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Form **990**

Department of the Treasury
Internal Revenue Service

# 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)**

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

OMB No 1545-0047

**2012**

**Open to Public Inspection**

**A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013**

**B** Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

**C** Name of organization
PUBLIC BROADCASTING SERVICE

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
2100 CRYSTAL DRIVE

City or town, state or country, and ZIP + 4
ARLINGTON, VA 22202

**D Employer identification number**
52-0899215

E Telephone number
(703) 739-5000

**G** Gross receipts $ 867,850,315

**F** Name and address of principal officer
PAULA A KERGER
2100 CRYSTAL DRIVE
ARLINGTON, VA 22202

**H(a)** Is this a group return for affiliates? ☐ Yes ☑ No

**H(b)** Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

**H(c)** Group exemption number ▶

**I** Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 527

**J Website:** ▶ WWW PBS ORG

**K** Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

**L** Year of formation 1969

**M** State of legal domicile DC

## Part I Summary

**Activities & Governance**

1 Briefly describe the organization's mission or most significant activities
PBS IS A MEMBERSHIP ORGANIZATION THAT IN PARTNERSHIP WITH ITS MEMBER STATIONS (CONTINUED-SCHEDULE O)(CONTINUED FROM PAGE 1) SERVES THE AMERICAN PUBLIC WITH CONTENT AND SERVICES OF THE HIGHEST QUALITY, USING MEDIA TO EDUCATE, INSPIRE, ENTERTAIN AND EXPRESS THE DIVERSITY OF PERSPECTIVES PBS EMPOWERS INDIVIDUALS TO ACHIEVE THEIR POTENTIAL AND STRENGTHENS THE SOCIAL, DEMOCRATIC, AND CULTURAL HEALTH OF THE U S

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

| | | | |
|---|---|---|---|
| 3 | Number of voting members of the governing body (Part VI, line 1a) | 3 | 26 |
| 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 25 |
| 5 | Total number of individuals employed in calendar year 2012 (Part V, line 2a) | 5 | 497 |
| 6 | Total number of volunteers (estimate if necessary) | 6 | 31 |
| 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 3,004,385 |
| b | Net unrelated business taxable income from Form 990-T, line 34 | 7b | 0 |

| | | | Prior Year | Current Year |
|---|---|---|---|---|
| Revenue | 8 | Contributions and grants (Part VIII, line 1h) | 219,039,182 | 238,969,068 |
| | 9 | Program service revenue (Part VIII, line 2g) | 191,070,062 | 194,583,738 |
| | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d ) | -3,111,538 | 8,957,510 |
| | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 27,412,145 | 42,438,225 |
| | 12 | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 434,409,851 | 484,948,541 |
| Expenses | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) | 6,631,166 | 18,177,893 |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | 0 | 0 |
| | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 51,794,442 | 54,589,345 |
| | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | 0 | 0 |
| | b | Total fundraising expenses (Part IX, column (D), line 25) ▶34,048 | | |
| | 17 | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) | 404,497,985 | 395,532,375 |
| | 18 | Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) | 462,923,593 | 468,299,613 |
| | 19 | Revenue less expenses Subtract line 18 from line 12 | -28,513,742 | 16,648,928 |

| | | | Beginning of Current Year | End of Year |
|---|---|---|---|---|
| Net Assets or Fund Balances | 20 | Total assets (Part X, line 16) | 391,294,601 | 417,101,265 |
| | 21 | Total liabilities (Part X, line 26) | 129,238,707 | 136,460,495 |
| | 22 | Net assets or fund balances Subtract line 21 from line 20 | 262,055,894 | 280,640,770 |

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including
my knowledge and belief, it is true, correct, and complete Declaration of prepar
preparer has any knowledge

**Sign Here**

Signature of officer

BARBARA L LANDES SVP, CFO & TREASURER
Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name
JOYCE M UNDERWOOD

Preparer's signature

Firm's name ▶ BDO USA LLP

Firm's address ▶ 7101 WISCONSIN AVE SUITE 800
BETHESDA, MD 208144827

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

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

**Part III** **Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III . . . . . ☑

**1** Briefly describe the organization's mission

PBS IS A MEMBERSHIP ORGANIZATION THAT IN PARTNERSHIP WITH ITS MEMBER STATIONS SERVES THE AMERICAN PUBLIC WITH CONTENT AND SERVICES OF THE HIGHEST QUALITY, USING MEDIA TO EDUCATE, INSPIRE, ENTERTAIN AND EXPRESS THE DIVERSITY OF PERSPECTIVES PBS EMPOWERS INDIVIDUALS TO ACHIEVE THEIR POTENTIAL AND STRENGTHENS THE SOCIAL, DEMOCRATIC, AND CULTURAL HEALTH OF THE U S

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No

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

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

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

**4a** (Code ) (Expenses $ 332,103,301 including grants of $ 186,000 ) (Revenue $ 161,765,017 )

PROGRAMMING - REPRESENTS APPROXIMATELY 2,700 HOURS OF BROADCAST SERVICES PROVIDED BY PBS TO ITS MEMBER PUBLIC TELEVISION LICENSEES, INTENDED TO INFORM, INSPIRE, ENGAGE, AND EDUCATE THIS EXPENSE CATEGORY INCLUDES COSTS ASSOCIATED WITH ADMINISTERING PROGRAMMING, INCLUDING CONTENT OVERSIGHT, PROGRAM SCHEDULING AND PACKAGING

**4b** (Code ) (Expenses $ 48,033,724 including grants of $ 9,553,093 ) (Revenue $ 3,155,544 )

INTERCONNECTION - REPRESENTS THE SCHEDULING AND LOGGING OF ALL SATELLITE FEEDS, MEDIA OPERATION CENTER HANDLING, TECHNICAL EVALUATION AND OTHER PRE-TRANSMISSION PROCESSING OF ALL PROGRAM VIDEOS, AND PROGRAM ORIGINATION TRANSMISSION INCLUDING OPERATIONAL SUPPORT FOR NEWS AND OTHER LIVE EVENT COVERAGE THIS EXPENSE CATEGORY ALSO INCLUDES OTHER TECHNICAL RESEARCH AND PLANNING, THE MANAGEMENT OF EXCESS SATELLITE TRANSPONDER CAPACITY, AND THE LEASE AND ACQUISITION OF SATELLITE CAPACITY

**4c** (Code ) (Expenses $ 30,611,403 including grants of $ ) (Revenue $ )

PROMOTION - REPRESENTS INSTITUTIONAL AND PROGRAM PROMOTION AND PRESS EFFORTS INTENDED TO INCREASE AWARENESS OF THE VALUE OF PUBLIC TELEVISION THESE ACTIVITIES PROVIDE PUBLIC TELEVISION STATIONS WITH A BROAD ARRAY OF PROMOTIONAL SUPPORT, INCLUDING ON-AIR AND ONLINE PROMOTIONAL SPOTS, SOCIAL MEDIA, PRINT AND RADIO ADVERTISING, PRESS SUPPORT AND THE COORDINATION OF PUBLIC TELEVISION'S EDUCATIONAL MESSAGE AND POSITIONING

(Code ) (Expenses $ 11,511,169 including grants of $ 1,089,883 ) (Revenue $ 34,491,426 )

MEMBER SERVICES - REPRESENTS OTHER SERVICES PROVIDED IN SUPPORT OF PBS'S MEMBER STATIONS, INCLUDING PBS INTERACTIVE, DEVELOPMENT, AND COPYRIGHT ADMINISTRATION

(Code ) (Expenses $ 2,041,476 including grants of $ ) (Revenue $ 2,210,025 )

ROYALTIES REPRESENT AMOUNTS DISTRIBUTED TO PUBLIC BROADCASTING STATIONS AND PRODUCERS FROM LICENSE FEE REVENUE RECEIVED FROM CABLE AND SATELLITE PROVIDERS, REVENUES GENERATED BY DIGITAL PRODUCTS AND REVENUES RELATED TO EXPLOITATION OF COURSE MATERIALS DEVELOPED FOR EDUCATORS

(Code ) (Expenses $ 12,730,854 including grants of $ 7,348,917 ) (Revenue $ 110,286 )

EDUCATIONAL GRANTS - REPRESENTS ACTIVITY RELATED PRIMARILY TO GRANTS RECEIVED FROM THE CORPORATION FOR PUBLIC BROADCASTING, THE UNITED STATES DEPARTMENT OF EDUCATION

(Code ) (Expenses $ 3,323,081 including grants of $ ) (Revenue $ 34,732,263 )

VENTURES - REPRESENTS THE COST OF CONTENT AND PROGRAM-RELATED PRODUCTS THAT ARE SOLD TO EDUCATIONAL INSTITUTIONS, LIBRARIES, BUSINESSES, GOVERNMENT AGENCIES AND INDIVIDUALS, THE LICENSING, DEVELOPMENT, AND DISTRIBUTION OF INTERACTIVE PRODUCTS, SUCH AS ONLINE VIDEO GAMES, THE LICENSING OF VIDEO CONTENT TO COMMERCIAL ONLINE AND MOBILE SERVICE PROVIDERS, AND ONLINE SPONSORSHIP ACTIVITIES

**4d** Other program services (Describe in Schedule O )

(Expenses $ 29,606,580 including grants of $ 8,438,800 ) (Revenue $ 71,544,000 )

**4e** **Total program service expenses** ▶ 440,355,008

## Part IV Checklist of Required Schedules

| | | | 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 | Yes | |
| 2 | Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)? | 2 | Yes | |
| 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 | | No |
| 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 | Yes | |
| 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 Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III* | 5 | | No |
| 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 | | No |
| 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 | | No |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III* | 8 | | No |
| 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 | | No |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V* | 10 | | No |
| 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 | | | |
| a | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.* | 11a | Yes | |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII* | 11b | Yes | |
| c | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII* | 11c | | No |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX* | 11d | | No |
| e | Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X* | 11e | Yes | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X* | 11f | Yes | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII* | 12a | | No |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional* | 12b | Yes | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E* | 13 | | No |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | No |
| b | Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV* | 14b | Yes | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV* | 15 | Yes | |
| 16 | Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV* | 16 | | No |
| 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 | | No |
| 18 | Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II* | 18 | | No |
| 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 | | No |
| 20a | Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* | 20a | | No |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |

**Part IV Checklist of Required Schedules** *(continued)*

| | | | | |
|---|---|---|---|---|
| 21 | Did the organization report more than $5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II* | 21 | Yes | |
| 22 | Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III* | 22 | Yes | |
| 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 | Yes | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25* | 24a | Yes | |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | No |
| 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 | | No |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | No |
| 25a | **Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I* | 25a | | No |
| 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 | | No |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II* | 26 | | No |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III* | 27 | | No |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) | | | |
| a | A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV* | 28a | | No |
| b | A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV* | 28b | | No |
| c | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV* | 28c | Yes | |
| 29 | Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M* | 29 | Yes | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M* | 30 | | No |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I* | 31 | | No |
| 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 | | No |
| 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 | Yes | |
| 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 | Yes | |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | Yes | |
| 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 | | No |
| 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 | | No |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI* | 37 | | No |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O | 38 | Yes | |

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V . . . . . ☐

| | | | | Yes | No |
|---|---|---|---|---|---|
| 1a | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable | 1a | 409 | | |
| b | Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable | 1b | 0 | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | | | 1c | Yes |
| 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 | 497 | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | 2b | Yes |
| 3a | Did the organization have unrelated business gross income of $1,000 or more during the year? | | | 3a | Yes |
| b | If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O* | | | 3b | Yes |
| 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 | No |
| b | If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | | 5a | No |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | | 5b | No |
| c | 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 organization solicit any contributions that were not tax deductible as charitable contributions? | | | 6a | No |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | | | 6b | |
| 7 | **Organizations that may receive deductible contributions under section 170(c).** | | | | |
| a | 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 | No |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | | 7b | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | | | 7c | No |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | | 7e | No |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | | 7f | No |
| 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 and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | | | 8 | |
| 9 | **Sponsoring organizations maintaining donor advised funds.** | | | | |
| a | Did the organization make any taxable distributions under section 4966? | | | 9a | |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | | | 9b | |
| 10 | **Section 501(c)(7) organizations.** Enter | | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | | | |
| 11 | **Section 501(c)(12) organizations.** Enter | | | | |
| a | Gross income from members or shareholders | 11a | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) | 11b | | | |
| 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 | 12b | | | |
| 13 | **Section 501(c)(29) qualified nonprofit health insurance issuers.** | | | | |
| a | Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O | | | 13a | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans | 13b | | | |
| c | Enter the amount of reserves on hand | 13c | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | | | 14a | No |
| b | If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* | | | 14b | |

