
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,478,934
3	Revenue less expenses. Subtract line 2 from line 1	3	3,982,814
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-249,028
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (A))	10	3,733,786

Part XII Financial Statements and Reporting

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

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

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

Public Charity Status and Public Support

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

Name of the organization
FOUNDATION FOR NATIONAL PROGRESS

Employer identification number
94-2282759

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:

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

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

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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 Total. Add lines 1 through 3						
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)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4.						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f))	14	
15 Public support percentage for 2020 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test—2021. 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	<input type="checkbox"/>	
b 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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

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

Section A. Public Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support; 14 First 5 years.

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Description, and Percentage. Rows include: 15 Public support percentage for 2021 (84.640%); 16 Public support percentage from 2020 Schedule A, Part III, line 15 (86.250%).

Section D. Computation of Investment Income Percentage

Table with 3 columns: Line number, Description, and Percentage. Rows include: 17 Investment income percentage for 2021 (1.880%); 18 Investment income percentage from 2020 Schedule A, Part III, line 17 (1.950%).

19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows include questions 1 through 10b regarding supported organizations, including their status, control, and reporting requirements.

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

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

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 gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| 7 Other expenses (see instructions) | 7 | | |
| 8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | | |

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 short tax year or assets held for part of year): | 1 | | |
| 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 85% of line 1 | 2 | |
| 3 Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | |
| 4 Enter greater of line 2 or line 3 | 4 | |
| 5 Income tax imposed in prior year | 5 | |
| 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | 6 | |

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

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

(continued)

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6 Other distributions (describe in Part VI). See instructions	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	8	
9 Distributable amount for 2021 from Section C, line 6	9	
10 Line 8 amount divided by Line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2021:			
a From 2016.			
b From 2017.			
c From 2018.			
d From 2019.			
e From 2020.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017.			
b Excess from 2018.			
c Excess from 2019.			
d Excess from 2020.			
e Excess from 2021.			

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

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART III, LINE 12, EXPLANATION OF OTHER INCOME:	FISCAL SPONSORSHIP - 2017 AMOUNT: \$ 42,876. 2018 AMOUNT: \$ 43. EVENT REVENUE - 2017 AMOUNT: \$ 1,950. 2018 AMOUNT: \$ 22,058. 2019 AMOUNT: \$ 9,437. 2020 AMOUNT: \$ 11,923. 2021 AMOUNT: \$ 8,875. OTHER INCOME - 2017 AMOUNT: \$ 16,922. 2018 AMOUNT: \$ 1,489. 2019 AMOUNT: \$ 1,786. 2020 AMOUNT: \$ 62,199.

Additional Data

Return to Form

Software ID:

Software Version:

Supplemental Financial Statements

2021

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization
FOUNDATION FOR NATIONAL PROGRESS

Employer identification number
94-2282759

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

- 5** Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? **Yes** **No**
- 6** Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? **Yes** **No**

Part II Conservation Easements.

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

- 1** Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

- 3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4** Number of states where property subject to conservation easement is located ▶ _____
- 5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? **Yes** **No**
- 6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ _____
- 7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ \$ _____
- 8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? **Yes** **No**
- 9** In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a** If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b** If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
- (ii) Assets included in Form 990, Part X ▶ \$ _____
- 2** If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:
- a** Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
- b** Assets included in Form 990, Part X ▶ \$ _____

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	0				
b Contributions	2,346,808				
c Net investment earnings, gains, and losses	-424,239				
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	7,082				
g End of year balance	1,915,487				

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 100.000 %
 - b** Permanent endowment ▶
 - c** Term endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%.

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

- (i)** Unrelated organizations
- (ii)** Related organizations

	Yes	No
3a(i)		No
3a(ii)		No
3b		

- b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		436,373	346,987	89,386
d Equipment		233,551	219,574	13,977
e Other		1,313,959	1,223,078	90,881
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				194,244

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	283,125

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	21,448,662
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	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	27,174	
e	Add lines 2a through 2d		2e	27,174
3	Subtract line 2e from line 1		3	21,421,488
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.)	4b	40,260	
c	Add lines 4a and 4b		4c	40,260
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	21,461,748

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

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

1	Total expenses and losses per audited financial statements		1	17,465,848
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	2c		
d	Other (Describe in Part XIII.)	2d	29,769	
e	Add lines 2a through 2d		2e	29,769
3	Subtract line 2e from line 1		3	17,436,079
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.)	4b	42,855	
c	Add lines 4a and 4b		4c	42,855
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	17,478,934

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.

