Department of the Treasury Internal Revenue Service

Short Form

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.

► The organization may have to use a copy of this return to satisfy state reporting requirements.

2004

OMB No 1545-1150

Open to Public Inspection

Α	For the	2004 calend	lar year	, or tax year beginning , 2	2004, and end	ding			, 20
В	Check if a	pplicable	Please	C Name of organization			D Employ	er iden	tification number
	Address of	change	use IRS label or	Rochester Public Radio			41	194	9121
	Name cha	ange	print or	Number and street (or P O box, if mail is not delivered to str	reet address) [Room/suite	E Telepho		
	Initial retu		type.	1620 Greenview Drive SW		ioonii odiic	•		
\sqsubseteq	Final retui		See Specific						8-2376
닏	Amended		Instruc-	City or town, state or country, and zir + 4			F Group		
\Box		n pending	tions.	Rochester, MN 55902	 		Numbe		
	 Section 	on 501(c)(3)		ations and 4947(a)(1) nonexempt charitable trusts mu	st attach		-		Cash 🖺 Accrual
			a con	npleted Schedule A (Form 990 or 990-EZ).		Other	(specify)	<u> </u>	
						H Chec	k ⊳ 🗓 ı	f the o	rganization
1	Websit	te: 🕨					required to		
J	Organiz	zation type (check o	nly one)— 🗵 501(c) (3) ◀ (insert no.) 🔲 4947(a)(1) c	or 🛘 527				990-EZ, or 990-PF)
_				on's gross receipts are normally not more than \$25,000.		tion need	not file a r	eture v	with the IRS: but if the
				n 990 Package in the mail, it should file a return without f					
_				ne 9 to determine gross receipts; if \$100,000 or more, file Fo				<u> </u>	
	art			enses, and Changes in Net Assets or Fund I				<u> </u>	structions \
	1				balances (See pag	e 37 OI L		structions.)
	1		-	s, grants, and similar amounts received			· · -	1	00.7//
	2	Program s	ervice i	revenue including government fees and contracts			-	2	98,744
7	3	Membersh	nip dues	s and assessments				3	
	4	Investmen	t incom	ne			L	4	
3	5a	Gross amo	ount fro	om sale of assets other than inventory	5a		i		
	Ь			er basis and sales expenses	5b		Ì		
Revenue	C			m sale of assets other than inventory (line 5a less li	ine 5b) (atta	ch sched	ule)	5c	
20	6	•	•	d activities (attach schedule). If any amount is from ga	, ,				
	-					KIICIC P	´ ⊔		
6	a		-	ot including \$ of contributions	s 6a				
) =	1	reported o		·	6b				
)	b			nses other than fundraising expenses	<u> </u>				
	C		•	ess) from special events and activities (line 6a less l	1 - 1		· · -	6c	
	7a	Gross sale	es of inv	ventory, less returns and allowances	7a				
	b	Less: cost	of goo	ods sold	7b				
	C	Gross prof	fit or (lo	oss) from sales of inventory (line 7a less line 7b) .			L	7c	
	8	Other reve	enue (de	escribe				8	
	9	Total reve	nue (ac	dd lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)			. ▶	9	98,744
	10	Grants and	d sine#2	ramounts paid (attach schedule)				10	
	44	Danadie	-	ar lar mambam			· ·	11	
Ø	4	CLV				• • •		12	26,957
g,	120	Balante I	MHE CO	Of attended to the second of t			· · -	13	160
Æ	13	Profession	iai tees	amplotner payments to independent contractors			· · }	14	8,083
M M	174	Occupano	Mour,	utilities, and maintenance			· · · -	15	559
	1390	nting, p	ublicati	ions, postage, and shipping See supporting schedule			· · -		
	/. 399/ ∧	"Other exp	enses)(describe <u>see supporting schedule</u>			—_' ⊦	16	18,120
_	111/6	TOTAL PROPE	anees (aeld lines 10 through 16)		· · ·		17	53,879
ţ	8/	Excess of	(deficit	aed lines 10 through 16)				18	44,865
Net Assets	19-			nd balances at beginning of year (from line 27, co	lumn (A)) (n	nust agre	e with		
As				e reported on prior year's return)				19	6,315
et	20			net assets or fund balances (attach explanation)				20	
Z	21			d balances at end of year (combine lines 18 through				21	51,180
Р	art II			s—If Total assets on line 25, column (B) are \$250,0					
				See page 40 of the instructions.)			ginning of ye		(B) End of year
	• •	•				5,9		22	11,851
22		h, savings,						23	
23	3 Land	d and buildi	ngs	Coo gunnontino pokodulo		13,8			17,398
24	4 Othe	er assets (de	escribe	See supporting schedule)	16.7		24	25,480
2	5 Tota	ıl assets .				36,4		25	54,729
20				De ► See supporting schedule)	30.1		26	3,549
2	7 Net	assets or f	fund ba	alances (line 27 of column (B) must agree with line	21) .	6.3	15	27	51,180