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

Check if Schedule O contains a response to any question in this Part VI . . . . . ☑

## Section 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 | 1a | 26 | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O | | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | 1b | 25 | | |
| 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 | | | No |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? | 3 | | | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | | No |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | | No |
| 6 | Did the organization have members or stockholders? | 6 | | Yes | |
| 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 | | Yes | |
| 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 | | Yes | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | | |
| a | The governing body? | 8a | | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | | Yes | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O* | 9 | | | No |

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

| | | | Yes | No |
|---|---|---|---|---|
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | No |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 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 | Yes | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | | |
| 12a | Did the organization have a written conflict of interest policy? *If "No," go to line 13* | 12a | Yes | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done* | 12c | Yes | |
| 13 | Did the organization have a written whistleblower policy? | 13 | Yes | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | Yes | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| a | The organization's CEO, Executive Director, or top management official | 15a | Yes | |
| b | Other officers or key employees of the organization | 15b | Yes | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | Yes | |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | | No |

## Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶VA

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

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

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶BARBARA L LANDES PUBLIC BROADCAST 2100 CRYSTAL DRIVE ARLINGTON, VA (703) 739-5000

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

Check if Schedule O contains a response to any question in this Part VII . . . . . ☐

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

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

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

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

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

| **(A)** Name and Title | **(B)** Average hours per week (list any hours for related organizations below dotted line) | **(C)** Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | **(D)** Reportable compensation from the organization (W-2/1099-MISC) | **(E)** Reportable compensation from related organizations (W- 2/1099-MISC) | **(F)** Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| See Additional Data Table | | | | | | | | | | |
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**Part VII** **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
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| | | | | | | | | | | |
| **1b** | **Sub-Total** . . . . . ▶ | | | | | | | | | |
| **c** | **Total from continuation sheets to Part VII, Section A** . . . . ▶ | | | | | | | | | |
| **d** | **Total (add lines 1b and 1c)** . . . . . ▶ | | | | | | | 4,250,805 | 0 | 628,868 |

**2** Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶126

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

## Section B. Independent Contractors

**1** Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|---|---|
| THE MEDIA KITCHEN 160 VARICK STREET NEW YORK NY 10013 | PAID ADVERTISING | 14,489,797 |
| THREE PILLAR GLOBAL INC 3975 FAIR RIDGE DRIVE STE 250 NORT FAIRFAX VA 22033 | SOFTWARE DEVELOPMENT | 2,211,199 |
| FRED ROGERS COMPANY 2100 WHARTON STREET STE 700 PITTSBURGH PA 15203 | CONTENT DEVELOPMENT | 2,150,000 |
| NIELSEN MEDIA RESEARCH 770 BROADWAY NEW YORK NY 10003 | AUDIENCE ANALYTICS | 1,573,370 |
| INTERFACE MEDIA GROUP 1233 20TH STREET NW WASHINGTON DC 20036 | PROMOTION PRODUCTION | 1,315,920 |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶77

**Part VIII Statement of Revenue**

Check if Schedule O contains a response to any question in this Part VIII . . . . . .

| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
|---|---|---|---|---|---|---|---|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a | Federated campaigns | 1a 149,445 | | | | |
| | b | Membership dues | 1b | | | | |
| | c | Fundraising events | 1c | | | | |
| | d | Related organizations | 1d 1,018,549 | | | | |
| | e | Government grants (contributions) | 1e 25,082,855 | | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above | 1f 212,718,219 | | | | |
| | g | Noncash contributions included in lines 1a-1f $ | 158,652,121 | | | | |
| | h | **Total.** Add lines 1a-1f ▶ | | 238,969,068 | | | |
| Program Service Revenue | | | Business Code | | | | |
| | 2a | MEMBERSHIP DUES | 900099 | 186,544,605 | 186,544,605 | | |
| | b | OTHER PROGRAM REVENUE | 900099 | 5,969,152 | 3,575,943 | 2,393,209 | |
| | c | STATION/PRODUCER SERVI | 900099 | 2,069,981 | 2,069,981 | | |
| | d | | | | | | |
| | e | | | | | | |
| | f | All other program service revenue | | | | | |
| | g | **Total.** Add lines 2a–2f ▶ | | 194,583,738 | | | |
| Other Revenue | 3 | Investment income (including dividends, interest, and other similar amounts) ▶ | | 4,926,460 | | 53,774 | 4,872,686 |
| | 4 | Income from investment of tax-exempt bond proceeds ▶ | | | | | |
| | 5 | Royalties ▶ | | 11,051,413 | 11,051,413 | | |
| | | | (i) Real / (ii) Personal | | | | |
| | 6a | Gross rents | | | | | |
| | b | Less rental expenses | | | | | |
| | c | Rental income or (loss) | | | | | |
| | d | Net rental income or (loss) ▶ | | | | | |
| | | | (i) Securities / (ii) Other | | | | |
| | 7a | Gross amount from sales of assets other than inventory | 386,932,824 | | | | |
| | b | Less cost or other basis and sales expenses | 382,901,774 | | | | |
| | c | Gain or (loss) | 4,031,050 | | | | |
| | d | Net gain or (loss) ▶ | | 4,031,050 | | | 4,031,050 |
| | 8a | Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18 | a | | | | |
| | b | Less direct expenses | b | | | | |
| | c | Net income or (loss) from fundraising events ▶ | | | | | |
| | 9a | Gross income from gaming activities See Part IV, line 19 | a | | | | |
| | b | Less direct expenses | b | | | | |
| | c | Net income or (loss) from gaming activities ▶ | | | | | |
| | 10a | Gross sales of inventory, less returns and allowances | a | | | | |
| | b | Less cost of goods sold | b | | | | |
| | c | Net income or (loss) from sales of inventory ▶ | | | | | |
| | | Miscellaneous Revenue | Business Code | | | | |
| | 11a | INCOME FROM SUBSIDIARI | 711300 | 28,951,224 | 28,951,224 | | |
| | b | ADMINISTRATIVE/SERVICE | 515100 | 1,265,167 | 1,265,167 | | |
| | c | COMMUNICATION SERVICES | 515100 | 1,132,081 | 574,679 | 557,402 | |
| | d | All other revenue | | 38,340 | 38,340 | | |
| | e | **Total.** Add lines 11a–11d ▶ | | 31,386,812 | | | |
| | 12 | **Total revenue.** See Instructions ▶ | | 484,948,541 | 234,071,352 | 3,004,385 | 8,903,736 |

## Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX . . . . . ☑

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|---|---|---|---|
| 1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21 | 17,843,952 | 17,843,952 | | |
| 2 Grants and other assistance to individuals in the United States See Part IV, line 22 | 58,088 | 58,088 | | |
| 3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 | 275,853 | 275,853 | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees . . . . | 3,284,730 | | 3,284,730 | |
| 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 | 40,646,430 | 29,597,847 | 11,022,983 | 25,600 |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . | 2,784,864 | 1,894,365 | 888,963 | 1,536 |
| 9 Other employee benefits . . . . . | 5,120,419 | 3,431,072 | 1,684,099 | 5,248 |
| 10 Payroll taxes . . . . . | 2,752,902 | 1,913,491 | 837,747 | 1,664 |
| 11 Fees for services (non-employees) | | | | |
| a Management . . . . . | | | | |
| b Legal . . . . . | 736,378 | 326,038 | 410,340 | |
| c Accounting . . . . . | 140,709 | | 140,709 | |
| d Lobbying . . . . . | 238,982 | | 238,982 | |
| e Professional fundraising services See Part IV, line 17 | | | | |
| f Investment management fees . . . . . | 272,608 | | 272,608 | |
| g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . . . | 20,719,836 | 18,408,704 | 2,311,132 | |
| 12 Advertising and promotion . . . . | 24,854,514 | 24,826,954 | 27,560 | |
| 13 Office expenses . . . . . | 1,429,142 | 784,766 | 644,376 | |
| 14 Information technology . . . . . | 6,656,277 | 5,170,637 | 1,485,640 | |
| 15 Royalties . . | 2,187,905 | 2,187,905 | | |
| 16 Occupancy . . . . . | 4,979,976 | 4,099,253 | 880,723 | |
| 17 Travel . . . . . | 3,307,574 | 2,767,590 | 539,984 | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . . | | | | |
| 19 Conferences, conventions, and meetings . . . . | 1,327,368 | 1,149,322 | 178,046 | |
| 20 Interest . . . . . | 593,490 | | 593,490 | |
| 21 Payments to affiliates . . . . . | | | | |
| 22 Depreciation, depletion, and amortization . . . . . | 146,444,980 | 143,978,350 | 2,466,630 | |
| 23 Insurance . . . . . | 570,467 | 168,302 | 402,165 | |
| 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O ) | | | | |
| a DONATED BROADCAST RTS | 158,652,121 | 158,652,121 | | |
| b COMMUNICATIONS | 11,371,417 | 9,835,370 | 1,536,047 | |
| c PROGRAM RIGHTS | 7,637,878 | 7,637,878 | | |
| d GRANT FUNDED EQUIPMENT | 1,883,838 | 1,883,838 | | |
| e All other expenses | 1,526,915 | 3,463,312 | -1,936,397 | |
| 25 **Total functional expenses.** Add lines 1 through 24e | 468,299,613 | 440,355,008 | 27,910,557 | 34,048 |
| 26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) | | | | |

**Part X** **Balance Sheet**

Check if Schedule O contains a response to any question in this Part X . . . . . ☐

| | | | | (A) Beginning of year | | (B) End of year |
|---|---|---|---|---|---|---|
| Assets | 1 | Cash—non-interest-bearing | | | 1 | |
| | 2 | Savings and temporary cash investments | | 25,649,726 | 2 | 17,201,854 |
| | 3 | Pledges and grants receivable, net | | 43,482,393 | 3 | 52,711,940 |
| | 4 | Accounts receivable, net | | 13,561,897 | 4 | 13,808,667 |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L | | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L | | | 6 | |
| | 7 | Notes and loans receivable, net | | | 7 | |
| | 8 | Inventories for sale or use | | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | 15,885,223 | 9 | 17,004,550 |
| | 10a | Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D | 10a 140,345,999 | | | |
| | b | Less accumulated depreciation | 10b 101,987,563 | 37,081,061 | 10c | 38,358,436 |
| | 11 | Investments—publicly traded securities | | 151,495,514 | 11 | 168,767,380 |
| | 12 | Investments—other securities See Part IV, line 11 | | 35,454,153 | 12 | 34,925,184 |
| | 13 | Investments—program-related See Part IV, line 11 | | | 13 | |
| | 14 | Intangible assets | | 67,251,285 | 14 | 73,419,481 |
| | 15 | Other assets See Part IV, line 11 | | 1,433,349 | 15 | 903,773 |
| | 16 | **Total assets.** Add lines 1 through 15 (must equal line 34) | | 391,294,601 | 16 | 417,101,265 |
| Liabilities | 17 | Accounts payable and accrued expenses | | 88,625,509 | 17 | 98,153,115 |
| | 18 | Grants payable | | 10,000 | 18 | |
| | 19 | Deferred revenue | | 3,028,359 | 19 | 3,928,954 |
| | 20 | Tax-exempt bond liabilities | | 19,030,000 | 20 | 18,545,000 |
| | 21 | Escrow or custodial account liability Complete Part IV of Schedule D | | | 21 | |
| | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L | | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | 8,000,000 | 23 | 6,398,614 |
| | 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 | | 10,544,839 | 25 | 9,434,812 |
| | 26 | **Total liabilities.** Add lines 17 through 25 | | 129,238,707 | 26 | 136,460,495 |
| Net Assets or Fund Balances | | **Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.** | | | | |
| | 27 | Unrestricted net assets | | 198,391,002 | 27 | 222,239,013 |
| | 28 | Temporarily restricted net assets | | 63,664,892 | 28 | 58,401,757 |
| | 29 | Permanently restricted net assets | | | 29 | |
| | | **Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.** | | | | |
| | 30 | Capital stock or trust principal, or current funds | | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building or equipment fund | | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | | 32 | |
| | 33 | Total net assets or fund balances | | 262,055,894 | 33 | 280,640,770 |
| | 34 | Total liabilities and net assets/fund balances | | 391,294,601 | 34 | 417,101,265 |

## Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . . ☐

| | | | |
|---|---|---|---|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 484,948,541 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 468,299,613 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | 16,648,928 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 262,055,894 |
| 5 | Net unrealized gains (losses) on investments | 5 | 1,935,948 |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | 0 |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 280,640,770 |

## Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . . ☑

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other _____<br>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a | | No |
| | 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<br>☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | |
| b | Were the organization's financial statements audited by an independent accountant? | 2b | Yes | |
| | 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<br>☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis | | | |
| c | If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? | 2c | Yes | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in 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 Single Audit Act and OMB Circular A-133? | 3a | Yes | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | 3b | Yes | |

## Additional Data

**Software ID:**
**Software Version:**
**EIN:** 52-0899215
**Name:** PUBLIC BROADCASTING SERVICE

### Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| PAULA A KERGER<br>PRESIDENT, CEO | 32 00<br>8 00 | X | | X | | | | 656,574 | 0 | 123,380 |
| GEOFFREY SANDS<br>BOARD CHAIR, DIRECTOR | 4 00<br>1 00 | X | | | | | | 0 | 0 | 0 |
| ALLEN WEATHERLY<br>PROFESSIONAL VICE CHAIR, DIRECTOR | 4 00 | X | | | | | | 0 | 0 | 0 |
| MOLLY CORBETT BROAD<br>GENERAL VICE CHAIR, DIRECTOR | 4 00 | X | | | | | | 0 | 0 | 0 |
| JON ABBOTT<br>DIRECTOR | 3 00 | X | | | | | | 0 | 0 | 0 |
| TOM AXTELL<br>DIRECTOR | 3 00 | X | | | | | | 0 | 0 | 0 |
| DONALD BAER<br>DIRECTOR | 2 00<br>1 00 | X | | | | | | 0 | 0 | 0 |
| FRED BERENS<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| AFSANEH BESCHLOSS<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| DONALD BOSWELL<br>DIRECTOR | 2 00<br>1 00 | X | | | | | | 0 | 0 | 0 |
| MALCOLM BRETT<br>DIRECTOR | 3 00 | X | | | | | | 0 | 0 | 0 |
| ERNEST BROMLEY<br>DIRECTOR | 3 00 | X | | | | | | 0 | 0 | 0 |
| RUBY CALVERT<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| PAULA CASTADIO<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| JACK GALMICHE<br>DIRECTOR | 3 00 | X | | | | | | 0 | 0 | 0 |
| CHARLES HAGEL<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| HELEN HERNANDEZ<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| LARRY IRVING<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| THOMAS KARLO<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| M HOWARD JACOBSON<br>DIRECTOR | 3 00 | X | | | | | | 0 | 0 | 0 |
| JOHN KING<br>DIRECTOR | 3 00 | X | | | | | | 0 | 0 | 0 |
| ALLAN LANDON<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| PETER MORRILL<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| LINDA O'BRYON<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| JIM PAGLIARINI<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |

## Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| SHARON ROCKEFELLER<br>DIRECTOR | 3 00 | X | | | | | | 0 | 0 | 0 |
| BRIAN SICKORA<br>DIRECTOR | 3 00 | X | | | | | | 0 | 0 | 0 |
| EVAN SMITH<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| LEO SOONG<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| DONNA A TANOUE<br>DIRECTOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| JOANN UROFSKY<br>DIRECTOR | 3 00 | X | | | | | | 0 | 0 | 0 |
| LLOYD WRIGHT<br>DIRECTOR | 3 00 | X | | | | | | 0 | 0 | 0 |
| MICHAEL D JONES<br>CHIEF OPERATING OFFICER | 35 00<br>5 00 | | | X | | | | 498,900 | 0 | 85,591 |
| BARBARA L LANDES<br>SVP, CFO, TREASURER | 35 00<br>5 00 | | | X | | | | 380,073 | 0 | 44,514 |
| KATHERINE S LAUDERDALE<br>SVP, GENERAL COUNSEL, CORP SEC | 35 00<br>5 00 | | | X | | | | 368,072 | 0 | 34,336 |
| JOHN S MCCOSKEY<br>CHIEF TECHNOLOGY OFFICER | 40 00 | | | X | | | | 338,142 | 0 | 48,609 |
| MARY L PLANTAMURA<br>ASST CORP SEC , ASSOC G C | 30 00 | | | X | | | | 123,272 | 0 | 30,133 |
| THOMAS E TARDIVO<br>VP FINANCE, ASST TREASURER | 35 00<br>5 00 | | | X | | | | 235,365 | 0 | 38,994 |
| JOYCE HERRING<br>SVP, STATION SERVICES | 35 00<br>5 00 | | | | | X | | 308,823 | 0 | 33,875 |
| LESLI J ROTENBERG<br>GM, CHILDREN'S MEDIA&SVP, MKTG&COMM | 40 00 | | | | | X | | 348,676 | 0 | 46,116 |
| ANDREW L RUSSELL<br>SVP, STRATEGY | 40 00 | | | | | X | | 324,895 | 0 | 48,603 |
| JASON SEIKEN<br>GM, DIGITAL | 40 00 | | | | | X | | 358,341 | 0 | 48,621 |
| JOHN S WILSON<br>SVP,PLEDGE STRATEGY&SPECIAL PROJECTS | 40 00 | | | | | X | | 309,672 | 0 | 46,096 |

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# SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

## Public Charity Status and Public Support

**Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.**

**▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No 1545-0047

**2012**

**Open to Public Inspection**

**Name of the organization**
PUBLIC BROADCASTING SERVICE

**Employer identification number**
52-0899215

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

**a** ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Non-functionally integrated

**e** ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

**f** If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

**g** Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

| | | Yes | No |
|---|---|---|---|
| **(i)** A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? | **11g(i)** | | |
| **(ii)** A family member of a person described in (i) above? | **11g(ii)** | | |
| **(iii)** A 35% controlled entity of a person described in (i) or (ii) above? | **11g(iii)** | | |

**h** Provide the following information about the supported organization(s)

| **(i) Name of supported organization** | **(ii)** EIN | **(iii)** Type of organization (described on lines 1- 9 above or IRC section **(see instructions))** | **(iv)** Is the organization in col **(i)** listed in your governing document? | | **(v)** Did you notify the organization in col **(i)** of your support? | | **(vi)** Is the organization in col **(i)** organized in the U S ? | | **(vii)** Amount of monetary support |
|---|---|---|---|---|---|---|---|---|---|
| | | | **Yes** | **No** | **Yes** | **No** | **Yes** | **No** | |
| | | | | | | | | | |
| | | | | | | | | | |
| **Total** | | | | | | | | | |

**For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.**

Cat No 11285F

**Schedule A (Form 990 or 990-EZ) 2012**

**Part II** **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

## Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") | 284,621,997 | 292,889,704 | 181,225,000 | 219,039,182 | 238,969,068 | 1,216,744,951 |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 **Total.** Add lines 1 through 3 | 284,621,997 | 292,889,704 | 181,225,000 | 219,039,182 | 238,969,068 | 1,216,744,951 |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 **Public support.** Subtract line 5 from line 4 | | | | | | 1,216,744,951 |

## Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
|---|---|---|---|---|---|---|
| 7 Amounts from line 4 | 284,621,997 | 292,889,704 | 181,225,000 | 219,039,182 | 238,969,068 | 1,216,744,951 |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 5,376,939 | 3,443,583 | 3,316,219 | 3,814,257 | 4,872,686 | 20,823,684 |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | 32,529 | 427,477 | 416,814 | 840,359 | 1,717,179 |
| 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) | 19,222,141 | 12,844,838 | 16,059,437 | 24,763,121 | 40,002,637 | 112,892,174 |
| 11 **Total support** (Add lines 7 through 10) | | | | | | 1,352,177,988 |

12 Gross receipts from related activities, etc (see instructions) **12** 997,054,857

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** . . . . . ▶☐

## Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) **14** 89 980 %

15 Public support percentage for 2011 Schedule A, Part II, line 14 **15** 92 340 %

16a **33 1/3% support test—2012.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support test—2011.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2012.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶☐

**Part III** **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

## Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") | | | | | | |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 **Total.** Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 **Public support** (Subtract line 7c from line 6 ) | | | | | | |

## Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
|---|---|---|---|---|---|---|
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) | | | | | | |
| 13 **Total support.** (Add lines 9, 10c, 11, and 12 ) | | | | | | |

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

## Section C. Computation of Public Support Percentage

| | | |
|---|---|---|
| 15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) | 15 | |
| 16 Public support percentage from 2011 Schedule A, Part III, line 15 | 16 | |

## Section D. Computation of Investment Income Percentage

| | | |
|---|---|---|
| 17 Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f)) | 17 | |
| 18 Investment income percentage from **2011** Schedule A, Part III, line 17 | 18 | |

19a **33 1/3% support tests—2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

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

**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

| Facts And Circumstances Test |
| --- |
| |

**Explanation**

SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME OTHER INCOME REPRESENTS ROYALTIES RECEIVED FOR USE OF PBS COPYRIGHTED MATERIALS AND INCOME FROM SUBSIDIARIES

**SCHEDULE C**
**(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

# Political Campaign and Lobbying Activities

**For Organizations Exempt From Income Tax Under section 501(c) and section 527**
**▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
**▶ See separate instructions.**

OMB No 1545-0047

**2012**

**Open to Public Inspection**

**If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**
- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

**If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

**If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then**
- Section 501(c)(4), (5), or (6) organizations Complete Part III

| Name of the organization | Employer identification number |
|---|---|
| PUBLIC BROADCASTING SERVICE | 52-0899215 |

## Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $

3 Volunteer hours

## Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

## Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

| **(a)** Name | **(b)** Address | **(c)** EIN | **(d)** Amount paid from filing organization's funds If none, enter -0- | **(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

**Part II-A** **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

**A** Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

**B** Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

| **Limits on Lobbying Expenditures** (The term "expenditures" means amounts paid or incurred.) | **(a)** Filing organization's totals | **(b)** Affiliated group totals |
|---|---|---|
| **1a** Total lobbying expenditures to influence public opinion (grass roots lobbying) | | |
| **b** Total lobbying expenditures to influence a legislative body (direct lobbying) | | |
| **c** Total lobbying expenditures (add lines 1a and 1b) | | |
| **d** Other exempt purpose expenditures | | |
| **e** Total exempt purpose expenditures (add lines 1c and 1d) | | |
| **f** Lobbying nontaxable amount Enter the amount from the following table in both columns | | |
| **g** Grassroots nontaxable amount (enter 25% of line 1f) | | |
| **h** Subtract line 1g from line 1a If zero or less, enter -0- | | |
| **i** Subtract line 1f from line 1c If zero or less, enter -0- | | |

| **If the amount on line 1e, column (a) or (b) is:** | **The lobbying nontaxable amount is:** |
|---|---|
| Not over $500,000 | 20% of the amount on line 1e |
| Over $500,000 but not over $1,000,000 | $100,000 plus 15% of the excess over $500,000 |
| Over $1,000,000 but not over $1,500,000 | $175,000 plus 10% of the excess over $1,000,000 |
| Over $1,500,000 but not over $17,000,000 | $225,000 plus 5% of the excess over $1,500,000 |
| Over $17,000,000 | $1,000,000 |