Return Reference	Explanation
PART V, LINE 4:	THE FOUNDATION HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING BY ITS ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS.
PART X, LINE 2:	THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS EXEMPT FROM CALIFORNIA FRANCHISE TAX UNDER CALIFORNIA REVENUE AND TAXATION CODE 23701(D). THE FOUNDATION HAS EVALUATED ITS CURRENT TAX POSITIONS AND HAS CONCLUDED THAT AS OF JUNE 30, 2022 AND 2021, THE FOUNDATION DOES NOT HAVE ANY SIGNIFICANT UNCERTAIN TAX POSITIONS FOR WHICH A RESERVE WOULD BE NECESSARY.
PART XI, LINE 2D - OTHER ADJUSTMENTS:	RECLASSIFY RENTAL EXPENSES 29,769. ONLINE STORE EXPENSES -2,595.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	ACME 40,260.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	RECLASSIFY RENTAL EXPENSES 29,769.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	ACME 40,260. ONLINE STORE EXPENSES 2,595.

Additional Data

[Return to Form](#)

Software ID:
Software Version:

2021

Open to Public Inspection

Statement of Activities Outside the United States

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

▶ Attach to Form 990.

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

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
FOUNDATION FOR NATIONAL PROGRESS

Employer identification number

94-2282759

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- For grantmakers.** Does the organization maintain records to substantiate the amount of its grants or other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTMAKING		103,800
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	0	0			103,800
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			103,800

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE (INCLUDING ICELAND & GREENLAND)	INDEPENDENT NEWS OUTLET	103,800	WIRE TRANSFER	0		
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 0

3 Enter total number of other organizations or entities 1

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

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

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

ReturnReference	Explanation
PART I, LINE 2:	ALL GRANTEES, WITHIN THE US OR OUTSIDE THE US, RECEIVING FUNDS FROM THE ORGANIZATION ARE REQUIRED TO MAINTAIN COMPLETE AND ACCURATE RECORDS, INCLUDING RECEIPTS, OF ALL REVENUE AND EXPENSES, AND AGREE TO FURNISH PROGRAM AND FISCAL REPORTS TO THE ORGANIZATION AS REQUIRED BY THE ORGANIZATION TO ENSURE ADHERENCE TO MISSION AND INTENT OF THE GRANT.
PART III ACCOUNTING METHOD:	

Additional Data

Software ID:

Software Version:

**Supplemental Information Regarding
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization
FOUNDATION FOR NATIONAL PROGRESS

Employer identification number
94-2282759

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|---|--|
| a <input checked="" type="checkbox"/> Mail solicitations | e <input checked="" type="checkbox"/> Solicitation of non-government grants |
| b <input checked="" type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input checked="" type="checkbox"/> Phone solicitations | g <input type="checkbox"/> Special fundraising events |
| d <input type="checkbox"/> In-person solicitations | |
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising Yes No
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 TELEFUND INC 186 LINCOLN ST SUITE 100 BOSTON, MA 02111	PROFESSIONAL SOLICITOR		No	29,213	97,342	-68,129
2 QCSS INC 717 WEST SAINT GERMAIN STREET SAINT CLOUD, MN 56301	PROFESSIONAL SOLICITOR		No	2,511	6,710	-4,199
3						
4						
5						
6						
7						
8						
9						
10						
Total				31,724	104,052	-72,328

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

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

		(a)Event #1	(b) Event #2	(c)Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
11 Net income summary. Subtract line 10 from line 3, column (d) ▶					

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7 Direct expense summary. Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶					

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ -----

Address ▶ -----

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.

c If "Yes," enter name and address of the third party:

Name ▶ -----

Address ▶ -----

16 Gaming manager information:

Name ▶ -----

Gaming manager compensation ▶ \$ -----

Description of services provided ▶ -----

Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See Instructions.