Part, III	Statement of Program Service Accom					Expenses
What is th	e organization's primary exempt purpose? _	Presenting educati	onal/cultura	l progra	and and	pured for 501(c)(3)
Describe v	what was achieved in carrying out the organiz	ation's exempt purposes. In	a clear and conc	ise manner,	and	4947(a)(1) trusts;
	ne services provided, the number of persons be				optio	onal for others.)
	rating one or more noncommercia		<i></i> 	senting	1	
educ	cational, cultural and public in					50.040
-		(G	Grants \$)	28a	52,043
29						
			· · · · · · · · · · · · · · · · · · ·		200	
			Grants \$		29a	
30				•		
		(6	Grants \$	٠٠٠٠٠٠٠٠٠٠١	30a	
31 Other	program services (attach schedule)		Grants \$	<u> </u>	31a	
	program service expenses (add lines 28a th	•		<u></u> ▶	32	52,043
Part IV	List of Officers, Directors, Trustees, and Key	Employees (List each one eve	n if not compensate	d. See page 4	1 of th	e instructions.)
	(A) Name and address	(B) Title and average hours per week	(C) Compensation (If not paid,	(D) Contribution (D) Co	ons to	(E) Expense account and
	(A) Marile and address	devoted to position	enter -0)	deferred compe		other allowances
See	attached sheet					
			-0-	-0-		-0-
Part V	Other Information (Note the attachm	ent requirement in Gene	ral Instruction V	page 14 \		Yes No
	•	· · · · · · · · · · · · · · · · · · ·				
	ne organization engage in any activity not previously	· ·		•		·', ·
	any changes made to the organizing or governing docum	•	•	• •		iges
	e organization had income from business activi reported on Form 990-T, attach a statement ex					
	ne organization have unrelated business gross incon					
	es," has it filed a tax return on Form 990-T f		notice, reporting, arr	u proxy tax rec	quii c irii	311G:
	there a liquidation, dissolution, termination, or		the vear? (If "Yes	 s." attach a s	 tateme	ent.) X
	r amount of political expenditures, direct or in					
	he organization file Form 1120-POL for this					
38a Did t	the organization borrow from, or make any k	oans to, any officer, directo	r, trustee, or key	employee o	r were	any
	loans made in a prior year and still unpaid a					X
b If "Ye	es," attach the schedule specified in the line 38	instructions and enter the am		38b		
•	c)(7) organizations. Enter: a Initiation fees and	•	aca on mic o	39a		
	s receipts, included on line 9, for public use		–	39b		
	c)(3) organizations. Enter Amount of tax imposed of				N T	
	on 4911 ► None ; section 49		; section 4955		None	
	c)(3) and (4) organizations. Did the organization					g the X
	or did it become aware of an excess benefit ant of tax imposed on organization managers or dis					one TA
	r: Amount of tax on line 40c, above, reimbur		ui uliusi 7312, 7300	, and 4000 F		one
	he states with which a copy of this return is file	1 17.				
	books are in care of ▶ Thomas Jon		Talam	hana na h	(507	1 288-2376
Loca	ted at ▶ 1620 Greenview Drive Sw	, Rochest				
	ion 4947(a)(1) nonexempt charitable trusts fili					
and o	enter the amount of tax-exempt interest rece					
	Under penalties of perjury, I declare that I have exam and belief, it is true, correct, and complete. Declarat	ined this return, ir ion of preparer (d				
Please	1 The Man Als					
Sign	A Mount for	α_{-}				
Here	Signature of officer	·				
	Type or print name and title	<u> </u>				
Paid	Preparer's signature					
Preparer's	Firm's name (or youls Alan C. Anders	on Charte				
Use Only	if self-employed), address, and ZIP + 4 Rochester, MN	55906				

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Employer identification number Name of the organization 41 : 1949121 Rochester Public Radio Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.") (d) Contributions to (e) Expense (a) Name and address of each employee paid more (b) Title and average hours (c) Compensation employee benefit plans & account and other than \$50,000 per week devoted to position deferred compensation allowances None Total number of other employees paid over \$50,000 None Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$50,000 (c) Compensation (b) Type of service None Total number of others receiving over \$50,000 for professional services