**j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

**4-Year Averaging Period Under Section 501(h)**
**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)**

**Lobbying Expenditures During 4-Year Averaging Period**

| Calendar year (or fiscal year beginning in) | **(a)** 2009 | **(b)** 2010 | **(c)** 2011 | **(d)** 2012 | **(e)** Total |
|---|---|---|---|---|---|
| **2a** Lobbying nontaxable amount | | | | | |
| **b** Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | |
| **c** Total lobbying expenditures | | | | | |
| **d** Grassroots nontaxable amount | | | | | |
| **e** Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | |
| **f** Grassroots lobbying expenditures | | | | | |

**Part II-B** **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

| *For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.* | | (a) Yes | (a) No | (b) Amount |
|---|---|---|---|---|
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of | | | |
| a | Volunteers? | | No | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | Yes | | |
| c | Media advertisements? | | No | |
| d | Mailings to members, legislators, or the public? | | No | |
| e | Publications, or published or broadcast statements? | | No | |
| f | Grants to other organizations for lobbying purposes? | | No | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | Yes | | 238,982 |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | No | |
| i | Other activities? | | No | |
| j | Total Add lines 1c through 1i | | | 238,982 |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | No | |
| b | If "Yes," enter the amount of any tax incurred under section 4912 | | | |
| c | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | |
| d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | |

**Part III-A** **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | 1 | | |
| 2 | Did the organization make only in-house lobbying expenditures of $2,000 or less? | 2 | | |
| 3 | Did the organization agree to carry over lobbying and political expenditures from the prior year? | 3 | | |

**Part III-B** **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

| | | | |
|---|---|---|---|
| 1 | Dues, assessments and similar amounts from members | 1 | |
| 2 | Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).** | | |
| a | Current year | 2a | |
| b | Carryover from last year | 2b | |
| c | Total | 2c | |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | 3 | |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | 4 | |
| 5 | Taxable amount of lobbying and political expenditures (see instructions) | 5 | |

**Part IV** **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

| Identifier | Return Reference | Explanation |
|---|---|---|
| EXPLANATION OF LOBBYING ACTIVITIES | PART II-B, LINE 1 | ADVOCACY IS FOCUSED ON A CONTINUED APPROPRIATION FOR THE CORPORATION FOR PUBLIC BROADCASTING AND GRANT PROGRAMS FOR WHICH PUBLIC BROADCASTING ENTITIES ARE ELIGIBLE, THE AUTHORIZATION OF PROGRAMS AS WELL AS RELEVANT REGULATORY MATTERS ADVOCACY CONSISTS OF ENGAGEMENT WITH MEMBERS OF CONGRESS, CONGRESSIONAL STAFF, AGENCY HEADS AND STAFF, AS WELL AS THE OCCASIONAL DISTRIBUTION OF MATERIALS |

**SCHEDULE D**
(Form 990)

Department of the Treasury
Internal Revenue Service

# Supplemental Financial Statements

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

OMB No 1545-0047

**2012**

**Open to Public Inspection**

**Name of the organization**
PUBLIC BROADCASTING SERVICE

**Employer identification number**
52-0899215

## Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

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

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

## Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

| | | | Held at the End of the Year |
|---|---|---|---|
| a | Total number of conservation easements | 2a | |
| b | Total acreage restricted by conservation easements | 2b | |
| c | Number of conservation easements on a certified historic structure included in (a) | 2c | |
| d | Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d | |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶_____

4 Number of states where property subject to conservation easement is located ▶_____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶_____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

## Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

| | | Amount |
|---|---|---|
| c Beginning balance | 1c | |
| d Additions during the year | 1d | |
| e Distributions during the year | 1e | |
| f Ending balance | 1f | |

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . . ☐

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|---|---|---|---|---|
| 1a Beginning of year balance . . . . | | | | | |
| b Contributions . . . . . | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships . . . . . | | | | | |
| e Other expenditures for facilities and programs . . . . . | | | | | |
| f Administrative expenses . . . . | | | | | |
| g End of year balance . . . . . | | | | | |

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

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

The percentages in lines 2a, 2b, and 2c should equal 100%

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

| | | Yes | No |
|---|---|---|---|
| (i) unrelated organizations . . . . . | 3a(i) | | |
| (ii) related organizations . . . . . | 3a(ii) | | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . . | 3b | | |

4 Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|---|---|---|---|
| 1a Land . . . . . | | 239,203 | | 239,203 |
| b Buildings . . . . . | | 18,773,786 | 3,611,714 | 15,162,072 |
| c Leasehold improvements . . . . . | | 14,893,056 | 5,255,168 | 9,637,888 |
| d Equipment . . . . . | | 101,716,538 | 89,049,130 | 12,667,408 |
| e Other . . . . . | | 4,723,416 | 4,071,551 | 651,865 |
| **Total.** Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . . . . ▶ | | | | 38,358,436 |

**Part VII Investments—Other Securities.** 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 | 26,447,962 | F |
| (3) Other<br>(A) INVESTMENT IN FUND OF FUNDS | 7,813,437 | F |
| (B) LIMITED LIABILITY COMPANY | 663,785 | C |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| **Total.** *(Column (b) must equal Form 990, Part X, col (B) line 12 )* ▶ | 34,925,184 | |

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

| (a) Description of investment type | (b) Book value | (c) Method of valuation Cost or end-of-year market value |
|---|---|---|
| | | |
| | | |
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| | | |
| | | |
| | | |
| | | |
| **Total.** *(Column (b) must equal Form 990, Part X, col (B) line 13 )* ▶ | | |

**Part IX Other Assets.** See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|---|
| | |
| | |
| | |
| | |
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| | |
| | |
| | |
| **Total.** *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶ | |

**Part X Other Liabilities.** See Form 990, Part X, line 25.

| 1 (a) Description of liability | (b) Book value |
|---|---|
| Federal income taxes | |
| DEFERRED LEASE OBLIGATION | 5,739,888 |
| DEFERRED CREDIT - TENANT ALLOWANCE | 2,940,678 |
| UNREALIZED LOSS ON INTEREST RATE SWAP | 754,246 |
| | |
| | |
| | |
| | |
| | |
| | |
| **Total.** *(Column (b) must equal Form 990, Part X, col (B) line 25 )* ▶ | 9,434,812 |

**2.** Fin 48 (ASC 740) Footnote 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

| | | | | | |
|---|---|---|---|---|---|
| 1 | Total revenue, gains, and other support per audited financial statements | | | 1 | 597,501,088 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | | | |
| a | Net unrealized gains on investments | 2a | 1,935,948 | | |
| b | Donated services and use of facilities | 2b | | | |
| c | Recoveries of prior year grants | 2c | | | |
| d | Other (Describe in Part XIII ) | 2d | 140,657,706 | | |
| e | Add lines **2a** through **2d** | | | 2e | 142,593,654 |
| 3 | Subtract line **2e** from line **1** | | | 3 | 454,907,434 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line **1** | | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | |
| b | Other (Describe in Part XIII ) | 4b | 30,041,107 | | |
| c | Add lines **4a** and **4b** | | | 4c | 30,041,107 |
| 5 | Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12 ) | | | 5 | 484,948,541 |

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

| | | | | | |
|---|---|---|---|---|---|
| 1 | Total expenses and losses per audited financial statements | | | 1 | 578,916,213 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | | | |
| a | Donated services and use of facilities | 2a | | | |
| b | Prior year adjustments | 2b | | | |
| c | Other losses | 2c | | | |
| d | Other (Describe in Part XIII ) | 2d | 110,616,600 | | |
| e | Add lines **2a** through **2d** | | | 2e | 110,616,600 |
| 3 | Subtract line **2e** from line **1** | | | 3 | 468,299,613 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line **1:** | | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | |
| b | Other (Describe in Part XIII ) | 4b | | | |
| c | Add lines **4a** and **4b** | | | 4c | 0 |
| 5 | Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18 ) | | | 5 | 468,299,613 |

## Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

| Identifier | Return Reference | Explanation |
|---|---|---|
| DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48 | PART X, LINE 2 | THE COMPANY ADOPTED THE PROVISIONS OF ASC 740-10, INCOME TAXES, ON JULY 1, 2007 UNDER ASC 740-10, AN ORGANIZATION MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE-LIKELY-THAN-NOT THAT THE POSITION WILL BE SUSTAINED THE IMPLEMENTATION OF ASC 740-10 HAD NO IMPACT ON THE COMPANY'S CONSOLIDATED FINANCIAL STATEMENTS THE COMPANY DOES NOT BELIEVE THERE ARE ANY UNRECOGNIZED TAX BENEFITS THAT SHOULD BE RECORDED FOR THE YEARS ENDED JUNE 30, 2013 AND 2012, THERE WAS NO INTEREST OR PENALTIES RECORDED OR INCLUDED IN THE CONSOLIDATED STATEMENTS OF ACTIVITIES THE COMPANY IS STILL OPEN TO EXAMINATION BY TAXING AUTHORITIES FROM FISCAL YEAR 2010 FORWARD |
| PART XI, LINE 2D - OTHER ADJUSTMENTS | | PBS ENTERPRISES, INC REVENUE, NET OF ELIMINATION ENTRIES 77,857 PUBLIC MEDIA DISTRIBUTION REVENUE, NET OF ELIMINATION ENTRIES 139,343,591 PBS FOUNDATION REVENUE, NET OF ELIMINATION ENTRIES 1,236,258 |
| PART XI, LINE 4B - OTHER ADJUSTMENTS | | INCOME FROM SUBSIDIARIES 28,951,224 ALLOCATION TO PBS FOUNDATION 1,089,883 |
| PART XII, LINE 2D - OTHER ADJUSTMENTS | | PBS ENTERPRISES, INC EXPENSES, NET OF ELIMINATION ENTRIES 3,809,349 PUBLIC MEDIA DISTRIBUTION EXPENSES, NET OF ELIMINATION ENTRIES 105,884,337 PBS FOUNDATION EXPENSES, NET OF ELIMINTATION ENTRIES 922,914 |

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

# Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
PUBLIC BROADCASTING SERVICE

Employer identification number
52-0899215

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

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

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

| | (a) Region | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in region | (d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for and investments in region |
|---|---|---|---|---|---|---|
| | CENTRAL AMERICA AND THE CARIBBEAN - | | | INVESTMENTS | | 7,813,437 |
| | NORTH AMERICA | 0 | 0 | GRANTS | | 275,853 |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 3a | Sub-total | 0 | 0 | | | 8,089,290 |
| b | Total from continuation sheets to Part I | 0 | 0 | | | 0 |
| c | **Totals** (add lines 3a and 3b) | 0 | 0 | | | 8,089,290 |

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

| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|---|---|---|---|---|---|---|---|---|
| | | | DEVELOPMENT OF KIDS TRANSMEDIA GAME SUITES | 275,853 | CHECK | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶ 1

3 Enter total number of other organizations or entities . . . . . ▶ 0

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

| **(a)** Type of grant or assistance | **(b)** Region | **(c)** Number of recipients | **(d)** Amount of cash grant | **(e)** Manner of cash disbursement | **(f)** Amount of non-cash assistance | **(g)** Description of non-cash assistance | **(h)** Method of valuation (book, FMV, appraisal, other) |
|---|---|---|---|---|---|---|---|
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## Part IV Foreign Forms

1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☑ No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organizationmay be required to 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)* ☐ Yes ☑ No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* ☐ Yes ☑ No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* ☐ Yes ☑ No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* ☐ Yes ☑ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).* ☐ Yes ☑ No