Return Reference	Explanation
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Additional Data

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

- ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
- ▶ **Attach to Form 990.**
- ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
FOUNDATION FOR NATIONAL PROGRESS

Employer identification number
94-2282759

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	Yes	No
1b		
2		
4a	Yes	
4b		No
4c		No
5a	Yes	
5b		No
6a		No
6b		No
7		No
8		No
9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MONIKA BAUERLEIN PRESIDENT	(i)	205,513	0	0	0	45,220	250,733	0
	(ii)	0	0	0	0	0	0	0
2 CLARA JEFFERY VICE PRESIDENT/EDITOR-IN-CHIEF	(i)	207,444	0	0	0	16,918	224,362	0
	(ii)	0	0	0	0	0	0	0
3 STEVEN KATZ VICE PRESIDENT/PUBLISHER (LEFT 04/22)	(i)	186,666	0	0	0	33,968	220,634	0
	(ii)	0	0	0	0	0	0	0
4 KHARY BROWN VP MEDIA SALES	(i)	191,987	0	0	0	26,903	218,890	0
	(ii)	0	0	0	0	0	0	0
5 JAHNA BERRY GUEST OF BOARD - COO	(i)	170,072	0	0	0	21,477	191,549	0
	(ii)	0	0	0	0	0	0	0
6 DAVID CORN BUREAU CHIEF	(i)	177,650	0	0	0	8,400	186,050	0
	(ii)	0	0	0	0	0	0	0
7 TERRI CARHART LEADERSHIP GIFTS DIRECTOR	(i)	134,314	0	0	0	37,933	172,247	0
	(ii)	0	0	0	0	0	0	0
8 BRENDEN O HANLON NATIONAL ACCTS MANAGER	(i)	142,757	0	0	0	20,862	163,619	0
	(ii)	0	0	0	0	0	0	0
9 MITCHELL GRUMMON FORMER OFFICER	(i)	87,667	0	34,952	0	6,955	129,574	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 4A	IN 2021, BRIDGET BOTELHO, BOARD MEMBER - STAFF REP, AND MITCHELL GRUMMON, BOARD MEMBER, RECEIVED SEVERANCE PAYMENTS OF \$27,462 AND \$34,952, RESPECTIVELY.
PART I, LINE 5	THE VP MEDIA SALES AND THE NATIONAL ACCOUNTS MANAGER ARE PAID COMMISSION BASED ON DETERMINED ADVERTISING SALE REVENUE GOALS.

Additional Data

Return to Form

Software ID:

Software Version:

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) DYLAN DISALVIO	SON OF MADELEINE BUCKINGHAM, CFO	70,215	PT HOURLY EMPLOYEE IN OL TECH DEPT		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

Return Reference

Explanation

Additional Data

[Return to Form](#)

Software ID:

Software Version:

Noncash Contributions

2021

Open to Public Inspection

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
- ▶ **Attach to Form 990.**
- ▶ **Go to www.irs.gov/Form990 for the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
FOUNDATION FOR NATIONAL PROGRESS

Employer identification number

94-2282759

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	8	4,065,570	FMV
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

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

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		No
31	Yes	
32a		No
33		

- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
- b If "Yes," describe in Part II.
- 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B):	THIS NUMBER REPRESENTS THE NUMBER OF CONTRIBUTORS, NOT THE NUMBER OF ITEMS CONTRIBUTED.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE O
(Form 990)**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.**2021****Open to Public
Inspection**Department of the Treasury
Internal Revenue ServiceName of the organization
FOUNDATION FOR NATIONAL PROGRESS

