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SCANNED JUN I 6 2017

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

X Yes

Form **990** (2015)

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

Inspection Internal Revenue Service ▶ Information about Form 990 and its instructions is at www.lrs.gov/form990. A For the 2015 calendar year, or tax year beginning JUL 1, 2015 and ending JUN 30, D Employer identification number C Name of organization Check if applicable Address change AMERICAN SOCIETY OF NEWS EDITORS 54-0649704 Doing business as Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number]Final return/ 573-882-9854 209 REYNOLDS JOURNALISM INSTITUTE termin ated G Gross receipts \$ 207.048. City or town, state or province, country, and ZIP or foreign postal code Amended return COLUMBIA, MO 65211 H(a) Is this a group return Applica Yes X No F Name and address of principal officer: TERI HAYT for subordinates? pending 209 REYNOLDS JOURNALISM INSTITUTE, COLUMBIA _|Yes L H(b) Are all subordinates included? $_{1}$ 501(c)(3) $_{2}$ 501(c)(6) $_{3}$ (insert no.) 4947(a)(1) or L If "No," attach a list. (see instructions) Tax-exempt status: H(c) Group exemption number ▶ J Website: ► WWW.ASNE.ORG K Form of organization: X Corporation Year of formation: 1922 M State of legal domicile: VA Other > Trust Association Part I | Summary Briefly describe the organization's mission or most significant activities: THE AMERICAN SOCIETY OF NEWS Activities & Governance EDITORS (ASNE) IS A MEMBERSHIP ORGANIZATION OF NEWS EDITORS. Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 23 Number of voting members of the governing body (Part VI, line 1a) 23 Number of independent voting members of the governing body (Part VI, line 1b) 4 0 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 6 0 Total number of volunteers (estimate if necessary) 496. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 0. 0 Contributions and grants (Part VIII, line 1h) 16.418 207,048. Program service revenue (Part VIII, line 2g) 0. 0 Investment income (Part VIII, column-(A), lines 3, 4, and 7d) Other revenue [[Part VIII column (A) lines 5, 6d, 8c, 9c, 10c, and 11e)
Total revenue—add lines 8 through 11 (toust equal Part VIII, column (A), line 12) 17.913 0. 11 34,331 207,048. Grants and similar amounts paid (Part Recolumn (A), lines 1-3)
Benefits paid to briffor members (Part Recolumn (A), line 4) 0. 0. 0. 0. 46,220 245,663. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 50,594 <45,384.> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 200,279. 96,814. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 6,769. <62,483.b Revenue less expenses. Subtract line 18 from line 12 Ssets or Ralances **Beginning of Current Year** End of Year 15,331. 43,513 20 Total assets (Part X, line 16) 540,959 506,008. Total liabilities (Part X, line 26) <490,677 22 Net assets or fund balances Subtract line 21 from line 20 <497.446.b | Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sian EXECUTIVE DIRECTOR TERI HAYT, Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature 3/6/2017 P00048945 Paid DEBRA K. MATHES Debra self-employed Firm's name WILLIAMS-KEEPERS LLC <u>43-1126847</u> Preparer Firm's EIN Use Only Firm's address 2005 WEST BROADWAY, SUITE 100 Phone no. (573) 442-6171

COLUMBIA, MO 65203

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

May the IRS discuss this return with the preparer shown above? (see instructions)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		۱.,
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	<u> </u>	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		٠,,
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	-	<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		<u>x</u> _
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9_		X_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	ļ <u></u>	X_
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	X_	-
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	١		.
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total		ļ	x
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	 	 ^
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11d		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	<u> </u>
e f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		_
'	the organization's separate or consolidated financial statements for the tax year include a roomote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
100	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		<u> </u>	
120	Schedule D. Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	<u> </u>	† T	† <u></u> -
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	1	x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		1	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	_	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	İ		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	 	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III .	<u> 19</u>	990	(2015)
		-orr		

