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

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

<u>A</u>	For	the	2022 calend	dar year, or t	ax year begin	ning			, 2022 , a	and endi	ng		, 20
В	Chec	ck if a	pplicable:	C Name of org	ganization Co.	ngressional	Integrity	Proje	ect			D Emplo	oyer identification number
	Addr	ess c	hange	Doing busin	ess as								85-1339862
	Nam	e cha	inge	Number and	d street (or P.O. box	x if mail is not delivered	to street address)			Room/sui	te	E Teleph	none number
$\overline{\sqcap}$	Initial	l retur	'n	2020	Pennsylva	nia NW				:	269		(571) 310-6199
П			n/terminated			country, and ZIP or for	eign postal code					G Gross	<u> </u>
X			return	· ·	ngton, DC	**	g p					\$	55,348
Ħ			n pending		address of principal		Herrig				H(a) to this ord		
Ш	Appli	icatioi	i periding	1	as C abov	-	nerrrg				-	group return for subordinates? Yes No subordinates included? Yes No	
_	T				X 501(c) (4		T 4047(-)(4)		27		, ,		- -
<u>'</u>			pt status:) (insert no.)	4947(a)(1) or	52	21				t. See instructions
<u></u>	Web					egrity.org		- 1			H(c) Group e		
K		_		Corporation	Trust Ass	ociation Other		L	Year of formati	on: 202	: 0 M S	tate of leg	al domicile: DC
P	art I		Summar	•									
		1	-	-		ion or most signific							ROJECT'S FOCUS
9			IS TO RO	O ROOT OUT HYPOCRISY AND RESTORE INTEGRITY TO THE CONGRESSIONAL SYSTEM.									
Activities & Governance													
ern													
ò				_	•	iscontinued its op							
ن ھ		3	Number of v	oting membe	ers of the gove	rning body (Part V	I, line 1a)					3	3
Se		4	Number of ir	ndependent v	oting member	s of the governing	body (Part VI, I	ine 1b)				4	3
Ę		5	Total numbe	r of individua	ls employed in	calendar year 20	22 (Part V, line 2	2a) •				5	0
ŧ		6	Total numbe	r of voluntee	rs (estimate if ı	necessary)						6	5
Ā		7a	Total unrelat	ted business	revenue from l	Part VIII, column (C), line 12					7a	0
		b	Net unrelate	d business ta	axable income	from Form 990-T,	Part I, line 11					7b	0
											Prior Year		Current Year
		8	Contribution	s and grants	(Part VIII, line	1h)					500	,004	55,348
e						e 2g)						,	0
en	1		-			A), lines 3, 4, and 1							0
Revenue	1												0
_		11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)									500	,004	55,348
					<u> </u>	•	` ,				300	,004	0
		13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)											0
es	'		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)									0	
Expenses	'			•	,	` ,	•						0
ğ	٠ ـ					umn (D), line 25)	4-)			-			204 404
Ш			•	•	` ,	nes 11a-11d, 11f-2	•					,939	334,401
			-		•	equal Part IX, col	` '					,939	334,401
	-	19	Revenue les	ss expenses.	Subtract line	18 from line 12 .					130	,065	(279,053)
ō	ğ									Begir	nning of Curre		End of Year
set	<u>ag</u> 2										534	,790	283,695
Net Assets or	필 2	21		•	,						61	,479	89,437
					ces. Subtract l	ine 21 from line 2	0				473	,311	194,258
	art I			ıre Block									
						rn, including accompar icer) is based on all info					wledge and be	eliet, it is	
		Ť	<u> </u>	<u> </u>		,		•	, ,				
0:4		Ļ		Herrig								L	
Sig			Signature of office	cer								Dat	e
He	re		Kyle	Herrig,	Executive	e Director							
_		[Type or print na	me and title									
			Print/Type pre	eparer's name		Preparer's signature			Date		Check	if	PTIN
Pa	id		John Mu	ıllins		John Mullins	5		11-27-20	23	self-emp	oloyed	P01429307
Pre	ера	rer			Mullins,						irm's EIN		
Us	e O	nly		ss		consin Aven	ie				hone no.		
		•				MD 20814						202-	770-6371
May	/ the	IRS	discuss this	return with the		own above? See	instructions .						