None

	t II	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	atte or	ring the year, has the organization attempted to influence national, state, or local legislation, including a empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses particularly in connection with the lobbying activities \$\Bigsim \\$	aid		х
	org	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Oth panizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description plobbying activities.			
2	sub wit ow	ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with a ostantial contributors, trustees, directors, officers, creators, key employees, or members of their families, h any taxable organization with which any such person is affiliated as an officer, director, trustee, major ner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining trustactions.)	, or crity		
а	Sal	le, exchange, or leasing of property?	. 2a		Х
b		nding of money or other extension of credit?	_		X
C		rnishing of goods, services, or facilities?			X
d	_	yment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	. 2u		X
e 3a		insfer of any part of its income or assets? you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of he	•	<u> </u>	
oa		u determine that recipients qualify to receive payments.)			X
b		you have a section 403(b) annuity plan for your employees?			Х
4a	Did	I you maintain any separate account for participating donors where donors have the right to provide advi	rice		
		the use or distribution of funds?	. 4a	ļ	X
		you provide credit counseling, debt management, credit repair, or debt negotiation services?		<u></u>	Х
Par	tΙ\	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instruction	ons.)		
he	orga	inization is not a private foundation because it is: (Please check only ONE applicable box.)			
5		A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6	\sqcup	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
-		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).	hospital's	nama	oitu
8		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the		name	, city
8 9	_	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
8 9 0		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the and state ▶ An organization operated for the benefit of a college or university owned or operated by a governmental unit.	Section 17	0(b)(1)	(A)(iv)
8 9 0		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the and state ▶ An organization operated for the benefit of a college or university owned or operated by a governmental unit. (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the governmental unit.	Section 17	0(b)(1)	(A)(iv)
8 9 0 1a		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the and state ▶ An organization operated for the benefit of a college or university owned or operated by a governmental unit. (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the control of the Support Schedule in Part IV-A.)	Section 170 general pub ership fees o more tha m business	0(b)(1) blic. Se , and n 331	(A)(iv) ection gross
8 9 0 1a 1b 2		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the and state An organization operated for the benefit of a college or university owned or operated by a governmental unit. (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the govern	Section 170 general pub ership fees o more tha m business Part IV-A.) supports of	O(b)(1)ic. Se , and in 33% es acc	(A)(iv) ection gross % of quired
11a		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the and state An organization operated for the benefit of a college or university owned or operated by a governmental unit. (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the govern	general pub ership fees o more tha m business Part IV-A.) supports or section 50	O(b)(1)ic. Se , and in 33% es acc	(A)(iv) ection gross % of quired

Pa Note	rt IV-A Support Schedule (Complete onless You may use the worksheet in the instructions	y if you checked for converting from	a box on line 10,	11, or 12.) Use of the cash method	cash method d of accounti	i of a	accounting.	
	ndar year (or fiscal year beginning in)	(a) 2003	(b) 2002	(c) 2001	(d) 2000		(e) Total	
15	Gifts, grants, and contributions received. (Do				`			
	not include unusual grants. See line 28.)	500				ŀ	500	
16	Membership fees received							
17	Gross receipts from admissions, merchandise							
	sold or services performed, or furnishing of facilities in any activity that is related to the					ŀ		
	organization's charitable, etc., purpose	42,664	4,756	2,160	2,820		52,400	
18	Gross income from interest, dividends,							
	amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and							
	unrelated business taxable income (less							
	section 511 taxes) from businesses acquired	ļ						
19	by the organization after June 30, 1975 Net income from unrelated business		· · · · · · · · · · · · · · · · · · ·					
19	Net income from unrelated business activities not included in line 18							
								_
20	Tax revenues levied for the organization's benefit and either paid to it or expended on							
	its behalf							
21	The value of services or facilities furnished to							
	the organization by a governmental unit without charge. Do not include the value of							
	services or facilities generally furnished to the	ļ						
	public without charge							
22	Other income. Attach a schedule Do not							
	include gain or (loss) from sale of capital assets	/2 16/	/ 756	0.110				
23 24	Total of lines 15 through 22	43,164	4,756	2,160	2,820		52,900	
24 25	Line 23 minus line 17	500 432	- 0- 48	-0- 22	-0-		500	
<u>26</u>					28	26a		
	Organizations described on lines 10 or 11:					-04		
b	Prepare a list for your records to show the nan governmental unit or publicly supported organize							
	amount shown in line 26a. Do not file this list wi	•	•	•	4	26b		
С	Total support for section 509(a)(1) test: Enter li	· · · · · ·				26c		
d	Add Amounts from column (e) for lines: 18		19					
					· · · · ⊢	26d		
е	Public support (line 26c minus line 26d total)	: : :: : :	. • <u>- •</u> • . • • .		▶ 4	26e		
<u> </u>	Public support percentage (line 26e (numera	itor) divided by I	ine 26c (denomi	nator))	• 2	26f		%
27	Organizations described on line 12: a For person," prepare a list for your records to show							
	Do not file this list with your return. Enter the				ar ironi, caon	uisc	qualified perso	<i>/</i> 11.
	(2003) None (2002)	None	(2001)	None	(2000)		None	
b	For any amount included in line 17 that was received							
_	show the name of, and amount received for each	year, that was mo	re than the larger	of (1) the amount	on line 25 for	the y	ear or (2) \$5,0	000
	(Include in the list organizations described in lines the difference between the amount received and	5 through 11, as w	/ell as individuals.)	Do not file this list	st with your re	eturr	n. After compu	ling
	amounts) for each year:	•					`	
	(2003) None (2002)	None	. (2001)	None	. (2000)		None	
		500	_					
С	Add: Amounts from column (e) for lines: 15		16	<u>. </u>	1	_ 1	E0 000	
_	Add: Amounts from column (e) for lines: 15 17 52,400 20 Add: Line 27a total0-		21	<u> </u>	▶ 4	$\overline{}$	52,900	
	Add: Line 27a total.	and line 27b tota	ı. <u>–0-</u>	<u> </u>	▶ <u>2</u>	27d	-0- 52 900	
e	Public support (line 27c total minus line 27d to Total support for section 509(a)(2) test: Enter a	tal)			, <u>ģ</u> oċ▶ ²	27e	52,900	
f	Public support percentage (line 27e (numera					27g	100.00	0/2
9 h	Investment income percentage (line 18, colu	ımn (e) (numerat	or) divided by li	ne 27f (denomina		27h	-0-	- <u>/</u>