Form 990 (2015) AMERICAN SOCIETY OF NEWS EDITORS
Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			ł
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		_X_
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			•
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22_		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	, ,		ļ
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		_X_
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			_
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_ X_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	<u> </u>	X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			l
	contributions? If "Yes," complete Schedule M	30		X_
31	Did the organization liquidate, terminate, or dissolve and cease operations?	1		
	If "Yes," complete Schedule N, Part I	31	 	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33_	ļ <u> </u>	<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	1		
	Part V, line 1	34		<u> </u>
35a		35a	<u> </u>	<u> </u>
b			1	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	 	+
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		1	
	If "Yes," complete Schedule R, Part V, line 2	36	\vdash	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	├	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		.	1
_	Note. All Form 990 filers are required to complete Schedule O	<u> 38</u>	X 000	(0015
		rom	1 220	(2015)

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If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2015) AMERICAN SOCIETY OF NEWS EDITORS 54-0649704 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 23 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 23 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 5 X 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a X 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 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? X a The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 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? ... 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available 18 for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) 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.

State the name, address, and telephone number of the person who possesses the organization's books and records:

TERI HAYT - 573-884-2405

209 REYNOLDS JOURNALISM INSTITUTE, COLUMBIA, MO 65211

Form 990 (2015)	AMERICAN	SOCTETY	OF	NEWS	EDITORS

54-0649704

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other				
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) PAMELA PINE	0.20	x		x				0.	0.	0.
PRESIDENT	0.20	^		^	-	-	-	 	· · · · · ·	<u> </u>
(2) MIZELL STEWART III	0.20	x		x]		1	0.	0.	0.
VICE PRESIDENT	0.20	A	-	^	-	 	-		· · · · · ·	<u>-</u>
(3) ALFREDO CARBAJAL SECRETARY	0.20	X	ļ	X		ł	}	0.	0.	0.
(4) NANCY BARNES	0.20	1		1		-	1		-	
TREASURER	0.20	x		x		ì	l	0.	0.	0.
(5) DEBRA ADAMS SIMMONS	0.10		 	-	T	T -	T	† 		
DIRECTOR		X		}	1			0.	0.	0.
(6) DAVID BOARDMAN	0.10	T-								
DIRECTOR		X	}	}	1			0.	0.	0.
(7) MANDY JENKINS	0.10					1				
DIRECTOR		X	<u> </u>	<u> </u>	L_	<u> </u>	L	0.	0.	0.
(8) BRIAN MCGRORY	0.10			l			l			
DIRECTOR		X	L	<u> </u>	<u> </u>	_	<u> </u>	0.	0.	0.
(9) KAREN PETERSON	0.10				1				_	
DIRECTOR		X	lacksquare	<u> </u>	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(10) RENE SANCHEZ	0.10		ļ	1	}]]			
DIRECTOR		X	<u> </u>	Ļ _	<u> </u>	├-	}_	0.	0.	0.
(11) LUCY DALGLISH	0.10	<u> </u>		}	l		ł		1	
DIRECTOR		X	├	├	 	├-	├-	0.	0.	0.
(12) ANNE VASQUEZ	0.10	-					1			
DIRECTOR		X	-	+-	 −	┼	╀	0.	0.	0.
(13) MANNY GARCIA	0.10	٠.	1	1			1	0.	0.	0.
DIRECTOR	0.10	X	├-	-	├	╅	├	J	<u>.</u>	
(14) CHRIS PECK	0.10	x	1		}	}	1	0.	0.	0.
DIRECTOR	0.10	┝≏	-	├	├	╁╼	╁	 	 	
(15) ANDERS GYLLENHAAL DIRECTOR	0.10	x	1	}		1	ł	0.	0.	0.
(16) KAREN MAGNUSON	0.10	╁	+-	╁╌	\vdash	\vdash	\vdash	ļ	<u> </u>	
DIRECTOR	- 0.10	\mathbf{x}			1			0.	ο.	0.
(17) LAUREN WILLIAMS	0.10	1=		1	\top	\top	1		1	
DIRECTOR		\mathbf{x}						0.	0.	0.
										Form 990 (2015)