215,258

Form 990 (2022)

85-1339862

Page 2

2) Congressional Integrity Project Checklist of Required Schedules Part IV

			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		х
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
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 similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	_		
_	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	۱.,		
	complete Schedule D, Part VI	11a		Х
b		441.		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more	44.		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	44.4		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445		
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		х
12a	Schedule D. Parts XI and XII	12a		.,
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If	124		Х
b	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional • • • • • • •	12b		v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	174		Х
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			Α_
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			<u> </u>
	Part VIII, lines 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	19		x
20 a		20a		х
b		20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х

Form 990 (2022) Congressional Integrity Project
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b</i>			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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	24u		
ZJa		25a		.,
L	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M · · · · · · · · · · · · · · · · · ·	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		v
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	31		_ X
30		20		
Dor	19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	Check if Schedule O contains a response or note to any line in this Part V			
	Check if Schedule O contains a response of flote to any line in this Part V			<u> </u>
	February 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	

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Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)	_	Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? • • • • • • • • • • • • • • • • • • •	2b	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O · · · · · · · · · · · · · · · · · ·	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	١.		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	C Is		
7		6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	75		
С	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? • • • • • • • • • • • • • • • • • • •	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities • • • • • • • • • • • • • • • • • • •			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	420		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
h	Enter the amount of reserves the organization is required to maintain by the states in which			
b	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	-		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> · · · · · · · · · · · · · · · · · ·	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
-	excess parachute payment(s) during the year?	15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17	<u></u>	<u></u>
	If "Yes " complete Form 6069			

Pa	art 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.						
	Check if Schedule O contains a response or note to any line in this Part VI			X			
Se	ction A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year						
	If there are material differences in voting rights among members of the governing body, or						
	if the governing body delegated broad authority to an executive committee or similar						
	committee, explain on Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with						
	any other officer, director, trustee, or key employee?	2		X			
3	Did the organization delegate control over management duties customarily performed by or under the direct						
	supervision of officers, directors, trustees, or key employees to a management company or other person?						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X			
6	Did the organization have members or stockholders?	6		X			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint						
	one or more members of the governing body?	7a		X			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,						
	stockholders, or persons other than the governing body?	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during						
	the year by the following:						
а	The governing body?	8a	Х				
b	Each committee with authority to act on behalf of the governing body?	8b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at						
<u> </u>	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)						
40-	Dillian and the land of the la	40-	Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		<u> </u>			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	406					
44.	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х				
b 120	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	120	.,				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	120	.				
13	Did the organization have a written whistleblower policy?	12c 13	Х				
13 14	Did the organization have a written document retention and destruction policy?	14	х	X			
15	Did the process for determining compensation of the following persons include a review and approval by	17	Λ				

independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a Х b Other officers or key employees of the organization 15b Х If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a х 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?

Section C. Disclosure

18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)
	(2) a only) available for public inspection. Indicate how you made those available. Check all that apply

List the states with which a copy of this Form 990 is required to be filed

١,	-,,,	p		
	Own website	Another's website	X Upon request	Other (explain on Schedule

- Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 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.

The Organization (571)310-6199, 2020 Pennsylvania NW Suite 269, Washington, DC 20006

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Congressional Integrity Project

85-1339862

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

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - · List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(C)
Position
(D)
(E)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles	eck m ss per d a dir	rson i recto	han one a Highest compensated employee	n	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Melanie Sloan Member		x						0	0	0
(2) Hayley Matz Meadvin	L								-	
Treasurer		х		х				0	0	0
(3) Brad_Woodhouse President		x		х				0	0	0
(4) Kyle Herrig				^				0	0	<u> </u>
Executive Director				х				0	0	0
<u>(5)</u>										
<u>(6)</u>										
<u>(7)</u>										
<u>(8)</u>										
<u>(9)</u>										
<u>(10)</u>										
<u>(11)</u>										
<u>(12)</u>										
<u>(13)</u>										
<u>(14)</u>										
		l								

EEA Form **990** (2022)