**Part V** **Supplemental Information**

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

| Identifier | ReturnReference | Explanation |
|---|---|---|
| PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S | | SCHEDULE F, PART I, LINE 2 PBS HAS ADOPTED A SUBRECIPIENT MONITORING POLICY AND ESTABLISHED PROCEDURES TO CAREFULLY MONITOR THE USE OF ALL GRANT FUNDS, BOTH INSIDE AND OUTSIDE OF THE UNITED STATES PBS' POLICIES AND PROCEDURES ARE TO ENSURE THAT ALL DONOR RESTRICTIONS AND REQUIREMENTS ARE MET, INCLUDING RELEVANT ALLOWABILITY CONSIDERATIONS, COST CONTROLS AND AUDIT REQUIREMENTS |
| METHOD USED TO ACCCOUNT FOR EXPENDITURES | | SCHEDULE F, PART I, LINE 3 ACCRUAL METHOD OF ACCOUNTING IS USED |
| | PART I, LINE 3 | PBS INVESTS IN A FUND OF FUNDS THAT UTILIZES A MASTER-FEEDER FUND STRUCTURE (THE 'MASTER FUND') THE MASTER FUND IS INCORPORATED IN THE BRITISH VIRGIN ISLANDS |

**Schedule I (Form 990)**

Department of the Treasury
Internal Revenue Service

# Grants and Other Assistance to Organizations, Governments and Individuals in the United States

**Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.**
**▶ Attach to Form 990**

OMB No 1545-0047

**2012**

**Open to Public Inspection**

Name of the organization
PUBLIC BROADCASTING SERVICE

**Employer identification number**
52-0899215

## Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

## Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| See Additional Data Table | | | | | | | |
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2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . ▶ 70

3 Enter total number of other organizations listed in the line 1 table . . . ▶ 3

**Part III** **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to 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 non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---|---|---|---|---|---|
| (1) READY-TO-LEARN FOR TECHNICAL DEVELOPMENT OF KIDS TRANSMEDIA GAME SUITES | 1 | 58,088 | | | |
| | | | | | |
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**Part IV** **Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

| Identifier | Return Reference | Explanation |
|---|---|---|
| PROCEDURE FOR MONITORING GRANTS IN THE U S | PART I, LINE 2 | SCHEDULE I, PART I, LINE 2 PBS HAS ADOPTED A SUBRECIPIENT MONITORING POLICY AND ESTABLISHED PROCEDURES TO CAREFULLY MONITOR THE USE OF ALL GRANT FUNDS, BOTH INSIDE AND OUTSIDE OF THE UNITED STATES PBS' POLICIES AND PROCEDURES ARE TO ENSURE THAT ALL DONOR RESTRICTIONS AND REQUIREMENTS ARE MET, INCLUDING RELEVANT ALLOWABILITY CONSIDERATIONS, COST CONTROLS AND AUDIT REQUIREMENTS |

## Additional Data

Return to Form

**Software ID:**
**Software Version:**
**EIN:** 52-0899215
**Name:** PUBLIC BROADCASTING SERVICE

### Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

| **(a)** Name and address of organization or government | **(b)** EIN | **(c)** IRC Code section if applicable | **(d)** Amount of cash grant | **(e)** Amount of non-cash assistance | **(f)** Method of valuation (book, FMV, appraisal, other) | **(g)** Description of non-cash assistance | **(h)** Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| TRUSTEES OF BOSTON UNIVERSITY881 COMMONWEALTH AVE 4TH FL BOSTON,MA 022151303 | 04-2103547 | 501 (C)(3 ) | 134,159 | | | | DEVELOPMENT OF A KIDS MULTI-PLATFORM, TRANSMEDIA GAMING SUITE |
| WGBH EDUCATIONAL FOUNDATIONONE GUEST ST BOSTON,MA 02135 | 04-2104397 | 501 (C)(3 ) | 655,171 | | | | DEVELOPMENT OF A KIDS MULTI-PLATFORM, TRANSMEDIA GAMING SUITE |

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| WNET - THIRTEEN825 EIGHTH AVE NEW YORK, NY 100197435 | 13-1945149 | 501 (C)(3 ) | 352,658 | | | | DEVELOPMENT OF A KIDS MULTI-PLATFORM, TRANSMEDIA GAMING SUITE |
| RANDOM HOUSE CHILDREN'S BOOKS1745 BROADWAY NEW YORK, NY 10019 | 13-2558190 | | 251,532 | | | | DEVELOPMENT OF A KIDS MULTI-PLATFORM, TRANSMEDIA GAMING SUITE |

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| JIM HENSON COMPANY<br>1416 N LABREA AVE<br>HOLLYWOOD,CA 90028 | 13-2571101 | | 131,851 | | | | DEVELOPMENT OF A KIDS MULTI-PLATFORM, TRANSMEDIA GAMING SUITE |
| SESAME WORKSHOPONE<br>LINCOLN PLAZA<br>NEW YORK,NY 10023 | 13-2655731 | 501 (C)(3 ) | 1,084,938 | | | | DEVELOPMENT OF A KIDS MULTI-PLATFORM, TRANSMEDIA GAMING SUITE |

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| WCFE MTN LAKE PUBLIC TELECOMM COUNCILONE SESAME ST PLATTSBURGH,NY 12901 | 14-1513789 | 501 (C)(3 ) | 105,011 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| KPBT PERMIAN BASIN PUBLIC TELECOMM INCPO BOX 8940 MIDLAND,TX 79708 | 20-3221344 | 501 (C)(3 ) | 10,060 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| VERMONT PUBLIC TELEVISION204 ETHAN ALLEN AVE COLCHESTER,VT 05446 | 22-2990644 | 501 (C)(3 ) | 10,000 | | | | INITIATIVES TO PRODUCE AND DISTRIBUTE WEB-ORIGINAL VIDEO CONTENT |
| WMEB-TV MAINE PUBLIC BROADCASTING1450 LISBON ST BANGOR,ME 04240 | 22-3171529 | 501 (C)(3 ) | 514,818 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

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|---|---|---|---|---|---|---|---|
| WTVP ILLINOIS VALLEY PUBLIC TELECOMM CORP 101 STATE ST PEORIA,IL 61602 | 23-7041401 | 501 (C)(3 ) | 314,562 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| KCPT-TV PUBLIC TELEVISION 19 INC125 E 31ST ST KANSAS CITY,MO 64108 | 23-7114952 | 501 (C)(3 ) | 99,624 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| WFWA FORT WAYNE PTV INC<br>2501 EAST COLISEUM BLVD<br>FORT WAYNE,IN 46805 | 23-7173906 | 501 (C)(3 ) | 152,629 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| ALASKA PUBLIC TELECOMMUNICATION<br>3877 UNIVERSITY DR<br>ANCHORAGE,AK 99508 | 23-7394629 | 501 (C)(3 ) | 10,000 | | | | TO PRODUCE AND DISTRIBUTE WEB-ORIGINAL VIDEO CONTENT |

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

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|---|---|---|---|---|---|---|---|
| WQED MULTIMEDIA4802 FIFTH AVE PITTSBURGH,PA 15213 | 25-1010296 | 501 (C)(3 ) | 10,000 | | | | TO PRODUCE AND DISTRIBUTE WEB-ORIGINAL VIDEO CONTENT |
| FRED ROGERS COMPANY 2100 WHARTON ST 700 PHILADELPHIA,PA 15203 | 25-1215087 | 501 (C)(3 ) | 4,275,000 | | | | DEVELOPMENT OF A KIDS MULTI-PLATFORM, TRANSMEDIA GAMING SUITE |

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

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|---|---|---|---|---|---|---|---|
| WCET-TV GTR CINCINNATI TELEVISION EDUC FNDTN 1223 CENTRAL PARKWAY CINCINNATI,OH 45214 | 31-0560051 | 501 (C)(3 ) | 121,300 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| WPTD-TV GTR DAYTON PTV INC110 S JEFFERSON ST DAYTON,OH 45402 | 31-0858459 | 501 (C)(3 ) | 222,770 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

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|---|---|---|---|---|---|---|---|
| WYIN-TV NW INDIANA PUBLIC BROADCASTING 8625 INDIANA PLACE MERRILLVILLE,IN 46410 | 31-0960136 | 501 (C)(3 ) | 158,780 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| WOSU PUBLIC MEDIA OF OHIO STATE UNIV2400 OLENTANGY RIVER RD COLUMBUS,OH 43210 | 31-6025986 | STATE OF OH | 69,682 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| WNEO TV WESTERN RESERVE PUBLIC MEDIA 1750 CAMPUS CENTER DR KENT,OH 44240 | 34-1123819 | 501 (C)(3 ) | 113,187 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| WGTE-TV PUBLIC BROADCASTING FNDTN OF NW OHIO1270 S DETROIT AVE PO BOX 30 TOLEDO,OH 43614 | 34-6554586 | 501 (C)(3 ) | 62,961 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| WFYI METRO INDIANAPOLIS PUBLIC BROADCASTING1630 NORTH MERIDIAN ST INDIANAPOLIS,IN 46202 | 35-1147600 | 501 (C)(3 ) | 71,225 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| WNIN-TV TRI-STATE PUBLIC MEDIA INC405 CARPENTER ST EVANSVILLE,IN 47708 | 35-1307165 | 501 (C)(3 ) | 109,227 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| WTIU-TV TRUSTEES OF INDIANA UNIV1229 E 7TH ST BLOOMINGTON,IN 47405 | 35-6001673 | 501 (C)(3 ) | 138,533 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| WMEC W CENTRAL ILLINOIS EDUC TELECOMM CORPPO BOX 6248 SPRINGFIELD,IL 62708 | 37-1019920 | 501 (C)(3 ) | 24,571 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| WSIU-TV BRD OF TRUSTEES OF SO ILLINOIS UNIV1100 LINCOLN DR STE 1003 CARBONDALE,IL 62901 | 37-6005961 | 501 (C)(3 ) | 260,679 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| WTVS DETROIT EDUC TV FNDTN1 CLOVER COURT WIXOM,MI 48393 | 38-1440200 | 501 (C)(3 ) | 18,245 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| WCMU CMU PUBLIC BROADCASTING1999 E CAMPUS DR MT PLEASANT, MI 48859 | 38-6004447 | 501 (C)(3 ) | 156,998 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| WDCQ-TV DELTA COLLEGE 1961 DELTA RD UNIVERSITY CENTER, MI 48710 | 38-6034011 | STATE OF MI | 344,984 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| TWIN CITIES PUBLIC TV<br>KTCA172 EAST 4TH ST<br>SAINT PAUL, MN 55101 | 41-0769851 | 501 (C)(3 ) | 10,000 | | | | INITIATIVES TO PRODUCE AND DISTRIBUTE WEB-ORIGINAL VIDEO CONTENT |
| TWIN CITIES PUBLIC TV<br>KTCA172 EAST 4TH ST<br>SAINT PAUL, MN 55101 | 41-0769851 | 501 (C)(3 ) | 429,143 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| TWIN CITIES PUBLIC TV KTCA172 EAST 4TH ST SAINT PAUL,MN 55101 | 41-0769851 | 501 (C)(3 ) | 126,000 | | | | NATIONAL PTV WEB RESOURCE ADDRESSING THE NEEDS OF AMERICA'S 50+ POPULATION |
| WDSE-TV DULUTH-SUPERIOR AREA EDUC TV CORP632 NIAGRA COURT DULUTH,MN 55811 | 41-0877607 | 501 (C)(3 ) | 6,700 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| KAWE NORTHERN MINNESOTA PTV INC1500 BIRCHMONT DR NE 9 BEMIDJI,MN 56601 | 41-1265701 | 501 (C)(3 ) | 113,700 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| KDIN-TV IOWA PUBLIC BROADCASTING6450 CORPORATE DR JOHNSTON,IA 50131 | 42-1008566 | STATE OF IA | 164,445 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| KOZK OZARKS PUBLIC TELEVISION901 SOUTH NATIONAL AVE SPRINGFIELD,MO 65804 | 44-6000308 | STATE OF MO | 166,159 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| KFME PRAIRIE PUBLIC BROADCASTING207 NORTH 5TH ST FARGO,ND 58102 | 45-0276899 | 501 (C)(3 ) | 416,114 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| KPTS-TV KANSAS PUBLIC TELECOMM SERVICE INC<br>320 WEST 21ST NORTH<br>WICHITA,KS 67203 | 48-0735215 | 501 (C)(3 ) | 129,143 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| KOOD SMOKY HILLS PTV<br>604 ELM ST<br>BUNKER HILL,KS 67626 | 48-0874906 | 501 (C)(3 ) | 230,264 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| KTWU WASHBURN UNIV OF TOPEKA1700 SW COLLEGE AVE<br>TOPEKA,KS 66621 | 48-6030115 | STATE OF KS | 153,429 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| WMPT-TV MARYLAND PUBLIC BROADCASTING 11767 OWINGS MILLS BLVD<br>OWINGS MILLS,MD 21117 | 52-6002033 | STATE OF MD | 302,246 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| WKLE KENTUCKY AUTH FOR EDUCATIONAL TV600 COOPER DR LEXINGTON, KY 40502 | 61-0600439 | STATE OF KY | 93,422 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| WKYU-TV1906 COLLEGE HEIGHTS BLVD 11035 BOWLING GREEN, KY 42101 | 61-1358086 | 501 (C)(3 ) | 28,757 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| WTCI-TV THE GTR CHATTANOOGA PTV CORP 7540 BONNYSHIRE DR CHATTANOOGA,TN 37416 | 62-1137597 | 501 (C)(3 ) | 35,000 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| WETP-TV EAST TENNESSEE PBS1611 EAST MAGNOLIA AVE KNOXVILLE,TN 37917 | 62-1173293 | 501 (C)(3 ) | 6,183 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| WNPT NASHVILLE PTV INC<br>161 RAINS AVE<br>NASHVILLE,TN 37203 | 62-1740928 | 501 (C)(3 ) | 10,000 | | | | INITIATIVES TO PRODUCE AND DISTRIBUTE WEB-ORIGINAL VIDEO CONTENT |
| WNPT NASHVILLE PTV INC<br>161 RAINS AVE<br>NASHVILLE,TN 37203 | 62-1740928 | 501 (C)(3 ) | 10,826 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| WBIQ-TV ALABAMA PTV<br>2112 11TH AVE SOUTH<br>STE 400<br>BIRMINGHAM,AL 35205 | 63-6000619 | STATE OF AL | 251,186 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| WXEL TV42 BARRY TELECOMM INCPO BOX 6607<br>WEST PALM BEACH,FL 33405 | 65-0728353 | 501 (C)(3 ) | 239,987 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| KETS-TV ARKANSAS EDUC TV COMMISSION350 S DONAGHEY CONWAY,AR 72034 | 71-0847443 | STATE OF AR | 462,337 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| WLPB LOUISIANA EDUC TV AUTHORITY7733 PERKINS RD BATON ROUGE,LA 70810 | 72-0850372 | STATE OF LA | 93,350 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| WLAE EDUC BROADCASTING FOUNDATION INC3333 NO CAUSEWAY BLVD STE 345 METAIRIE,LA 70002 | 72-0920100 | 501 (C)(3 ) | 13,670 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| KRSC-TV ROGERS STATE UNIV1701 W WILL RODGERS BLVD CLAREMORE,OK 74017 | 73-6017987 | STATE OF OK | 129,845 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| KUAT ARIZONA PUBLIC MEDIAPO BOX 210067 TUCSON,AZ 85721 | 74-2652689 | STATE OF AZ | 121,886 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| KERA-TV N TEXAS PUBLIC BROADCASTING3000 HARRY HINES BLVD DALLAS,TX 75201 | 75-2084961 | 501 (C)(3 ) | 569,579 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| KACV AMARILLO JR COLLEGE DISTRICTPO BOX 447 AMARILLO,TX 79178 | 75-6000031 | STATE OF TX | 240,550 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| KLRU TEXAS PUBLIC TELECOMM COUNCIL 2504-B WHITIS AVE AUSTIN,TX 78712 | 75-7126012 | 501 (C)(3 ) | 10,000 | | | | INITIATIVES TO PRODUCE AND DISTRIBUTE WEB-ORIGINAL VIDEO CONTENT |