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees			ghe	st (Compensated Employe	es (continued)	-
(A)	(A) (B)		(C)					(D)	(E)	(F)
Name and title	Average Position (do not check more the box, unless person is				than			Reportable	Estimated	
	week					ıs bot or/trus			compensation from related	amount of other
	(list any	ā			Γ	Γ	Γ	the	organizations	compensation
	hours for	a die				8			(W-2/1099-MISC)	from the
	related	tee o	ustee			ensat		(W-2/1099-MISC)		organization
	organizations	al trus	nal tr		loyee					and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	or all			organizations
(18) MICHAEL ORESKES	0.10	=	=		<u> </u>	1 0	<u> </u>			
DIRECTOR		X					L	0.	0	. 0.
(19) EMILY RAMSHAW	0.10									
DIRECTOR		X		_			Ļ	0.	0	. 0.
(20) GEORGE STANLEY	0.10									
DIRECTOR		X	lacksquare			ļ	_	0.	0	. 0.
(21) ROBYN TOMLIN	0.10			İ	ĺ					
DIRECTOR		X					_	0.	0	. 0.
(22) MARK RUSSELL	0.10						ļ		0	
DIRECTOR	0 10	X				-	┢	0.	<u> </u>	. 0.
(23) JOYCE TERHAAR DIRECTOR	0.10	x						0.	0	. 0.
(24) TERI HAYT	40.00					ſ	T			
EXECUTIVE DIRECTOR				x		1		61,054.	0	. 0.
			1		_	\vdash	┝			
							ļ	1		
1b Sub-total						•	▶	61,054.	0	. 0.
c Total from continuation sheets to Part V	II, Section A						>	0.	0	. 0.
d Total (add lines 1b and 1c)							▶	61,054.	0	. 0.
2 Total number of individuals (including but r	ot limited to th	nose	liste	ed a	bov	e) w	ho	received more than \$100	0,000 of reportable	
compensation from the organization							_		<u> </u>	Yes No
3 Did the organization list any former officer,	director or to	ıste	e ka	av er	mole	ovee	01	r highest compensated e	mplovee on	163 110
line 1a? If "Yes," complete Schedule J for s			o,	,, o.		,,,,,	,	ringinosi componedios s	picycc cii	3 X
4 For any individual listed on line 1a, is the si			omp	ensa	atioi	n an	d o	ther compensation from	the organization	
and related organizations greater than \$15										4 X
5 Did any person listed on line 1a receive or	accrue compe	nsat	ion 1	from	any	y un	rela	ated organization or indiv	idual for services	
rendered to the organization? If "Yes, " con	plete Schedu	e J	for s	uch	per:	son		·		5 X
Section B. Independent Contractors										 .
1 Complete this table for your five highest co	•									nsation from
the organization. Report compensation for	the calendar y	ear_	end	ing v	vith	or v	vitn		year.	(0)
(A) Name and business	address	N	ON:	F:				(B) Description of	services	(C) Compensation
		41	<u> </u>							
									1	
										-
2 Total number of independent contractors (_	not l	ımite	d to		_	ıste	ed above) who received r	nore than	
\$100,000 of compensation from the organ	zation					0				

Form **990** (2015)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections
512 - 514 (C) Unrelated Related or Total revenue exempt function business revenue revenue 1 a Federated campaigns 1a 1b Membership dues c Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f Business Code 136,523. 136,523 900099 2 a CONVENTION Service 69,929. 69,929. 900099 **b MEMBERSHIP DUES** 496. 100. 596. 900099 c MISCELLANEOUS f All other program service revenue 207,048. Total, Add lines 2a-2f Investment income (including dividends, interest, and 3 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c). See Part IV, line 18 Other b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d 496. 207,048 206,552 Total revenue. See instructions.