Employer identification number

94-2282759

Return Reference	Explanation
FORM 990, PART III, LINE 4A	<p>VOTING RIGHTS: THE BATTLE OVER VOTER SUPPRESSION IS ONE OF MOTHER JONES' MOST ESSENTIAL AREAS OF COVERAGE. MOTHER JONES WAS THE FIRST NATIONAL MEDIA OUTLET TO REPORT ON THIS ISSUE REGULARLY AND DEEPLY, EXPLORING HOW THE PUSH FOR MINORITY RULE MAY BE THE GREATEST THREAT TO OUR DEMOCRACY. NINETEEN STATES PASSED 34 NEW LAWS IN 2021 REDUCING VOTING ACCESS, MAKING IT MORE DIFFICULT TO VOTE BY MAIL AND EASIER TO REMOVE VOTERS FROM THE ROLLS, CUTTING THE NUMBER OF EARLY VOTING DAYS, ERECTING NEW BARRIERS TO VOTER REGISTRATION, AND REDUCING THE NUMBER OF POLLING PLACES. VOTING RIGHTS REPORTER ARI BERMAN DOCUMENTED THESE OVERT REPUBLICAN-LED EFFORTS AT DISENFRANCHISEMENT. NATIONAL SECURITY AND DEMOCRACY: RUSSIA'S ASSAULT ON UKRAINE SHOCKED THE WORLD, BUT MOTHER JONES LONG AGO LAID THE GROUNDWORK FOR UNDERSTANDING THIS WAR. AS DC BUREAU CHIEF DAVID CORN POINTED OUT IN THE FIRST DAYS OF THE WAR, PUTIN WAS EMBOLDENED BY THE IMPUNITY HE ENJOYED WHEN HE ATTACKED THE UNITED STATES AND OUR ELECTION. CORN ALSO REVEALED THE EXTENT TO WHICH THERE IS A DANGEROUS FEEDBACK LOOP BETWEEN US RIGHT-WING MEDIA AND KREMLIN PROPAGANDA: PUTIN'S GOVERNMENT WAS SENDING MEMOS TO RUSSIAN MEDIA OUTLETS TELLING THEM "IT IS ESSENTIAL" THEY FEATURE FOX NEWS COMMENTATOR TUCKER CARLSON "AS MUCH AS POSSIBLE." WE ALSO WERE ABLE TO REPORT FROM THE FRONTLINES, WITH INCREDIBLE DISPATCHES FROM FORMER MOTHER JONES FELLOW MOLLY SCHWARTZ WHO DETAILED HER OWN ESCAPE FROM RUSSIA AND TOOK US INSIDE THE EXTENSIVE VOLUNTEER EFFORTS IN POLAND TO HELP UKRAINIAN REFUGEES. DISINFORMATION: MOTHER JONES CONSISTENTLY EXPLORES HOW RIGHT-WING MEDIA, TECH, AND SOCIAL MEDIA PLATFORMS AMPLIFY DISINFORMATION. REPORTER ALI BRELAND HAS HIS FINGER ON THE PULSE OF THE ALT RIGHT MOVEMENT, INVESTIGATING AND TRACKING INSURRECTION AND DISINFORMATION THROUGH THE FAR-RIGHT ECOSYSTEM. HE REPORTED A FASCINATING STORY ABOUT AN ACTIVIST WHO WENT UNDERCOVER IN THE QANON WORLD AND DESCRIBED THE MOVEMENT FROM THE INSIDE BEFORE HER IDENTITY WAS REVEALED. REPORTERS STEPHANIE MENCIMER AND KIERA BUTLER HAVE BOTH GONE INSIDE ONLINE INFORMATION ECOSYSTEMS TO DEMONSTRATE HOW THESE GROUPS HAVE CORRODED PUBLIC DISCOURSE, IN STORIES DEPICTING HIGH PROFILE MEMBERS OF THESE MOVEMENTS AND INVESTIGATING HOW DISPARATE CORNERS OF THIS UNIVERSE ARE COMING TOGETHER. EXTREMISM: OUR JOURNALISTS REPORT ON THE HARD EDGE OF RADICAL AND ANTIDEMOCRATIC MOVEMENTS AND IDEOLOGIES IN AMERICA FROM THE FRINGES OF THE INTERNET TO STATE LEGISLATURES AND CONGRESS. IN THE RUN-UP TO THE 2016 ELECTION, OUR REPORTERS WERE AMONG VERY FEW TO DIG INTO THE WAY TRUMP'S CAMPAIGN INTENTIONALLY MAINSTREAMED WHITE SUPREMACIST MEMES AND IDEAS. WE WROTE ABOUT THE OATH KEEPERS AS EARLY AS 2010 AND HAVE BEEN AT THE FOREFRONT OF REPORTING ON MILITIAS, WHITE NATIONALISTS, AND OTHER EXTREMIST MOVEMENTS. DAVID CORN'S ESSAYS BROUGHT INSIGHT AND CONTEXT TO THE ONGOING POWER STRUGGLE OVER WHOSE TRUTH STANDS. ON THE ANNIVERSARY OF THE INSURRECTION, HE WROTE MOVINGLY ABOUT HOW AMERICANS WERE REMEMBERING THE DATE AND NOTED THAT, DESPITE THE CONVENTIONAL NARRATIVE, MOMENTS OF NATIONAL TRAGEDY RARELY LEAD TO NATIONAL UNITY. POLITICAL & FINANCIAL CORRUPTION: MOTHER JONES CONTINUES TO PURSUE THE KIND OF SHOE LEATHER INVESTIGATIONS FOR WHICH WE ARE KNOWN, EXAMINING CORRUPTION