

Form

Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0047

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**For the 2018 calendar year, or tax year beginning**

Check if applicable: Address change Name change Initial return terminated Amended return Application pending	Name of organization		
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite
	City or town, state or province, country, and ZIP or foreign postal code		E Telephone number
			Gross receipts

Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) .....				
	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) .....			


**Part III Statement of Program Service Accomplishments**

1 Briefly describe the organization's mission:

.....  
.....  
.....

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

.....

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?

.....

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 \$ ..... including grants of \$ ..... ) (Revenue \$ ..... )

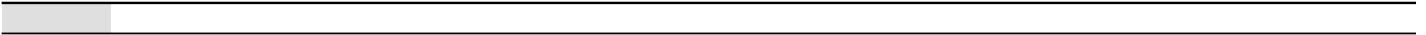
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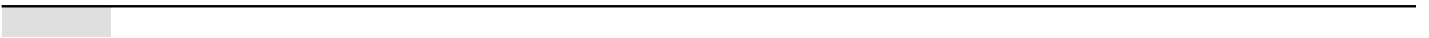
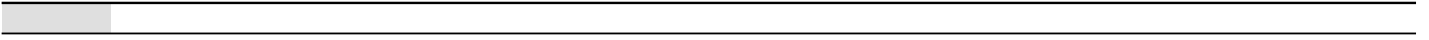
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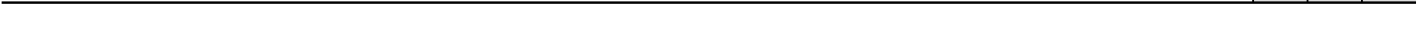
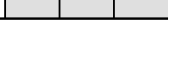
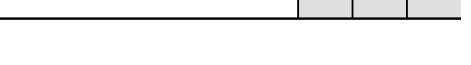
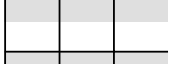
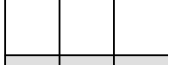
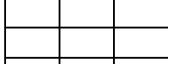
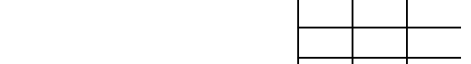
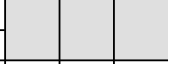
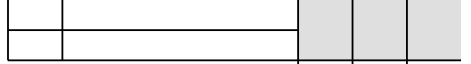
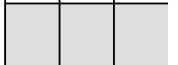
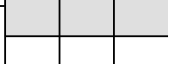
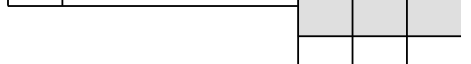
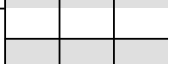
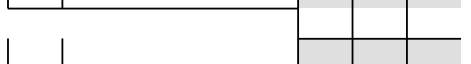
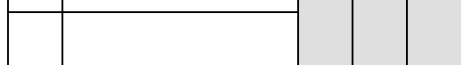
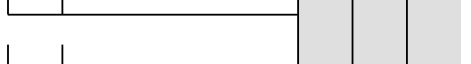
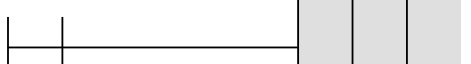
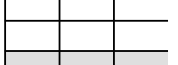
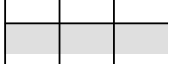
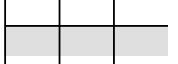
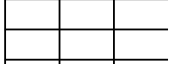
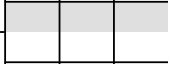
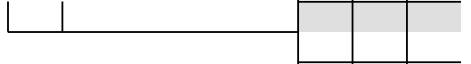
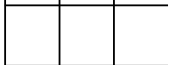
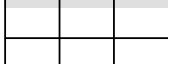
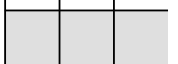
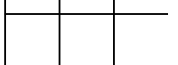
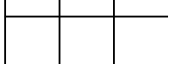
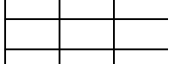
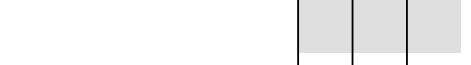
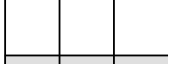
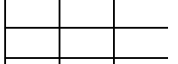
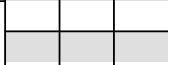
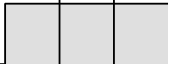
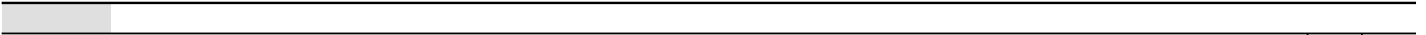
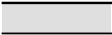
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**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