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

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|---|---|---|---|---|---|---|---|
| KLRU TEXAS PUBLIC TELECOMM COUNCIL2504-B WHITIS AVE AUSTIN,TX 78712 | 75-7126012 | 501 (C)(3 ) | 82,932 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| KUSM MONTANA STATE UNIVVISUAL COMMUNICATION BUILDING MSU BOZEMAN,MT 59717 | 81-6010045 | STATE OF MT | 425,651 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| KAID IDAHO PUBLIC TELEVISION1455 N ORCHARD ST BOISE,ID 83706 | 82-6000952 | STATE OF ID | 12,777 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| KRMA-TV ROCKY MTN PUBLIC BROADCASTING 1089 BANNOCK ST DENVER,CO 80204 | 84-0510785 | 501 (C)(3 ) | 25,000 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| KENW-TV EASTERN NEW MEXICO UNIV52 BROADCAST CENTER ENMU PORTALES,NM 88130 | 85-6000286 | STATE OF NM | 35,238 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| LUNCH LAB LLC75 BRADFORD RD WATERTOWN,MA 02472 | 90-0499399 | | 125,220 | | | | DEVELOPMENT OF A KIDS MULTI-PLATFORM, TRANSMEDIA GAMING SUITE |

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|---|---|---|---|---|---|---|---|
| KBTC-TV BATES TECHNICAL COLLEGE2320 S 19TH ST TACOMA,WA 98405 | 91-1526457 | STATE OF WA | 220,204 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| KTOO CAPITAL COMMUNITY BROADCASTING360 EGAN DR JUNEAU,AK 99801 | 92-0058054 | 501 (C)(3 ) | 13,269 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

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|---|---|---|---|---|---|---|---|
| KQED-TV KQED INC2601 MARIPOSA ST SAN FRANCISCO,CA 94110 | 94-1241309 | 501 (C)(3 ) | 270,492 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| KVIE INC2030 W EL CAMINO AVE SACRAMENTO,CA 95833 | 94-1421463 | 501 (C)(3 ) | 279,448 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| KIXE-TV N CALIFORNIA EDUCTV ASSN INC603 N MARKET ST REDDING,CA 96003 | 94-1569300 | 501 (C)(3 ) | 74,592 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| KEET-TV REDWOOD EMPIRE PTV INCPO BOX 13 EUREKA,CA 95502 | 94-1658168 | 501 (C)(3 ) | 34,063 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| KRCB-TV RURAL CALIFORNIA BROADCASTING CORP 5850 LABATH AVE ROHNERT PARK,CA 94928 | 94-2718837 | 501 (C)(3 ) | 143,344 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |
| KPBS-TV SAN DIEGO STATE UNIV FNDTN5200 CAMPANILE DR SAN DIEGO,CA 92182 | 95-6042721 | 501 (C)(3 ) | 450,034 | | | | RESOURCES FOR TRANSMISSION OF FEMA'S PUBLIC ALERT AND WARNING SYSTEM |

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| PBS FOUNDATION2100 CRYSTAL DRIVE ARLINGTON,VA 22202 | 20-1476451 | 501 (C)(3 ) | 1,089,936 | | | | AFFILIATE SUPPORT |

**Schedule J**
(Form 990)

Department of the Treasury
Internal Revenue Service

# Compensation Information

**For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**
**▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.**
**▶ Attach to Form 990. ▶ See separate instructions.**

OMB No 1545-0047

**2012**

**Open to Public Inspection**

Name of the organization
PUBLIC BROADCASTING SERVICE

**Employer identification number**
52-0899215

## Part I Questions Regarding Compensation

| | | | Yes | No |
|---|---|---|---|---|
| **1a** | Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items<br>☐ First-class or charter travel ☐ Housing allowance or residence for personal use<br>☐ Travel for companions ☐ Payments for business use of personal residence<br>☑ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees<br>☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef) | | | |
| **b** | If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain | **1b** | Yes | |
| **2** | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | **2** | Yes | |
| **3** | Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III<br>☑ Compensation committee ☑ Written employment contract<br>☑ Independent compensation consultant ☑ Compensation survey or study<br>☑ Form 990 of other organizations ☑ Approval by the board or compensation committee | | | |
| **4** | During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization | | | |
| **a** | Receive a severance payment or change-of-control payment? | **4a** | | No |
| **b** | Participate in, or receive payment from, a supplemental nonqualified retirement plan? | **4b** | Yes | |
| **c** | Participate in, or receive payment from, an equity-based compensation arrangement? | **4c** | | No |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III | | | |
| | **Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.** | | | |
| **5** | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of | | | |
| **a** | The organization? | **5a** | | No |
| **b** | Any related organization? | **5b** | | No |
| | If "Yes," to line 5a or 5b, describe in Part III | | | |
| **6** | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of | | | |
| **a** | The organization? | **6a** | | No |
| **b** | Any related organization? | **6b** | | No |
| | If "Yes," to line 6a or 6b, describe in Part III | | | |
| **7** | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III | **7** | | No |
| **8** | Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III | **8** | | No |
| **9** | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? | **9** | | |

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

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

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

| **(A)** Name and Title | **(B)** Breakdown of W-2 and/or 1099-MISC compensation | | | **(C)** Retirement and other deferred compensation | **(D)** Nontaxable benefits | **(E)** Total of columns (B)(i)-(D) | **(F)** Compensation reported as deferred in prior Form 990 |
|---|---|---|---|---|---|---|---|
| | **(i)** Base compensation | **(ii)** Bonus & incentive compensation | **(iii)** Other reportable compensation | | | | |
| See Additional Data Table | | | | | | | |

## Part III Supplemental Information

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

| Identifier | Return Reference | Explanation |
|---|---|---|
| | PART I, LINE 1A | PART I, LINE 1A PBS GROSSES UP PAYMENTS FOR CERTAIN TAXABLE BENEFITS PROVIDED TO CERTAIN EXECUTIVES |
| | PART I, LINE 4B | PART I, LINE 4B PAULA A KERGER - 457F RETIREMENT PLAN CONTRIBUTION $50,000 MICHAEL D JONES - 457F RETIREMENT PLAN CONTRIBUTION $33,500 |

## Additional Data

Return to Form

**Software ID:**
**Software Version:**
**EIN:** 52-0899215
**Name:** PUBLIC BROADCASTING SERVICE

### Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

| (A) Name | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported in prior Form 990 or Form 990-EZ |
|---|---|---|---|---|---|---|---|---|
| | | (i) Base Compensation | (ii) Bonus & incentive compensation | (iii) Other compensation | | | | |
| PAULA A KERGER | (i) | 478,836 | 171,700 | 6,038 | 100,000 | 23,380 | 779,954 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| MICHAEL D JONES | (i) | 380,400 | 105,900 | 12,600 | 56,000 | 29,591 | 584,491 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| BARBARA L LANDES | (i) | 309,220 | 62,000 | 8,853 | 22,500 | 22,014 | 424,587 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| KATHERINE S LAUDERDALE | (i) | 306,072 | 62,000 | 0 | 22,500 | 11,836 | 402,408 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| JOHN S MCCOSKEY | (i) | 281,577 | 55,300 | 1,265 | 22,500 | 26,109 | 386,751 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| MARY L PLANTAMURA | (i) | 116,872 | 6,400 | 0 | 10,235 | 19,898 | 153,405 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| THOMAS E TARDIVO | (i) | 204,165 | 31,200 | 0 | 17,274 | 21,720 | 274,359 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| JOYCE HERRING | (i) | 262,120 | 46,100 | 603 | 22,500 | 11,375 | 342,698 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| LESLI J ROTENBERG | (i) | 288,696 | 53,500 | 6,480 | 20,000 | 26,116 | 394,792 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANDREW L RUSSELL | (i) | 270,302 | 47,100 | 7,493 | 22,500 | 26,103 | 373,498 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| JASON SEIKEN | (i) | 284,416 | 64,200 | 9,725 | 22,500 | 26,121 | 406,962 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| JOHN S WILSON | (i) | 261,717 | 40,700 | 7,255 | 20,000 | 26,096 | 355,768 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