THAT DOESN'T NECESSARILY BREAK THE LAW BUT POINTS TO CONFLICT OF INTEREST AND SELF-DEALING. WEAKENED CAMPAIGN-FINANCE RESTRICTIONS AND TRANSPARENCY REQUIREMENTS IN THIS ERA HAVE MADE IT POSSIBLE FOR CORRUPT OFFICIALS TO FLIP AN ELECTION WITHOUT DISCLOSURE OR ACCOUNTABILITY. REPORTER DAN FRIEDMAN INVESTIGATES POLITICAL CORRUPTION AT THE TOP LEVELS OF GOVERNMENT, FOR EXAMPLE REPORTING THAT TOP TRUMP OFFICIALS VIOLATED A LAW RESTRICTING PARTISAN POLITICAL ACTIVITY BY FEDERAL EMPLOYEES, BUT FACED NO LEGAL CONSEQUENCES. WE ARE ALSO TAKING ON THE STRUCTURAL CHALLENGES AND FINANCIAL LOOPHOLES PRESENT IN OUR CURRENT SYSTEMS THAT GENERATE DEEPER INEQUALITY. IN THE SPRING, WE ROLLED OUT A 15-STORY-STRONG, MULTIMEDIA PACKAGE ON PRIVATE EQUITY AND ALL THE WAYS THIS FACET OF OUR FINANCIAL SECTOR HAS INFILTRATED EVERYDAY LIFE. GENDER JUSTICE: WHEN THE SUPREME COURT HANDED DOWN THE DOBBS DECISION THIS SUMMER, THE NATION EFFECTIVELY ENDED A 50-YEAR GUARANTEE OF BODILY AUTONOMY FOR WOMEN, CREATING A DANGEROUS AND CONFUSING PATCHWORK OF LAWS THROUGHOUT THE COUNTRY AND AN UNCERTAIN FUTURE FOR WOMEN IN THE UNITED STATES. MOTHER JONES HAS REPORTED ON ISSUES OF GENDER JUSTICE SINCE OUR FOUNDING SHORTLY AFTER THE ROE DECISION AND HAS BEEN RINGING THE ALARM IN RECENT YEARS AS WE CRYPT CLOSER TO THIS INEVITABILITY. REPORTER BECCA ANDREWS SHOWED THREE YEARS AGO HOW WOMEN IN MISSISSIPPI WERE ALREADY LIVING IN A POST-ROE WORLD, AND NINA LISS-SCHULTZ OUTLINED HOW ABORTION-RIGHTS DEFENDERS WERE PREPARING FOR THE WORST. STEPHANIE MENCIMER LAID OUT WHAT SAM ALITO IS ALL ABOUT BACK IN 2016. AND IN THE MONTHS SINCE, WE'VE BEEN ON THE GROUND REPORTING FROM RED STATES ABOUT WHAT IT'S LIKE FOR WOMEN, WHAT HAPPENS TO OTHER FERTILITY TREATMENTS, AND HIGHLIGHTING THE FAILURES OF SOCIAL SAFETY NETS TO CARE FOR WOMEN AND CHILDREN. CLIMATE CRISIS: THE ECONOMIC AND POLITICAL LANDSCAPE OF THE COMING YEARS AND DECADES WILL BE DOMINATED BY THE CHALLENGE TO DECARBONIZE EVERY SECTOR OF OUR LIVES AND MOTHER JONES COVERS THIS STORY MEANINGFULLY. WHAT CULTURAL AND TECHNOLOGICAL SHIFTS WILL THIS ENTAIL? WHO WILL PROFIT AND HOW? WHO IS RESISTING? WHO IS AT RISK OF BEING LEFT BEHIND? WHAT ARE SOME OF THE UNHERALDED IDEAS, POSSIBILITIES, PITFALLS, AND BOONDOGGLES THAT WILL DETERMINE THE SHAPE OF THE GREAT DECARBONIZATION? THE BATTLE OVER DECARBONIZATION IS A GENERATION-DEFINING PROJECT, ON THE SCALE OF THE MID-20TH CENTURY'S WAR EFFORT AND ENSURING WE AT LEAST BEGIN TO REVERSE THE EFFECTS OF CLIMATE CHANGE WILL HAVE SIGNIFICANT NATIONAL SECURITY IMPLICATIONS AS MORE PLACES THE WORLD OVER ARE AFFECTED BY SERIOUS CLIMATE EVENTS AND BECOME LESS HABITABLE.</p>
FORM 990, PART III, LINE 4B	<p>SINCE 1980, MOTHER JONES HAS PLACED AN EMPHASIS ON CREATING OPPORTUNITIES FOR ASPIRING JOURNALISTS THROUGH THE BEN BAGDIKIAN FELLOWSHIP PROGRAM. WHILE THERE ARE A NUMBER OF GENERAL JOURNALISM AND REPORTING INTERNSHIPS AVAILABLE FOR STUDENTS OR RECENT COLLEGE GRADUATES, ONLY MOTHER JONES PUTS SUCH AN EMPHASIS ON INVESTIGATIVE REPORTING. AMONG THE LARGEST TRAINING PROGRAMS IN THE INDEPENDENT MEDIA COMMUNITY, THE BEN BAGDIKIAN FELLOWSHIP PROGRAM GIVES ASPIRING JOURNALISTS INTENSIVE TRAINING IN WHAT IT TAKES TO PUBLISH OUTSTANDING, INDEPENDENT JOURNALISM, TO MEET DEADLINES, AND TO WORK AS PART OF A PROFESSIONAL TEAM. IT IS A RARE OPPORTUNITY FOR NEW JOURNALISTS TO WORK ALONGSIDE SOME OF THE TOP</p>