	90 (202		egrity 1	Proje	ct						85-1339	862	Page 8
Part	VII	Section A. Officers, Directors, 1	rustees,	Key	Em		_	es, ar	nd I	Highest Comp	ensated Emp	loyees	(continued)
	(A) Name and title		(B) Average hours per week (list any	box	, unle: er an	Pos leck n ss pe d a di	rson i	han one s both a r/trustee	in :)	(D) Reportable compensation from the organization (W-2/	(E) Reportable compensation from related organizations (W-2/	com	(F) ated amount of other npensation om the
			hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)		nization and organizations
<u>(15)</u>				-									
<u>(16)</u>				-									
<u>(17)</u>				-									
(18)				-									
<u>(19)</u> _				-									
<u>(20)</u>				-									
<u>(21)</u>													
(23)													
<u>(24)</u>													
<u>(25)</u>				-									
1b c		rom continuation sheets to Part VII, Sec											
d 2		add lines 1b and 1c)								0 oro than \$100,000	0 of		0
		umber of individuals (including but not limitable compensation from the organization	led to those	iisieu a	DOVE	2) WI	10 16	eceive	u m	ore man \$100,000	OI .		0
3	Did the	e organization list any former officer, direct	or, trustee, I	key em	oloye	ee, o	r hig	jhest c	comp	pensated			Yes No
4		yee on line 1a? <i>If "Yes," complete Schedule</i> y individual listed on line 1a, is the sum of i										3	х
•		zation and related organizations greater that	•										
5		<i>ual</i> • • • • • • • • • • • • • • • • • • •										4	х
		vices rendered to the organization? If "Yes				-			-			5	х
		Independent Contractors									200 (
1		ete this table for your five highest compens ensation from the organization. Report com											
		(A)	•						Ĭ	(B)		(C)	
Canit	tol Or	Name and business addre		Washi	nat	ton			Cor	Description of services	ces	Compensa 1	ation .20,000
	<u> </u>												
2	Total n	umber of independent contractors (includir	ng but not lir	nited to	thos	se lis	sted	above	l e) wh	10			
	receive	ed more than \$100,000 of compensation fro	om the orga	nizatior	1						1		

		Check if Schedule O contains a response or	r note	to any line in thi	s Part VIII			[
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns 1a	а					
	b	Membership dues	-					
ants ints	c	Fundraising events	-					
בים ש	d	Related organizations	-					
ifts, r Ar	۾ ا	Government grants (contributions) . 16	-					
n, E	f	All other contributions, gifts, grants,	+					
Sir	'	and similar amounts not included above	f	55,348				
but ther	g	Noncash contributions included in	+	33,340				
Contributions, Gifts, Grants and Other Similar Amounts	9	lines 1a-1f	g \$					
ರ ೯	h	Total. Add lines 1a-1f			55,348			
	<u> </u>	Total Add mos fa ii		Business Code	33,340			
	2a			Buomico codo				
نَد	b		- -					
er ue	c							+
yram Sen Revenue	d		- 1					+
Re	<u>.</u>		- -					<u> </u>
Program Service Revenue	f	All other program service revenue	- -					
-	1	Total. Add lines 2a-2f	_					
	3	Investment income (including dividends, interes other similar amounts)	st, an	d				
	4	Income from investment of tax-exempt bond pro	ocee	ds				
	5	Royalties		[
		(i) Real		(ii) Personal				
	6a	Gross rents 6a						
	b	Less: rental expenses 6b						
	С	Rental income or (loss) 6c						
	d	Net rental income or (loss)						
	7a	Gross amount from (i) Securities		(ii) Other				
		sales of assets						
		other than inventory 7a						
	b	Less: cost or other basis						
ine		and sales expenses 7b						
evenue	С	Gain or (loss) 7c						
å	d	Net gain or (loss)						
Other R	8a	Gross income from fundraising						
ŏ		events (not including \$						
		of contributions reported on line						
		1c). See Part IV, line 18	8a					
	b	Less: direct expenses	8b					
	С	Net income or (loss) from fundraising events	٠.					
	9a	Gross income from gaming						
		activities, See Part IV, line 19 9	9a					
	1	·	9b					
	С	Net income or (loss) from gaming activities	<u></u>					
	10a	Gross sales of inventory, less		l				
		returns and allowances 10	0a					
	1		0b					
	С	Net income or (loss) from sales of inventory •	<u></u>					
				Business Code				
snc e	11a		_					
anc	b		_					<u> </u>
cell	С		_					1
Miscellanous Revenue	d	All other revenue						
	•	Total. Add lines 11a-11d						
	42	Total revenue See instructions			EE 240	۰ .		1 ^