<u>Secti</u>	ion 501(c)(3) and 501(c)(4) organizations must comp			omplete column (A).	
	Check if Schedule O contains a respons	se or note to any line in (A)	this Part IX (B)	(C)	<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	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			İ	,
	Individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	102 070	102 070		
6	trustees, and key employees	103,970.	103,970.		
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	78,044.	78,044.		
8	Pension plan accruals and contributions (include	70,044.	70,044.		
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	63,649.	63,649.		
10	Payroll taxes	0370131	00/0150		
11	Fees for services (non-employees):				
а	Management				
b	Legal	28,023.	28,023.		
c	Accounting	3,583.	3,583.		
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	8,330.	8,330.		
12	Advertising and promotion	950.	950.		
13	Office expenses	793.	793.		
14	Information technology	7,733.	7,733.		
15	Royalties				
16	Occupancy	6,291.	6,291.		
17	Travel .	5,589.	5,589.		
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials	57,904.	57,904.		
19 20	Conferences, conventions, and meetings Interest	14,755.	14,755.		
21	Payments to affiliates	T=1/JJ.	T#1177.		
22	Depreciation, depletion, and amortization				
23	Insurance	878.	878.		
24	Other expenses, itemize expenses not covered	0,01			
	above. (List miscellaneous expenses in line 24e. If line				1
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	CREDIT CARD FEES	5,137.	5,137.		
	MISCELLANEOUS EXPENSES	1,759.	1,759.		
C	DUES & SUBSCRIPTIONS	565.	565.		
d	POSTAGE & SHIPPING	389.	389.		
е	All other expenses	<188,063.			
25	Total functional expenses. Add lines 1 through 24e	200,279.	200,279.	0.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	ĺ			
	Check here if following SOP 98-2 (ASC 958-720)				

AMERICAN SOCIETY OF NEWS EDITORS

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	39,551.	1	12,825.
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	1,652.	4	2,129.
5	Loans and other receivables from current and former officers, directors,			
ł	trustees, key employees, and highest compensated employees. Complete		l l	
1	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
1	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
:	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
8 3	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	2,310.	9	377.
10a	Land, buildings, and equipment cost or other		`	
1	basis. Complete Part VI of Schedule D . 10a 2,734.			
b	Less: accumulated depreciation 10b 2,734.	0.	10c	0.
11	Investments - publicly traded securities		11	
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	43,513.	16	15,331.
17	Accounts payable and accrued expenses	28,977.	17	15,699.
18	Grants payable		18	
19	Deferred revenue	57,995.	19	47,556.
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 current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons.		1 1	
22	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties	 	24	
25	Other liabilities (including federal income tax, payables to related third			
- }	parties, and other liabilities not included on lines 17-24). Complete Part X of]]	
1	Schedule D	453,987.		442,753.
26	Total liabilities. Add lines 17 through 25	540,959.	26	506,008.
- }	Organizations that follow SFAS 117 (ASC 958), check here ▶ 🗓 and			
3	complete lines 27 through 29, and lines 33 and 34.		} }	
27	Unrestricted net assets	<497,446.	>27	<490,677.
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets	· · · · · · · · · · · · · · · · · · ·	29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ▶	li.		
	and complete lines 30 through 34.		.	
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
27 28 29 30 31 32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	<497,446.		<490,677.
34	Total liabilities and net assets/fund balances	43,513.	34	<u> 15,331.</u>

	990 (2015) AMERICAN SOCIETY OF NEWS EDITORS	<u> 54-064</u>	<u>9704</u>	Pag	e 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	.			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7,0	
2	Total expenses (must equal Part IX, column (A), line 25)	2		0,2	
3	Revenue less expenses. Subtract line 2 from line 1	3		6,70	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<49	7,4	<u>46.</u> >
5	Net unrealized gains (losses) on investments	5		_	
6	Donated services and use of facilities	6			
7	Investment expenses	7	-		
8	Prior period adjustments .	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	<49	0,6	<u>77.</u> >
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	•	·		
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other		1 1		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.	_		~ 1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a		i	
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ie audit,			!
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2015)

SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	AMERICAN SOCIETY OF NEWS EDITORS		54-0649704
Par		or Accou	
	organization answered "Yes" on Form 990, Part IV, line 6.		
	(a) Donor advised funds	(b) Fur	nds 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 advisors	ed 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 to be used t	ised only	
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose of	onferring	
	impermissible private benefit?		Yes No
Par	rt II Conservation Easements. Complete if the organization answered "Yes" on Form 990, P	art 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)	rically impo	rtant land area
	Protection of natural habitat Preservation of a certification of a certification of the certi	fied historic	structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of	of a conserv	ation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	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 8/17/06, and not on a historic structu	re	
	listed in the National Register	. 2d	<u> </u>
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the	organizatio	n 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 cons	ervation ea	sements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservat	ion easeme	ents during the year
_			
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(n)(4)(B)(I)	□v □Na
_	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 include, if applicable, the text of the footnote to the organization's financial statements that describes to		
		ne organiza	ation's accounting for
Pai	conservation easements. rt III Organizations Maintaining Collections of Art, Historical Treasures, or O	her Simi	lar Assets
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.		7.000.0.
12	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statem	ent and ha	lance sheet works of art
14	historical treasures, or other similar assets held for public exhibition, education, or research in furtheral		
	the text of the footnote to its financial statements that describes these items.	ico oi pabii	o dorvido, provido, ir r dividin,
ь		and haland	e sheet works of art historical
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public exhibition,		
	relating to these items:	JIIC 301 VICO,	provide the following amounts
	(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 financia	dain provi	·
~	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	gan, piovi	
а	Parameter de de la Francisco De LAMILLA	•	\$
a L	Assets included in Form 990. Part V		•

		N SOCIETY						<u>649704 </u>	
Pai	t III Organizations Maintaining C	ollections of A	rt, Histo	orical Tr	easures, o	r Othe	r Similar Ass	ets(continue	ed)
3	Using the organization's acquisition, accession	on, and other record	ds, check	any of the	following that	are a sig	nificant use of its	s collection it	ems
	(check all that apply):	,	•	•	J	_			
а	Public exhibition	,	ı □ L	oan or exc	hange progra	ms			
b	Scholarly research			Other	g- pg				
C	Preservation for future generations	•	•						
	Provide a description of the organization's co	llastians and avala	ın havı thı	au furthar t	ha araanizatio	n'a avan	ent nurnoso in Pr	ort VIII	
4								art Am.	
5	During the year, did the organization solicit or					er Similar	asseis	¬ _V	
Dat	to be sold to raise funds rather than to be ma							Yes	<u>No</u>
rai	t IV Escrow and Custodial Arrang		ete it the	organizatio	n answered "	Yes" on I	-orm 990, Part IV	r, line 9, or	
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodi	an or other interme	diary for c	contribution	ns or other ass	sets not i	ncluded	_	—
	on Form 990, Part X?						. L	Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing ta	able:					
								Amount	
C	Beginning balance						1c		
d	Additions during the year						1d		
е	Distributions during the year				_		1e		
f	Ending balance						1f_		
2a		orm 990. Part X. line	21. for e	scrow or c	ustodial accoi	unt liabılı	tv?	Yes	No
	If "Yes," explain the arrangement in Part XIII.								
Pai							0.		
		(a) Current year		ior year	(c) Two year		d) Three years bac	k (e) Four ye	ears back
1a	Beginning of year balance	(2) ************************************	(3)	1	(5)	,		13-7	
b	Contributions								
-	Net investment earnings, gains, and losses					-		-	
ن									
ď	Grants or scholarships		 						
е	Other expenditures for facilities							1	
	and programs		1		 				
f	Administrative expenses .								
9	End of year balance .				<u> </u>		-		
2	Provide the estimated percentage of the curr	•	ce (line 1g	g, column (a)) held as:				
а	Board designated or quasi-endowment		%						
b	Permanent endowment	%							
c	Temporarily restricted endowment ▶	%							
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
За	Are there endowment funds not in the posse	ssion of the organi	zation tha	t are held a	and administe	red for th	e organization	_	
	by:							Y	es No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations	• •		• •	•	•	_	3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requ	ired on S	chedule R3	,	•	•	3b	
4	Describe in Part XIII the intended uses of the	•			•				
<u> </u>	rt VI Land, Buildings, and Equipm								
	Complete if the organization answere		0, Part IV	, line 11a.	See Form 990), Part X,	line 10.		
	Description of property	(a) Cost or			t or other		cumulated	(d) Book	value
	_ company	basis (invest			(other)		reciation	,	
10	Land					·			
	Buildings								
b	_	· 							
C	Leasehold improvements						· · · · · · · · · · · · · · · · · · ·		
d	Equipment				2,734.		2,734.	-	0.
е	Other .	1			4./34.		4,/34.		U •