**Schedule K (Form 990)**

Department of the Treasury
Internal Revenue Service

# Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

**2012**

**Open to Public Inspection**

Name of the organization
PUBLIC BROADCASTING SERVICE

**Employer identification number**
52-0899215

## Part I Bond Issues

| | (a) Issuer name | (b) Issuer EIN | (c) CUSIP # | (d) Date issued | (e) Issue price | (f) Description of purpose | (g) Defeased | | (h) On behalf of issuer | | (i) Pool financing | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | Yes | No | Yes | No | Yes | No |
| A | FAIRFAX COUNTY ECONOMIC DEVELOPMENT AUTHORITY VARIABLE RATE REVENUE BONDS | 23-7011544 | 30382EDB7 | 06-30-2005 | 19,500,000 | REHAB/EXPANSION OF TECHNICAL FACILITIES/OUTFIT NEW HEADQUARTERS FACILITIES | | X | | X | | X |

## Part II Proceeds

| | | A | B | C | D |
|---|---|---|---|---|---|
| 1 | Amount of bonds retired | 955,000 | | | |
| 2 | Amount of bonds legally defeased | | | | |
| 3 | Total proceeds of issue | 19,500,000 | | | |
| 4 | Gross proceeds in reserve funds | | | | |
| 5 | Capitalized interest from proceeds | 520,000 | | | |
| 6 | Proceeds in refunding escrows | | | | |
| 7 | Issuance costs from proceeds | 8,860 | | | |
| 8 | Credit enhancement from proceeds | 36,819 | | | |
| 9 | Working capital expenditures from proceeds | | | | |
| 10 | Capital expenditures from proceeds | 18,934,321 | | | |
| 11 | Other spent proceeds | 674,529 | | | |
| 12 | Other unspent proceeds | | | | |
| 13 | Year of substantial completion | 2006 | | | |

| | | A | | B | | C | | D | |
|---|---|---|---|---|---|---|---|---|---|
| | | Yes | No | Yes | No | Yes | No | Yes | No |
| 14 | Were the bonds issued as part of a current refunding issue? | | X | | | | | | |
| 15 | Were the bonds issued as part of an advance refunding issue? | | X | | | | | | |
| 16 | Has the final allocation of proceeds been made? | X | | | | | | | |
| 17 | Does the organization maintain adequate books and records to support the final allocation of proceeds? | X | | | | | | | |

## Part III Private Business Use

| | | A | | B | | C | | D | |
|---|---|---|---|---|---|---|---|---|---|
| | | Yes | No | Yes | No | Yes | No | Yes | No |
| 1 | Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? | | X | | | | | | |
| 2 | Are there any lease arrangements that may result in private business use of bond-financed property? | | X | | | | | | |

## Part III Private Business Use *(Continued)*

| | | A | | B | | C | | D | |
|---|---|---|---|---|---|---|---|---|---|
| | | Yes | No | Yes | No | Yes | No | Yes | No |
| 3a | Are there any management or service contracts that may result in private business use of bond-financed property? | | X | | | | | | |
| b | If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? | | | | | | | | |
| c | Are there any research agreements that may result in private business use of bond-financed property? | | X | | | | | | |
| d | If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? | | | | | | | | |
| 4 | Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶ | % | | % | | % | | % | |
| 5 | Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501 (c)(3) organization, or a state or local government ▶ | % | | % | | % | | % | |
| 6 | Total of lines 4 and 5 | % | | % | | % | | % | |
| 7 | Does the bond issue meet the private security or payment test? | | X | | | | | | |
| 8a | Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued? | | X | | | | | | |
| b | If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of | % | | % | | % | | % | |
| c | If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2? | | | | | | | | |
| 9 | Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2? | X | | | | | | | |

## Part IV Arbitrage

| | | A | | B | | C | | D | |
|---|---|---|---|---|---|---|---|---|---|
| | | Yes | No | Yes | No | Yes | No | Yes | No |
| 1 | Has the issuer filed Form 8038-T? | | X | | | | | | |
| 2 | If "No" to line 1, did the following apply? | | | | | | | | |
| a | Rebate not due yet? | X | | | | | | | |
| b | Exception to rebate? | X | | | | | | | |
| c | No rebate due? | X | | | | | | | |
| | If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed | | | | | | | | |
| 3 | Is the bond issue a variable rate issue? | X | | | | | | | |
| 4a | Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? | X | | | | | | | |
| b | Name of provider | BANK OF AMERICA | | | | | | | |
| c | Term of hedge | 10 000000000000 | | | | | | | |
| d | Was the hedge superintegrated? | | X | | | | | | |
| e | Was a hedge terminated? | | X | | | | | | |

**Part IV Arbitrage** *(Continued)*

| | | A | | B | | C | | D | |
|---|---|---|---|---|---|---|---|---|---|
| | | Yes | No | Yes | No | Yes | No | Yes | No |
| 5a | Were gross proceeds invested in a guaranteed investment contract (GIC)? | | X | | | | | | |
| b | Name of provider | | | | | | | | |
| c | Term of GIC | | | | | | | | |
| d | Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? | | | | | | | | |
| 6 | Were any gross proceeds invested beyond an available temporary period? | | X | | | | | | |
| 7 | Has the organization established written procedures to monitor the requirements of section 148? | X | | | | | | | |

**Part V Procedures To Undertake Corrective Action**

| | | A | | B | | C | | D | |
|---|---|---|---|---|---|---|---|---|---|
| | | Yes | No | Yes | No | Yes | No | Yes | No |
| 1 | Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations? | X | | | | | | | |

**Part VI Supplemental Information.** Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

| Identifier | Return Reference | Explanation |
|---|---|---|
| SCHEDULE K, PART II, LINE 11 | OTHER SPENT FUNDS | THE OTHER SPENT FUNDS OF $674,529 ON LINE 11 REPRESENTS FUNDS SPENT FROM INVESTMENT PROCEEDS FROM INVESTMENTS THAT ACCRUED DURING THE PROJECT PERIOD |

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493128014204

**Schedule L**
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

# Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

**2012**

**Open to Public Inspection**

Name of the organization
PUBLIC BROADCASTING SERVICE

**Employer identification number**
52-0899215

## Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

| 1 (a) Name of disqualified person | (b) Relationship between disqualified person and organization | (c) Description of transaction | (d) Corrected? Yes | No |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ $

## Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

| (a) Name of interested person | (b) Relationship with organization | (c) Purpose of loan | (d) Loan to or from the organization? To | From | (e) Original principal amount | (f) Balance due | (g) In default? Yes | No | (h) Approved by board or committee? Yes | No | (i) Written agreement? Yes | No |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Total | | | ▶ $ | | | | | | | | | |

## Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of assistance | (d) Type of assistance | (e) Purpose of assistance |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

**Part IV** **Business Transactions Involving Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | (e) Sharing of organization's revenues? Yes | No |
|---|---|---|---|---|---|
| (1) HOGAN LOVELLS LLC | SEE PART V | 164,003 | SEE PART V | | No |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

**Part V** **Supplemental Information**
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

| Identifier | Return Reference | Explanation |
|---|---|---|
| SCH L, PART IV - CONTINUATION | | COLUMN (B) - RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION JOHN PORTER, A PARTNER AT HOGAN LOVELLS LLC, IS A FORMER DIRECTOR OF PBS AND A CURRENT DIRECTOR OF THE PBS FOUNDATION COLUMN (D) - DESCRIPTION OF TRANSACTION LEGAL SERVICES |

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

# Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
PUBLIC BROADCASTING SERVICE

Employer identification number
52-0899215

## Part I Types of Property

| | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts |
|---|---|---|---|---|
| 1 Art—Works of art | | | | |
| 2 Art—Historical treasures | | | | |
| 3 Art—Fractional interests | | | | |
| 4 Books and publications | | | | |
| 5 Clothing and household goods | | | | |
| 6 Cars and other vehicles | | | | |
| 7 Boats and planes | | | | |
| 8 Intellectual property | | | | |
| 9 Securities—Publicly traded | | | | |
| 10 Securities—Closely held stock | | | | |
| 11 Securities—Partnership, LLC, or trust interests | | | | |
| 12 Securities—Miscellaneous | | | | |
| 13 Qualified conservation contribution—Historic structures | | | | |
| 14 Qualified conservation contribution—Other | | | | |
| 15 Real estate—Residential | | | | |
| 16 Real estate—Commercial | | | | |
| 17 Real estate—Other | | | | |
| 18 Collectibles | | | | |
| 19 Food inventory | | | | |
| 20 Drugs and medical supplies | | | | |
| 21 Taxidermy | | | | |
| 22 Historical artifacts | | | | |
| 23 Scientific specimens | | | | |
| 24 Archeological artifacts | | | | |
| 25 Other ▶ ( DONATED ) | X | 674 | 158,652,121 | IMPUTED VALUE |
| 26 Other ▶ ( BROADCAST ) | | | | |
| 27 Other ▶ ( RIGHTS ) | | | | |
| 28 Other ▶ ( ) | | | | |

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

| | | Yes | No |
|---|---|---|---|
| 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? | 30a | | No |
| b If "Yes," describe the arrangement in Part II | | | |
| 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? | 31 | | No |
| 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? | 32a | | No |
| b If "Yes," describe in Part II | | | |
| 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II | | | |

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

| Identifier | Return Reference | Explanation |
|---|---|---|
| METHOD FOR DETERMINING NUMBER OF CONTRIBUTIONS | PART I, COLUMN (B) | SCHEDULE M, PART I, COLUMN B THE COMPANY REPORTED 674 RECEIPTS OF DONATED BROADCAST RIGHTS WHICH ARE PRODUCTION COSTS CONTRIBUTED DIRECTLY TO PRODUCERS |

**SCHEDULE O**
**(Form 990 or 990-EZ)**

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 to provide any additional information.**
**▶ Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

**2012**

**Open to Public Inspection**

Name of the organization
PUBLIC BROADCASTING SERVICE

**Employer identification number**
52-0899215

| Identifier | Return Reference | Explanation |
|---|---|---|
| NUMBER OF EMPLOYEES | FORM 990, PART I, LINE 5 AND V, LINE 2A | THE TOTAL NUMBER OF EMPLOYEES EMPLOYED BY PBS AT SOME POINT DURING CALENDAR 2012 WHO RECEIVED A 2012 FORM W-2 WAS 497 THE ACTUAL TOTAL NUMBER OF EMPLOYEES AT JUNE 30, 2013 WAS 420 |

| Identifier | Return Reference | Explanation |
| --- | --- | --- |
| EXPLANATION OF AUDIT OF FINANCIAL STATEMENTS | FORM 990, PART IV, LINE 12 AND XI, LINE 2B | PBS UNDERGOES AN ANNUAL AUDIT AS A CONSOLIDATED ENTITY AND THEREFORE IS NOT AUDITED ON AN INDIVIDUAL BASIS AUDITS ARE CONDUCTED BY AN INDEPENDENT ACCOUNTING FIRM |

| Identifier | Return Reference | Explanation |
| --- | --- | --- |
| | FORM 990, PART VI, SECTION A, LINE 1 | EXECUTIVE COMMITTEE THE EXECUTIVE COMMITTEE OF THE PBS BOARD OF DIRECTORS HAS THE AUTHORITY TO ACT ON BEHALF OF THE BOARD BETWEEN MEETINGS OF THE BOARD, AS NEEDED, AND SHALL TIMELY REPORT SUCH ACTIONS TO THE FULL BOARD THE EXECUTIVE COMMITTEE CONSISTS OF THE BOARD CHAIR, THE PBS PRESIDENT, THE CHAIRS OF THE FOUR STANDING COMMITTEES OF THE BOARD, AND THREE TO FIVE AT-LARGE DIRECTORS TO BE SELECTED BY THE BOARD CHAIR ALL APPOINTMENTS TO THE EXECUTIVE COMMITTEE SHALL BE APPROVED BY A MAJORITY OF THE BOARD |

| Identifier | Return Reference | Explanation |
| --- | --- | --- |
| | FORM 990, PART VI, SECTION A, LINE 6 | PBS MEMBER STATIONS ARE FCC NONCOMMERCIAL, EDUCATIONAL LICENSEES THAT RECEIVE AND DISTRIBUTE PBS PROGRAMMING IN LOCAL MARKETS AFTER HAVING APPLIED FOR AND BEEN GRANTED MEMBERSHIP STATUS IN PBS BY THE PBS BOARD |