**Section A. Governing Body and Management**

			Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year .....	<b>1a</b>		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent .....	<b>1b</b>		
<b>2</b>			2	
<b>3</b>				
<b>4</b>				
<b>5</b>				
<b>6</b>				
<b>7a</b>				
<b>b</b>				
<b>8</b>				
<b>a</b>				
<b>b</b>				
<b>9</b>				

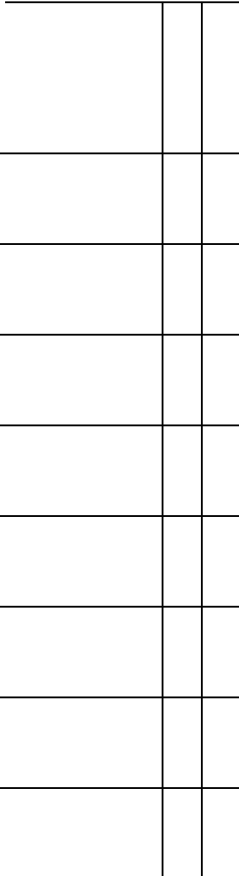
<b>10a</b>				
<b>11a</b>				

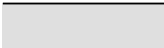
**Section C. Disclosure**

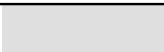










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**Part X** Balance Sheet

		(A) Beginning of year		(B) End of year
1				
2				
3				
4				
5				
6				
7				
8				
9				
10a				
b				
11				
12				
13				
14				
15				
16				
17				
18			18	
19			19	
20			20	
21			21	
22				
23			22	
24				
25				
26				
27				
28				
29				
30				
31				
32				
33				
34				



<b>Name of the organization</b>	<b>Employer identification number</b>




**Part III**

unrelated trade or business under section 513						

**Section B. Total Support**



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**Part IV Supporting Organizations** *(continued)*

- 11** Has the organization accepted a gift or contribution from any of the following persons?
- a** A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
  - b** A family member of a person described in (a) above?
  - c** A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI.*

	Yes	No
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

- 1** Did the organization regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*

	Yes	No

**2**

	Yes	No

	Yes	No

	Yes	No

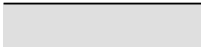






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**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

**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

**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
<b>c</b> Beginning balance .....	
<b>d</b> Additions during the year .....	



	(a) Current year			

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

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





**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 <b>Times Holding Co Stock</b>	<b>21,366,624</b>	<b>Cost</b>
(A) <b>Times Publishing Co Stock</b>	<b>1,000,000</b>	<b>Cost</b>
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.)	<b>22,366,624</b>	

**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)		
<b>Total.</b> (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)	
<b>Total.</b> (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)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)		

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.**

<b>1</b>	Total revenue, gains, and other support per audited financial statements .....			
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments .....			
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
<b>3</b>				
<b>4</b>				
<b>a</b>				
<b>b</b>				
<b>c</b>				
<b>5</b>				

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






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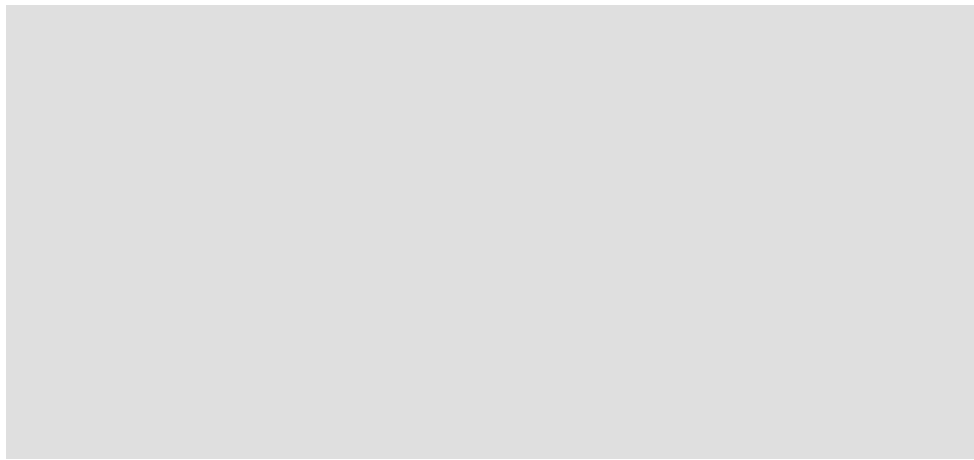
**Part II** **Supplemental Information.** Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.