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Schedule D (Form 990) 2015

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

AMERICAN SOCIETY OF NEWS EDITORS

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Schedule D (Form 990) 2015

Schedule D (Form 990) 2015

Schedule D (Form 990) 2015

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

AMERICAN SOCIETY OF NEWS EDITORS	54-0649704
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:
ASNE FOCUSES ON OPEN GOVERNMENT AND THE FIRST AMENDMENT.	ASNE:
-REPRESENTS NEW LEADERS' POINTS OF VIEW IN THE NEWS INDUS	TRY, THE
AMERICAN POLITICAL PROCESS AND SOCIETY.	
-AT THE FOREFRONT OF EFFORTS TO STRENGTHEN THE FREEDOM OF	INFORMATION
ACT AND STATE SHIELD LAWS AND THE CALL TO ENACT A FEDERAL	SHIELD LAW.
-CREATED SUNSHINE WEEK, AN EFFORT TO EMPOWER CITIZENS TO	HOLD 🕏
GOVERNMENT RESPONSIBILE AND OPEN.	
-ANNUAL EMPLOYMENT CENSUS TRACKS NEWSROOM STAFFING.	
-FOSTERS EXCELLENCE THROUGH ITS ASNE AWARDS, WHICH ARE AM	ONG THE MOST
PRESTIGIOUS IN THE PROFESSION.	
-HAS HAD A STRONG COMMITMENT TO JOURNALISM EDUCATION. IT	HAS HELPED TO
ESTABLISH AND DEFEND THE ACCREDITING PROCESS FOR JOURNALI	SM SCHOOLS.
ITS HIGH SCHOOL JOURNALISM INTIATIVE, FOUNDED IN 2000, HA	S FLOURISHED
INTO SIX HIGHLY SUCCESSFUL COMPONENTS THAT GROW NEWS CONS	UMERS.
-SPEAKS OUT WHEN JOURNALISTS ARE THREATENED.	
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION M	ISSION:
PROMOTING CORE JOURNALISTIC VALUES, WHILE EMBRACING AND E	XPLORING
CHANGE.	
FORM 990, PART VI, SECTION A, LINE 6:	
ASNE MEMBERS INCLUDE INDIVIDUALS IN THE NEWS INDUSTRY.	

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization AMERICAN SOCIETY OF NEWS EDITORS	Employer identification number 54-0649704
ASNE MEMBERS ELECT BOARD OF DIRECTORS.	
FORM 990, PART VI, SECTION A, LINE 8B:	
NO COMMITTEE MINUTES	
FORM 990, PART VI, SECTION B, LINE 11:	
A COPY OF FORM 990 IS PROVIDED TO THE BOARD AFTER IT IS F	ILED.
FORM 990, PART VI, SECTION B, LINE 15A:	D OF PERSONS IN A
THE EXECUTIVE DIRECTOR'S SALARY IS DETERMINED BY THE BOAR CLOSED DOOR MEETING.	D OF DIRETORS IN A
FORM 990, PART VI, SECTION C, LINE 19:	
FORM 990 IS AVAILABLE ON-LINE. THE GOVERNING DOCUMENTS (I	.E. BYLAWS) ARE
AVAILABLE UPON REQUEST.	