Return Reference	Explanation
	REPORTERS AND JOURNALISTS IN THE BUSINESS, AND TO LEARN THE INNER WORKINGS OF MULTIMEDIA NATIONAL REPORTING WITH A SPECIAL FOCUS ON INVESTIGATIVE JOURNALISM. DEPENDING ON FUNDING AVAILABILITY, THE PROGRAM ALSO OFFERS INTERNSHIPS FOR THOSE INTERESTED IN ART AND PHOTOGRAPHY, NONPROFIT PUBLIC AFFAIRS AND SOCIAL MEDIA, AND THE BUSINESS AND TECHNOLOGY SIDE OF PUBLISHING. GRADUATES LEAVE WITH PRACTICAL KNOWLEDGE, WORK THAT THEY CAN BE PROUD OF, AND A NETWORK OF FRIENDS AND COLLEAGUES THAT WILL LAST A LIFETIME. OF THE MORE THAN 800 INTERNS AND FELLOWS WHO HAVE PASSED THROUGH MOTHER JONES' PROGRAM, MORE THAN HALF MOVED ON TO A CAREER IN JOURNALISM OR THE MEDIA AT SOME OF THE NATION'S MOST PRESTIGIOUS MEDIA OUTLETS. GRADUATES OF THE PROGRAM WORK THROUGHOUT THE NATIONAL MEDIA WORLD AT OUTLETS RANGING FROM THE NEW YORK TIMES AND THE WALL STREET JOURNAL TO NATIONAL PUBLIC RADIO AND THE WASHINGTON POST.
FORM 990, PART III, LINE 1	THE FOUNDATION FOR NATIONAL PROGRESS PUBLISHES MOTHER JONES, A MAGAZINE AND MULTI-PLATFORM DIGITAL NEWS SITE, AND DIRECTS THE BEN BAGDIKIAN FELLOWSHIP PROGRAM. SINCE ITS FOUNDING, MOTHER JONES' GOAL HAS BEEN TO PRODUCE, IN THE WORDS OF OUR MISSION STATEMENT, "REVELATORY JOURNALISM THAT IN ITS POWER AND REACH INFORMS AND INSPIRES A MORE JUST AND DEMOCRATIC WORLD." THESE WORDS SIGNAL AN IMPORTANT FOCUS: OUR REPORTING DOES NOT EXIST IN A VACUUM BUT SEEKS TO HAVE AN IMPACT FOR DEMOCRACY AND JUSTICE THROUGH RIGOROUSLY RESEARCHED INVESTIGATIONS AND COMPELLING STORYTELLING IN A WIDELY ACCESSIBLE FORM. IN THIS TIME OF MISINFORMATION AND FEAR FOR OUR DEMOCRACY, MOTHER JONES GOES DEEP TO GET AT IMPORTANT TRUTHS. THIS ORGANIZATION IS AT THE FOREFRONT OF A MOVEMENT OF INDEPENDENT NONPROFIT JOURNALISM CHANGING THE WAY AMERICANS FIND AND CONSUME INVESTIGATIVE REPORTING. WITH ALMOST 50 JOURNALISTS (AND A STAFF OF MORE THAN 85) ORGANIZED INTO THREE NEWSROOMS BUT GEOGRAPHICALLY LOCATED ACROSS THE COUNTRY, OUR TEAM COVERS EVERYTHING FROM THE FUTURE OF OUR DEMOCRACY AND CORRUPTION IN THE WHITE HOUSE TO THE IMMIGRATION CRISIS AT THE SOUTHERN BORDER, THE STRUGGLE FOR CHANGE IN OUR CRIMINAL JUSTICE SYSTEM, THE EXISTENTIAL THREAT OF THE CLIMATE CRISIS, AND THE WAYS CORRUPT POLITICS ENDANGERS THE ENVIRONMENT. IN PRINT, ONLINE, VIA PODCASTS AND VIDEO, WE REACH A YOUNGER, GROWING AUDIENCE HUNGRY FOR HONEST, FIERCE, DEEP-DIGGING JOURNALISM. MOTHER JONES IS PROVING AGAIN THAT A 46-YEAR-OLD NEWS ORGANIZATION CAN CHANGE THE CONVERSATION.