**Sch E - Publication of Nondiscriminatory Policy in Media Explanation**

(Continued from Pt I, Line 3)

Area with horizontal dotted lines for providing supplemental information.







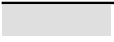
**Part IV Foreign Forms**

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- 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)* .....
  
- 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)* .....
  
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes,"*
  
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a
  
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes,"*
  
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If*





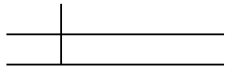




**Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more


**Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more


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**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1	Scholarships	19	12,750			
2	Tuition waiver	21	3,188			
3	Fellowships	30	9,470			
4						
5						
6						
7						

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**Part IV - Additional Information**

The Institute reviews applications and grants scholarships/waivers based on individual need and program specifications.







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Name of the organization

Employer identification number

The Poynter Institute for

59-1630423

In 2018, 7,745 students participated in 129 regular or custom courses and public programs. Many of them received scholarships or other assistance with tuition and/or travel expenses. Poynter underwrites a portion of program costs for all students. Over 100 students, professors, and other professionals received assistance with tuition or attended various Poynter programs free of charge. Scholarships granted totaled \$25,408.

In addition to their work at the Institute, Poynter faculty members provide pro bono instructional service to journalism organizations, particularly those intended to serve members of minority groups. In 2018, in partnership with the Tampa Bay Rays, the City of St. Petersburg, and the Wells Fargo Foundation, Poynter continued its commitment to the "Write Field" program to teach at-risk middle school boys in its home community the value of

Name of the organization

Employer identification number

The Poynter Institute for

59-1630423

A. E-Learning: News University ([www.newsu.org](http://www.newsu.org)) is the e-learning home for more than 100,000 registered journalists, educators and students around the world. Funded by grants from the John S. and James L. Knight Foundation, NewsU features more than 200 interactive, self-directed courses in all types of media. Titles include: "Digital Experiences that Drive Results," "Ethics of Journalism," "Hands-On Fact-Checking," and "Cleaning Your Copy."

B. Poynter NewsU webinars allow participants to join online presentations led by Poynter faculty and other leading industry professionals from home, office or classroom. Archived replays of many sessions also are available.

C. Online group seminars are faculty-led and allow participants to gather in a virtual space for multi-week seminars on topics that include: In-Depth Editing, Becoming an Effective Writer, and Fundamentals of Investigative Journalism.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders

The Institute has four members plus an alternate for purposes of electing the board of trustees and any other corporate matters presented to the membership.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

The members, by majority vote, may at any time increase or decrease the number of members as they deem appropriate. The number of members cannot be less than three and there should always be an alternate.



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**Part III Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34.

(a) Name, address, and EIN of	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated)	(f) Share of total	(g) Share of end-of-year assets	(h) Disproportionate alloc.?		(i) Code V—UBI of Schedule K-1	(j) General or managing partner?	
							Yes	No		Yes	No
.....											
.....											
.....											
.....											
.....											

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV,

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, co)	(f)	(g)	(h)
.....							
.....							
.....							
.....							
.....							

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate alloc.?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)	.....							Yes	No		Yes	No	
(2)	.....												
(3)	.....												
(4)	.....												

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
									Yes	No
(1)	<b>Times Media Services Inc</b> 490 First Ave S .....									
(2)	.....									
(3)	.....									
(4)	.....									





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

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

	(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
					Yes	No			Yes	No		Yes	No	
(1)	.....													
(2)	.....													
(3)	.....													
(4)	.....													
(5)	.....													
(6)	.....													
(7)	.....													
(8)	.....													
(9)	.....													
(10)	.....													
(11)	.....													