	ion 501(c)(3) and 501(c)(4) organizations must complete all col	umns. All other organiz	ations must complete	column (A).	
3001	Check if Schedule O contains a response or note to				
Do n	not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
8b, 9	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
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				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal	4,689	3,037	1,652	
С	Accounting	10,300	6,671	3,629	
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 Schedule O.)	271,823	176,054	95,769	
12	Advertising and promotion				
13	Office expenses	16,036	15,230	548	258
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	24,209	6,963	17,246	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
a	Dues and Subscriptions	6,854	6,854		
b					
C C					
d	All other evenesses	100			
e 25	All other expenses	490	449	41	
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	334,401	215,258	118,885	258
_0	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		Check if Schedule O contains a response or note to any line in this Part X	(A)		<u> </u>
			Beginning of year		End of year
	1	Cash - non-interest-bearing	534,790	1	233,695
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	50,000
	4	Accounts receivable, net		4	
	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	
Assets	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	534,790	16	283,695
	17	Accounts payable and accrued expenses	61,479	17	89,437
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director,			
billid		trustee, key employee, creator or founder, substantial contributor, or 35%			
Lia		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		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 Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	61,479	26	89,437
seou		Organizations that follow FASB ASC 958, check here			
	27	and complete lines 27, 28, 32, and 33. Net assets without donor restrictions		27	
alaı	27 28	•		27	
B	20	Net assets with donor restrictions		28	
Net Assets or Fund Balances		·			
	20	and complete lines 29 through 33. Capital stock or trust principal, or current funds		20	
ts (29 30	Paid-in or capital surplus, or land, building, or equipment fund		29 30	
sse	31	Retained earnings, endowment, accumulated income, or other funds	A72 211	31	10/ 250
t As	32	Total net assets or fund balances	473,311	32	194,258
Š	33	Total liabilities and net assets/fund balances	473,311	 	194,258
	55	Total national and flot assets/fully palations	534,790	00	283,695

Forn	m 990 (2022) Congressional Integrity Project	85-133986	2	Pa	age 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		55,	348
2	Total expenses (must equal Part IX, column (A), line 25)	2		334,	401
3	Revenue less expenses. Subtract line 2 from line 1	3	(279,	053)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		473,	311
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		194,	258
Pa	rt 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: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	The state of the s				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200. Subpart F?		3a		x

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 or Form 990-PF.

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

2022

Congressional Integrity Project 85-1339862 Organization type (check one): Filers of: Section: **X** 501(c)(**4** Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization Employer identification number

Congressional Integrity Project

85-1339862

Part I	ontributors (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	N/A N/A	\$50,000	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II for noncash contributions.)	

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 85-1339862 Congressional Integrity Project 01. Amended return information The 990 was amended to correct the board and officer list on Part VII. 02. Form 990 governing body review (Part VI, line 11) Each Board Member is given a chance to comment on the 990 before it is filed. The 990 is also reviewed by The Organization's outside counsel. 03. Conflict of interest policy compliance (Part VI, line 12c) Directors and Officers shall disclose to The Board any financial interest that the Director or Officer directly or indirectly has in any person or entity that is a party to a transaction under consideration by The Board. The interested Director or Officer shall abstain from voting on the transaction. 04. Governing documents, etc, available to public (Part VI, line 19) Documents not available. 05. List of other fees for services expenses (Part IX, line 11g) Admin Consulting \$121,000 Communications Consulting \$60,823 \$14,000 <u>Digital Services</u> \$76,000 Research Consulting 06. List of other expenses (Part IX, line 24e) Media Production 270 Taxes & Licenses 41

Name of the organization		Employer identification number
Congressional	Integrity Project	85-1339862
Travel	179	
-		