FORM 990, PART VI, SECTION B, LINE 11B	THE BOARD OF DIRECTORS OF THE FOUNDATION FOR NATIONAL PROGRESS, DBA MOTHER JONES MAGAZINE, APPROVED THE FORMATION OF A FINANCIAL AUDIT COMMITTEE AND A FINANCE COMMITTEE IN KEEPING WITH THE CORPORATION'S BYLAWS THAT STATE: THE BOARD OF DIRECTORS MAY, BY RESOLUTION ADOPTED BY A MAJORITY OF THE DIRECTORS THEN IN OFFICE, CREATE ANY NUMBER OF BOARD COMMITTEES, EACH CONSISTING OF TWO OR MORE DIRECTORS, TO SERVE AT THE PLEASURE OF THE BOARD. APPOINTMENTS TO ANY BOARD COMMITTEE SHALL BE MADE BY ANY METHOD DETERMINED BY A MAJORITY VOTE OF THE DIRECTORS THEN IN OFFICE. BOARD COMMITTEES MAY BE GIVEN ALL THE AUTHORITY OF THE BOARD, EXCEPT FOR THE POWER TO: (A) SET THE NUMBER OF DIRECTORS WITHIN A RANGE SPECIFIED IN THESE BYLAWS; (B) FILL VACANCIES ON THE BOARD OF DIRECTORS OR ON ANY BOARD COMMITTEE; (C) ELECT DIRECTORS OR REMOVE ANY DIRECTOR WITHOUT CAUSE; (D) FIX COMPENSATION OF DIRECTORS FOR SERVING ON THE BOARD OR ANY BOARD COMMITTEE; (E) AMEND OR REPEAL THESE BYLAWS OR ADOPT NEW BYLAWS; (F) ADOPT AMENDMENTS TO THE ARTICLES OF INCORPORATION OF THIS CORPORATION; (G) AMEND OR REPEAL ANY RESOLUTION OF THE BOARD OF DIRECTORS WHICH BY ITS EXPRESS TERMS IS NOT SO AMENABLE OR REPEALABLE; (H) CREATE ANY OTHER BOARD COMMITTEES OR APPOINT THE MEMBERS OF ANY BOARD COMMITTEES; OR (I) APPROVE ANY MERGER, REORGANIZATION, VOLUNTARY DISSOLUTION, OR DISPOSITION OF SUBSTANTIALLY ALL OF THE ASSETS OF THIS CORPORATION. AS SUCH, THE FINANCIAL AUDIT COMMITTEE APPROVES THE FORM 990 PRIOR TO FILING; A PUBLIC DISCLOSURE COPY OF THE FORM 990 IS DISTRIBUTED TO THE ENTIRE BOARD OF DIRECTORS PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C	AS PER THE CORPORATION'S CONFLICT OF INTEREST POLICY, AND TO ENSURE THAT THE FOUNDATION OPERATES IN A MANNER CONSISTENT WITH ITS EDUCATIONAL PURPOSES AND THAT IT DOES NOT ENGAGE IN ACTIVITIES THAT COULD JEOPARDIZE ITS STATUS AS AN ORGANIZATION EXEMPT FROM FEDERAL INCOME TAX, PERIODIC REVIEWS SHALL BE CONDUCTED BY THE DEPARTMENT SUPERVISOR (RELEVANT TO THE TRANSACTION OR ARRANGEMENT), PUBLISHER, CEO, CFO, AND BOARD OF DIRECTOR'S AUDIT COMMITTEE. THE PERIODIC REVIEWS SHALL, AT A MINIMUM, OCCUR ANNUALLY AND SHALL