²⁸ Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Sche	dule A' (Form 990 or 990-EZ) 2004		F	age ·
Ра	Private School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV) N	/A		
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions,	30		
31	programs, and scholarships?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			ox.
32	Does the organization maintain the following:			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	├─	\vdash
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	_	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	ļ	_
33	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to:			
33	Does the diganization discriminate by face in any way with respect to.	***************************************	·	
а	Students' rights or privileges?	33a		-
b	Admissions policies?	33b		├-
С	Employment of faculty or administrative staff?	33c	ļ	ļ
d	Scholarships or other financial assistance?	33d	_	<u> </u>
e	Educational policies?	33e		_
f	Use of facilities?	33f		<u> </u>
g	Athletic programs?	33g	_	<u> </u>
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement)		**************************************	
24-	Does the exempiration receive any financial aid or positions from a governmental accuracy.	34a		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	Java	+	+

b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05

Pa	rt VI-A Lobbying Expenditures by Ele (To be completed ONLY by an					instruc N/A		
Che	ck ▶ a ☐ if the organization belongs to an affilia					d "limited	d control"	provisions apply
	Limits on Lobbyir (The term "expenditures" meal					Affiliate	a) d group als	(b) To be completed for ALL electing organizations
36	Total lobbying expenditures to influence public	opinion (grassro	ots lobbying)		36			
37	Total lobbying expenditures to influence a legis				37			
38	Total lobbying expenditures (add lines 36 and 3	37)			38			
39	Other exempt purpose expenditures				39			
40	Total exempt purpose expenditures (add lines	•			40			·
41	Lobbying nontaxable amount. Enter the amount		-					
			ble amount is— line 40	i i				ALLESSA SAMPLE
			ne excess over \$5					and desire.
		•	e excess over \$1,0		41			
		•	e excess over \$1,5	1 1				
	Over \$17,000,000 \$1,000	0,000		기				
42	Grassroots nontaxable amount (enter 25% of li	ine 41)			42			
43	Subtract line 42 from line 36. Enter -0- if line 4.		• • •		43			
44	Subtract line 41 from line 38. Enter -0- if line 4	1 is more than lir	ne 38,		44			
	Caution: If there is an amount on either line 43	or line 44, you n	nust file Form 47	20.			*	
	····		Under Section					
	(Some organizations that made a section See the instructions for	n 501(h) election	do not have to c	omplete all			lumns be	elow.
		Lob	bying Expenditu	res During	4-Yea	ar Avera	iging Pe	riod
	Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002		(c 20	d) 101	(e) Total
45	- '					20	•	
45 46	fiscal year beginning in) ▶					-	•	
	fiscal year beginning in) ▶ Lobbying nontaxable amount					20	•	
46	Lobbying nontaxable amount					20	•	
46	Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures					20	•	
46 47 48	Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures Grassroots nontaxable amount					20	01	
46 47 48 49 50	Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e))	2004	2003	2002	See	20	01	Total
46 47 48 49 50 Pa	Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying expenditures rt VI-B Lobbying Activity by Noneled (For reporting only by organizating the year, did the organization attempt to influ	ting Public Cl	narities not complete F	Part VI-A) (ation, include		20	01	Total