| Identifier | Return Reference | Explanation |
| --- | --- | --- |
| | FORM 990, PART VI, SECTION A, LINE 7A | MEMBERS OF THE ORGANIZATION ELECT NO FEWER THAN 14 MEMBERS OF THE GOVERNING BODY |

| Identifier | Return Reference | Explanation |
| --- | --- | --- |
| | FORM 990, PART VI, SECTION A, LINE 7B | ANY AMENDMENT OF THE BY-LAWS ALTERING THE CLASSES OR NUMBER OF MEMBERS OR DIRECTORS, OR THE TERMS OF DIRECTORS, SHALL ALSO REQUIRE THE APPROVAL OF A MAJORITY OF THE MEMBERS VOTING |

| Identifier | Return Reference | Explanation |
| --- | --- | --- |
| | FORM 990, PART VI, SECTION B, LINE 11 | THE PROCESS FOR REVIEWING THE PBS FORM 990 PRIOR TO FILING INCLUDES A REVIEW BY THE CEO, CFO/TREASURER, GENERAL COUNSEL, AND THE EXECUTIVE COMMITTEE OF THE BOARD IN ADDITION, COPIES OF THE FORM ARE PROVIDED TO THE FULL BOARD PRIOR TO FILING |

| Identifier | Return Reference | Explanation |
| --- | --- | --- |
| | FORM 990, PART VI, SECTION B, LINE 12C | IN ACCORDANCE WITH THE PBS CONFLICT OF INTEREST POLICY, ALL PBS STAFF AT THE DIRECTOR LEVEL AND ABOVE ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST FORM ANNUALLY THESE FORMS ARE DISTRIBUTED, COLLECTED, RETAINED AND REVIEWED BY THE OFFICE OF THE PBS GENERAL COUNSEL WITH RESPECT TO THE PBS BOARD, OFFICERS, AND DIRECTORS COMPLETE A CONFLICT OF INTEREST FORM ANNUALLY AND THESE FORMS ARE REVIEWED BY THE NOMINATING AND CORPORATE GOVERNANCE COMMITTEE AND THE CORPORATE SECRETARY ANNUALLY IN ACCORDANCE WITH THE POLICY, POTENTIAL CONFLICTS ARISING DURING THE YEAR ARE REVIEWED BY THE CHAIRMAN OF THE BOARD, THE CHAIR OF THE NOMINATING AND CORPORATE GOVERNANCE COMMITTEE, AND/OR THE CORPORATE SECRETARY |

| Identifier | Return Reference | Explanation |
| --- | --- | --- |
| | FORM 990, PART VI, SECTION B, LINE 15 | THE EXECUTIVE COMMITTEE OF THE BOARD IS RESPONSIBLE FOR EXECUTIVE COMPENSATION THE EXECUTIVE COMMITTEE RETAINS AN INDEPENDENT EXECUTIVE COMPENSATION EXPERT WHO SUPPLIES COMPARABILITY DATA ON THE CEO AND ALL KEY EMPLOYEES AND A WRITTEN OPINION ON COMPLIANCE WITH INTERMEDIATE SANCTIONS THE EXECUTIVE COMMITTEE MAKES A RECOMMENDATION ON CEO COMPENSATION TO THE FULL BOARD, WHICH APPROVES ANY SUCH COMPENSATION THE CEO IS RECUSED FROM ANY DISCUSSION AND VOTE THE EXECUTIVE COMMITTEE APPROVES COMPENSATION OF THE CHIEF OPERATING OFFICER, CHIEF FINANCIAL OFFICER, CHIEF LEGAL OFFICER AND CHIEF TECHNOLOGY OFFICER |

| Identifier | Return Reference | Explanation |
| --- | --- | --- |
| | FORM 990, PART VI, SECTION C, LINE 19 | PBS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE MADE AVAILABLE UPON REQUEST FINANCIAL STATEMENTS ARE AVAILABLE ON PBS' WEBSITE |

| Identifier | Return Reference | Explanation |
| --- | --- | --- |
| JOINT VENTURE POLICY/PROCEDURE | FORM 990 PART VI, SECTION B, LINE 16B | PBS HAS NOT ADOPTED A WRITTEN POLICY OR PROCEDURE REGARDING THIS ISSUE, BUT EXTENSIVELY EXAMINES ANY POTENTIAL PARTICIPATION IN JOINT VENTURE ARRANGEMENTS UNDER APPLICABLE FEDERAL TAX LAW AND TAKES STEPS TO SAFEGUARD THE ORGANIZATION'S EXEMPT STATUS WITH RESPECT TO SUCH ARRANGEMENTS AS PART OF ITS DUE DILIGENCE IN CONSIDERING ANY BUSINESS VENTURE |

| Identifier | Return Reference | Explanation |
| --- | --- | --- |
| FUNDRAISING | FORM 990, PART IX, COLUMN (D) | FUNDRAISING COSTS REFLECTED IN PART IX, COLUMN D RELATE TO TIME SPENT BY STAFF IN WRITING PROPOSALS AND SOLICITING SUPPORT FROM GOVERNMENT AGENCIES THE ASSOCIATED REVENUE AS A RESULT OF THESE EFFORTS IS REFLECTED IN PART VIII, LINE 1E PBS DOES NOT INCUR FUNDRAISING EXPENSE AS RELATES TO ITS CONTRIBUTIONS REFLECTED ON PART VIII, LINE 1F THE AMOUNTS IN THIS LINE ITEM ARE MADE UP OF THE FOLLOWING CORPORATION FOR PUBLIC BROADCASTING (CPB) THE PUBLIC BROADCASTING ACT REQUIRES THAT A SET PERCENTAGE OF THE CPB FEDERAL APPROPRIATION BE USED FOR NATIONAL PUBLIC TELEVISION PROGRAMMING PURSUANT TO A PLAN DEVELOPED BY CPB IN CONSULTATION WITH PBS AND OTHERS, WHICH IS REGULARLY REVIEWED AND ADJUSTED PBS DOES NOT SOLICIT THESE FUNDS FROM CPB DONATED BROADCAST RIGHTS THESE ARE NON-CASH CONTRIBUTIONS MADE BY ORGANIZATIONS AND ARE NOT SOLICITED BY PBS OTHER CONTRIBUTIONS PBS FOUNDATION (PBSF) SOLICITS FUNDS THROUGHOUT THE COUNTRY IN SUPPORT OF PUBLIC BROADCASTING THE MAJORITY OF THESE FUNDS ARE THEN GRANTED TO PBS TO ENSURE PBS'S CONTINUED EXCELLENCE AND TO PROMOTE AND ENHANCE OUTSTANDING PUBLIC BROADCASTING PROGRAMS AND SERVICES |

# SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

## Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
PUBLIC BROADCASTING SERVICE

Employer identification number
52-0899215

**Part I** **Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity |
|---|---|---|---|---|---|
| (1) PBS DIGITAL LLC<br>2100 CRYSTAL DRIVE<br>ARLINGTON, VA 22202<br>20-2550162 | TO ACCOUNT FOR PBS'S ACTIVITIES WITH THE CHILDREN'S NETWORK, LLC | DE | 457,308 | 4,333,476 | PUBLIC BROADCASTING SERVICE |
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**Part II** **Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | (g) Section 512 (b)(13) controlled entity? Yes | No |
|---|---|---|---|---|---|---|---|
| (1) PBS FOUNDATION<br>2100 CRYSTAL DRIVE<br>ARLINGTON, VA 22202<br>20-1476451 | TO SUPPORT PUBLIC BROADCASTING SERVICE | DC | 501(C)(3) | 509(A)(3) | PUBLIC BROADCASTING SERVICE | | No |
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**Part III** **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to 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 allocations? Yes | (h) No | (i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? Yes | (j) No | (k) Percentage ownership |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **(1)** PUBLIC MEDIA DISTRIBUTION LLC<br><br>10 GUEST STREET<br>BOSTON, MA 02135<br>26-3659281 | PROMOTE PBS' MISSION THROUGH DISTRIBUTION OF PROGRAMS | DE | PUBLIC BROADCASTING SERVICE | RELATED | 33,492,249 | 36,718,910 | Yes | | | Yes | | 60 000 % |
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**Part IV** **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to 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 | (i) No |
|---|---|---|---|---|---|---|---|---|---|
| **(1)** PBS ENTERPRISES INC<br><br>2100 CRYSTAL DRIVE<br>ARLINGTON, VA 22202<br>52-1398805 | HOLDING COMPANY | VA | PUBLIC BROADCASTING SERVICE | C | | 5,012,608 | 100 000 % | Yes | |
| **(2)** NATIONAL DATACAST INCORPORATED<br><br>2100 CRYSTAL DRIVE<br>ARLINGTON, VA 22202<br>52-1577842 | COMMUNICATION DATA BROADCASTING SERVICE | VA | PBS ENTERPRISES INC | C | -2,176,661 | 5,382,401 | 88 580 % | | No |
| **(3)** IMMEDIA INC<br><br>2100 CRYSTAL DRIVE<br>ARLINGTON, VA 22202<br>26-2610560 | ENTERTAINMENT AND INFORMATION SERVICES | VA | NATIONAL DATACASTING INCORPORATED | C | | | 88 580 % | | No |
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**Part V** **Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

| | | Yes | No |
|---|---|---|---|
| **1** During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | | | |
| **a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity | 1a | | No |
| **b** Gift, grant, or capital contribution to related organization(s) | 1b | Yes | |
| **c** Gift, grant, or capital contribution from related organization(s) | 1c | Yes | |
| **d** Loans or loan guarantees to or for related organization(s) | 1d | | No |
| **e** Loans or loan guarantees by related organization(s) | 1e | | No |
| **f** Dividends from related organization(s) | 1f | | No |
| **g** Sale of assets to related organization(s) | 1g | | No |
| **h** Purchase of assets from related organization(s) | 1h | | No |
| **i** Exchange of assets with related organization(s) | 1i | | No |
| **j** Lease of facilities, equipment, or other assets to related organization(s) | 1j | | No |
| **k** Lease of facilities, equipment, or other assets from related organization(s) | 1k | | No |
| **l** Performance of services or membership or fundraising solicitations for related organization(s) | 1l | Yes | |
| **m** Performance of services or membership or fundraising solicitations by related organization(s) | 1m | Yes | |
| **n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | 1n | Yes | |
| **o** Sharing of paid employees with related organization(s) | 1o | | No |
| **p** Reimbursement paid to related organization(s) for expenses | 1p | | No |
| **q** Reimbursement paid by related organization(s) for expenses | 1q | Yes | |
| **r** Other transfer of cash or property to related organization(s) | 1r | | No |
| **s** Other transfer of cash or property from related organization(s) | 1s | Yes | |

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

| **(a)** Name of other organization | **(b)** Transaction type (a-s) | **(c)** Amount involved | **(d)** Method of determining amount involved |
|---|---|---|---|
| **(1)** PUBLIC MEDIA DISTRIBUTION LLC | L | 909,758 | COST |
| **(2)** PUBLIC MEDIA DISTRIBUTION LLC | N | 289,137 | COST |
| **(3)** PUBLIC MEDIA DISTRIBUTION LLC | Q | 27,359,916 | COST |
| **(4)** PUBLIC MEDIA DISTRIBUTION LLC | S | 19,976,412 | COST |
| **(5)** NATIONAL DATACAST INC | Q | 185,147 | COST |
| | | | |

**Part VI** **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to 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 section 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 | |
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# Additional Data

Return to Form

**Software ID:**
**Software Version:**
**EIN:** 52-0899215
**Name:** PUBLIC BROADCASTING SERVICE



**Part VII** **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

| Identifier | Return Reference | Explanation |
|---|---|---|
| | SCHEDULE R, PART IV, LINE 3 | IMMEDIA, INC WAS DISSOLVED AS OF JUNE 30, 2013 |

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