INCLUDE THE FOLLOWING SUBJECTS: * WHETHER COMPENSATION ARRANGEMENTS AND BENEFITS ARE REASONABLE AND ARE AS THE RESULT OF ARM'S-LENGTH BARGAINING. * WHETHER ACQUISITIONS OF SERVICES RESULT IN INUREMENT OR IMPERMISSIBLE PRIVATE BENEFIT. * WHETHER TRANSACTIONS AND ARRANGEMENTS WITH VENDORS AND OTHER ORGANIZATIONS CONFORM TO WRITTEN POLICIES, ARE PROPERLY RECORDED, REFLECT REASONABLE PAYMENTS FOR GOODS AND SERVICES, FURTHER THE FOUNDATION'S EDUCATIONAL PURPOSES, AND DO NOT RESULT IN INUREMENT OR IMPERMISSIBLE PRIVATE BENEFIT. * WHETHER AGREEMENTS WITH EMPLOYEES AND THIRD-PARTY PAYORS FURTHER THE FOUNDATION'S EDUCATIONAL PURPOSES AND DO NOT RESULT IN INUREMENT OR IMPERMISSIBLE PRIVATE BENEFIT. IN CONDUCTING THESE PERIODIC REVIEWS, THE FOUNDATION MAY, BUT NEED NOT, USE OUTSIDE ADVISORS. IF OUTSIDE EXPERTS ARE USED, THEIR USE SHALL NOT RELIEVE THE FOUNDATION OF ITS RESPONSIBILITY FOR ENSURING THAT PERIODIC REVIEWS ARE CONDUCTED.
FORM 990, PART VI, SECTION B, LINE 15	THE CEO'S SALARY AND PERFORMANCE IS REVIEWED ANNUALLY BY AN ELECTED PERFORMANCE REVIEW/COMPENSATION COMMITTEE AS PART OF THE BOARD OF DIRECTORS. THIS WAS LAST PERFORMED AND RELAYED TO THE CEO IN FEBRUARY 2022 PERTAINING TO 2021 PERFORMANCE. THE CEO'S SALARY MAY BE ADJUSTED ACCORDING TO A COLA EACH YEAR BASED ON THE BAY AREA CPI. ANY ADDITIONAL WAGE INCREASE IS BASED ON MERIT AND APPROVED BY THE BOARD OF DIRECTORS. THE CFO'S SALARY AND PERFORMANCE IS REVIEWED ANNUALLY BY THE CEO WITH INPUT FROM MEMBERS OF THE SENIOR MANAGEMENT TEAM. THIS WAS LAST PERFORMED AND RELAYED TO THE CFO IN JUNE 2021. THE CFO'S SALARY MAY BE ADJUSTED ACCORDING TO A COLA EACH YEAR BASED ON THE BAY AREA CPI. ANY ADDITIONAL WAGE INCREASE IS BASED ON MERIT AND APPROVED BY THE CEO.
FORM 990, PART VI, SECTION C, LINE 19	THE FOUNDATION FOR NATIONAL PROGRESS PROVIDES A COPY OF FORMS 990 AND 990-T FOR PUBLIC INSPECTION ON REQUEST (DISTRIBUTED EITHER THROUGH THE U.S. POSTAL OFFICE OR AS A PDF DOCUMENT ATTACHED TO AN EMAIL). ADDITIONALLY, THE FOUNDATION FOR NATIONAL PROGRESS PROVIDES GUIDESTAR (A PUBLIC NONPROFIT TRACKING WEB SITE) A COPY OF FORMS 990 AND 990-T FOR PUBLIC INSPECTION. GOVERNING DOCUMENTS ARE NOT AVAILABLE TO THE PUBLIC.
FORM 990, PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

Additional Data

Return to Form

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