46 47 48 49 50 Pa	Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying expenditures It VI-B Lobbying Activity by Noneled (For reporting only by organizating the year, did the organization attempt to influence public opinion on a legislative mention.	ting Public Cl	narities not complete F	Part VI-A) (ation, include		20	1 of the	Total
46 47 48 49 50 Pa	Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying expenditures rt VI-B Lobbying Activity by Noneled (For reporting only by organizating the year, did the organization attempt to influence public opinion on a legislative my Volunteers	ting Public Clations that did lence national, structure or referend	harities not complete F ate or local legisl um, through the t	Part VI-A) (ation, includuse of:	ding a	page 1	1 of the X	Total
46 47 48 49 50 Pa	Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures	2004 cting Public Clutions that did lence national, structure or referend	narities not complete F ate or local legisl um, through the	Part VI-A) (ation, includuse of:	ding a	page 1	1 of the X X X	Total
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Schedul	e Å (Form 990 or 990-EZ)	2004			ı	eage 6
Part			nsfers To and Transaction 1 of the instructions.)	ns and Relationships With Nonchari		
51 D			<u> </u>	following with any other organization des	cribed in s	ection
				ion 527, relating to political organizations?		
	,,		to a noncharitable exempt org		Yes	No
	(i) Cash	orting organization	to a nononamasic exempt org		1a(i)	X
_	• •				a(ii)	X
•	ii) Other assets		· · · · · · · · · · · · · · · · · · ·		-1	
		es of assets with a	noncharitable exempt organiza	ation	b(i)	X
_	••		itable exempt organization		o(ii)	X
(i	•		ner assets	<u>.</u> t	o(iii)	X
(i	•	• •		1 -	o(iv)	X
(-		1 .	D(V)	X
(\	i) Performance of s	ervices or member	ship or fundraising solicitations	<u>l</u> t	o(vi)	X
c S	haring of facilities, ed	quipment, mailing li	sts, other assets, or paid emple	oyees	С	X
g	oods, other assets, c	or services given by	the reporting organization. If	e. Column (b) should always show the fair mathe organization received less than fair mands, other assets, or services received.	arket value ket value	of the in any
(a)	(b)		(c)	(d)		
Line no	Amount involved	Name of none	charitable exempt organization	Description of transfers, transactions, and share	ng arrangem	ents
			<u> </u>			
d	•	01(c) of the Code (other than section 501(c)(3)) or	ne or more tax-exempt organizations in section 527? ▶	Yes 🛚] No
	(a) Name of organia	zation	(b) Type of organization	(c) Description of relationship		
						
						

ROCHESTER PUBLIC RADIO Supporting Schedules Form 990-EZ

Other	Expenses,	Part I,	Line 16

Music fees	\$ 811
Programming expenses	11,982
Sales expenses	2,102
General and administrative expenses	3,170
Interest expense	55
Total Other Expenses	$\frac{18,120}{}$

Other Assets - Part II, Line 24

	beginning	Ena oi
	of Year	Year
Accounts receivable	\$ 10,752	\$ 17,476
Computers and software	1,047	2,957
Music library	4,919	5,047
Totals	\$ <u>16.718</u>	\$ <u>25,480</u>

Total Liabilities - Part II, Line 26

Payable to KNXR - current	\$ 2,858	\$ 142
Payable to KNXR - long term	25,141	3,407
Loan payable - bank	2,171	-
Total liabilities	\$ <u>30,170</u>	\$ <u>3,549</u>

ROCHESTER PUBLIC RADIO Supporting Schedule 12-31-04

Form 990-EZ, Part IV - List of Officers and Directors

Thomas H. Jones 1620 Greenview Dr. SW Rochester, MN 55902

President

Aaron T. Manthei

1505 Sixteenth Ave. NW Rochester, MN 55901

Vice-President

Velda M. Lutz

2510 Crestwood Ct. SE Rochester, MN 55904

Secretary/Treasurer

Charles E. Hill

211 2nd Street NW Rochester, MN 55901 Director

Kevin Dobbe

2639 Westridge Lane NW Rochester, MN 55901

Director

William C. Cornwall

Director

1381 Schooner Way Woodbury, MN 55125