KCPWWPM 05/18/2015 9:41 AM

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 private foundations)

Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990. beginning 07/01/13 and ending 06/30/14

2013 Open to Public Inspection

OMB No. 1545-0047

_	LOI III	2013 Calendar year, or tax year beginning 07/01/13, and ending 00/30/	7-4		
В	Check if ap	pticable: C Name of organization	D	Emplo	yer identification number
	Address c	nange WASATCH PUBLIC MEDIA			
П	Name cha	nge Doing Business As)\\/		-0166208
\sqcap	Initial retur	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite E		one number
\vdash		210 EAST 400 SOUTH SUITE 7		801	359-5279
\sqcup	Terminate	City or town, state or province, country, and ZIP or foreign postal code			
	Amended		G	Gross reco	eipts\$ 673,992
	Application	pending F Name and address of principal officer.	H(a) is this a group	return for s	ubordinates? Yes X No
_		LAUREN COLUCCI			H. H.
		210 EAST 400 SOUTH SUITE 7	H(b) Are all subordi		
		SALT LAKE CITY UT 84111	if "No," att	ach a list (see instructions)
1_	Тах-ехел		_		
<u>J</u>	Website:		H(c) Group exempt		
K			Year of formation: 20	07	м State of legal domicile; UT
	Part I	Summary			
	1 E	riefly describe the organization's mission or most significant activities:			
ė		OPERATE KCPW 88.3 FM PUBLIC RADIO STATION ON AIR AND TH	ROUGH INTER	NET	
Activities & Governance		STREAMING.			
err					
ó	2 0	heck this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25%	of its net assets.		
ॐ	3 1	umber of voting members of the governing body (Part VI, line 1a)		3	11
es	4 N	umber of independent voting members of the governing body (Part VI, line 1b)		4	10
Ξ	5 T	otal number of individuals employed in calendar year 2013 (Part V, line 2a)		5	13
Act	6 T	otal number of volunteers (estimate if necessary)		6	0
	7a T	otal unrelated business revenue from Part VIII, column (C), line 12		7a	0
	bΝ	et unrelated business taxable income from Form 990-T, line 34		7b	0
			Prior Year	264	Current Year
ā	8 0	ontributions and grants (Part VIII, line 1h)	675,		673,802
ē	9 1	rogram service revenue (Part VIII, line 2g)		F00	150
Revenue	10 Ir	vestment income (Part VIII, column (A), lines 3, 4, and 7d)		582	0
_	11 C	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	0 0	13
		otal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	675,		673,965
		rants and similar amounts paid (Part IX, column (A), lines 1–3)		0	0
		enefits paid to or for members (Part IX, column (A), line 4)	0.65	0	0
es	15 S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) rofessional fundraising fees (Part IX, column (A), line 11e) otal fundraising expenses (Part IX, column (D), line 25) ▶ 76,114	365,		293,485
Expenses	16a P	rofessional fundraising fees (Part IX, column (A), line 11e)	8,	830	U
Š	b⊤	otal fundraising expenses (Part IX, column (D), line 25) ► 76,114			
ш	1 ~	and expended that is, column (1), into the tra, the 2 loy	632,		527,888
		otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1,006,		821,373
	19 R	evenue less expenses. Subtract line 18 from line 12	-330,		-147,408
Net Assets or Fund Palances	00 T	stal accepts (Dart V. Bare 40)	Beginning of Curren 2,643,		End of Year 2,624,173
Bala	20 ⊤	otal assets (Part X, line 16)	2,799,		2,927,208
let /	21 T	otal liabilities (Part X, line 26) et assets or fund balances. Subtract line 21 from line 20	-155,		-303,035
	22 N art II	Signature Block	-100,	027	-303,033
					44 \6 & & :-
		ilties of perjury, I declare that I have examined this return, including accompanying schedules and statements t, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has		ly knowle	age and belief, it is
_		Na dia Rali		T ==	115/2015
Sig		Signature of officer		Date	13/2015
			ON MANAGE		•
He	re	Type or print name and title	ON MANAGE	<u> </u>	
			Date	1	# PTIN
Paid	_d		Date	Check	└
	parer	PHILIP H. COOPER PHILIP H. COOPER COMPANY I.C.		self-emp	
	Only	Firm's name PHILIP H. COOPER & COMPANY LLC.	Firm's	EIN 🕨	27-3637149
-30	. J.i.y	136 S MAIN ST STE A300			201_422.0140
		Firm's address SALT LAKE CITY, UT 84101-3311	Phon	е по.	801-433-2140
		discuss this return with the preparer shown above? (see instructions)			X Yes No

Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1876

	For calendar year 2013, or fiscal year beginning 7/01 2013, and ending	6/30 20 14	
Department of the Treasury Internal Revenue Service	▶ US hat send to the IDS Vac-s		2013
Name of exampl organization	Information about Form 8878-EO and its Instructions is at www	Lirs.gov/form8879eo.	2013
		Employer ider tific	ation number
Name and life of officer	ASATCH PUBLIC MEDIA	80-01662	
الملاء	AUREN COLUCCI		
Rait Type of F	TATION MANAGER		
	Return and Return Information (Whole Dollars Only)		
ALMAN DIE DAY IOLING (SINA)	TOT Which you are using this Form 8970 EA and output	nt if any from theturn (
		with this form was plank, th	en
the applicable line below. Do	not complete more than 1 line in Part I.	on the return, then enter -0	ino -i
1a Com 990 Check here	In the transfer of the second		
2a Form 990-EZ check here	D Total revenue, if any (Form 900 FZ lies 0)	16	<u>673,965</u>
3a Form 1120-POL check h	b Total revenue, if any (Form 990, Part VIII, column (A), line 12) b Total revenue, if any (Form 990-EZ, line 9) b Total tax (Form 1120-POL, line 22) b Tax based on Investment income (Form 990-PF, Part VI, line b Balance Due (Form 8668, Part I, line 3c or Part II, line 8c)	2b	
4a Form 990-PF chack hard	1 6 7 1 1 1 1 1 1 1 1 1 1		
5a Form 8868 check here	h Balanca Dua /Form sees Dard Life 2 - 12 - 13	:5)4b	
	b lax based on investment income (Form 990-PF, Part VI, line b Balance Due (Form 8868, Part I, line 3c or Part II, tine 8c)	,	
Part III Declaration	n and Signature Authorization of Officer		
Under penalties of perium L	terior that I are a section of Officer		
organization's 2013 electroni	declare that I am an officer of the above organization and that I have examin	ned a copy of the	
are true, correct and comple	c return and accompanying schedules and statements and to the best of my te. I further declare that the account in Port Laboro is the province of the province	knowledge and belief, the	v
organization's electronic return	To I consent to allow any interest of allow any interest of above is the amount shown on	the copy of the	
to send the organization's ret	rn. I consent to allow my intermediate service provider, transmitter, or electrically the IRS and to receive from the IRS and	onic return originator (E:RO	A
the transmission. (b) the reas	um to the IRS and to receive from the IRS (a) an acknowledgement of receive for any delay in processing the roturn or received any delay in processing the received and the received	ipt or reason for rejection or	ŕ
authorize the U.S. Treasury a	nd its designated Einamial Asset to intit of refutio, and (c) the date of any i	refund, if applicable, !	
financial institution account in	dicated in the tax assessment a setting of the factorial funds withdrawal ((direct debit) entry to the	
return, and the financial institu	then to debit the entry to this assessed. To assess the payment of the organization's fed	lersi taxes owed on this:	
Agent at 1-888-353-4537 no l	ater than 2 business days oder to the manager of th	the U.S. Treasury Financia	ıl
involved in the processing of t	he electronic navment of taxes to respin a section (settlement) date. I also auth	iorize the financial instrutio	កន
		y to answer inquiries and	
electronic return and, if applic	able, the organization's consent to electronic funds withdrawal.	ture for the organization's	
Officer's PIN: check one box	r only		
· ·	•		
X I authorize _PHIL	IP H. COOPER to enter my I	COULT TO THE PARTY OF THE PARTY	
	ERO firm name		signature
		Enter five numbers, but do not enter all zeros	•
on the organization's to	ex year 2013 electronically filed return. If I have indicated within this return to		
		nat a copy of the return is	
ERO to enter my PIN of	in the return's disclosure consent screen.	o autnonze the aforementio	ned
_			
As an officer of the org	anization, I will enter my PIN as my signature on the organization's tax year In this return that a copy of the return is being filed with a state organization	2013 electronically 4th-4	.
the IRS Fed/State prog	n this return that a copy of the return is being filed with a state agency(ies) or ray.	equiating charities as rest.	ιμ π. of
	discussion consent screen.	Carrier of the fact of the fact of	, 1
	suren (ducie	May 15 2	015
Part III Certification	l and Authentication	11/ay 10, 20	
ERUS EFINIPIN, Enter your sh	t-digit electronic fiting ide-tillection		
number (EFIN) followed by you	r five-digit self-selected PIN		
	•	[<u>87,09</u>	0684117
			t enter all zeros
I certify that the above numeric	entry is my PIN, which is my signature on the 2013 electronically filed return		
Indicated above. I confirm that I	am submitting this return in accordance with the requirements of Pub. 416: e-file Providers for Business Returner	for the organization	
Information for Authorized IRS	e-file Providers for Business Returns/	3, Modernized e-File (MeF)	!
ERO's signature	Note !	05/15/15	
			
	ERO Must Retain This Form—See Instruction	<u> </u>	
	UO NOT Submit This Form To the IPS Unices Description	d To Do So	
For Paperwork Reduction Act	Notice, see back of form.		0070
		- ⁵ 0fm	8879-EO (2013)

DAA

,	-		

(Expenses \$

4e Total program service expenses ▶

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

including grants of \$

632,193

) (Revenue \$

Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 X complete Schedule A 1 X Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 2 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 X 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 X 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, 5 X 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 X "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space. X 7 the environment, historic land areas, or historic structures? If "Yes." complete Schedule D. Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." Х complete Schedule D, Part III 8 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 counselling, debt management, credit repair, or X debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted X endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X complete Schedule D, Part VI 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more X 11b of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 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 X 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 X X Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI and XII 12a Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if b X the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 X foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) X 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 12 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 X If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a 20a 20b b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Checklist of Required Schedules (continued) Part IV Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 21 X government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States 22 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 X Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated X employees? if "Yes," complete Schedule J 23 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 X through 24d and complete Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction X with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 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? X 25b If "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or Х 26 disqualified persons? If so, complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled X entity or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X 28a а A family member of a current or former officer, director, trustee, or key employee? If "Yes." complete X 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) X was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 conservation contributions? If "Yes," complete Schedule M X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 31 Х Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 X complete Schedule N, Part II 32 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 X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, 34 34 X or IV, and Part V, line 1 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a 35b controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 X related organization? if "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X 37 Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and X 19? Note. All Form 990 filers are required to complete Schedule O .

Pe	Statements Regarding Other IRS Filings and Tax Compliance	V				
	Check if Schedule O contains a response or note to any line in this Part	<u>v</u>	<u></u>		Yes	No
10	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	7		163	140
1a b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	Ö			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	<u></u>				
·	reportable gaming (gambling) winnings to prize winners?			1c	X	2010000000000
2a						
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	13			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	s?	· · · · · · · · · · · · · · · · · · ·	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	. . . 		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule C)		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other au	ithority				
	over, a financial account in a foreign country (such as a bank account, securities account, or other fina	ancial				
	account)?			4a		X
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	┷	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	on?		5b	↓	X
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	+-	X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	s or		İ		
	gifts were not tax deductible?			6b	<u> </u>	\$ 1
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go	ods			4	
	and services provided to the payor?			<u>7a</u>		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			<u>7b</u>	+-	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	;		_		•
	required to file Form 8282?		ĭ	7c		X
đ		7d	<u> </u>	70		X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit con			7e	+	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contractly the organization received a contribution of qualified intellectual property, did the organization file Form		required?	7g	+	X
g	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization				$\overline{}$	X
h 8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	on me a r	01111 1030-0	710		
•	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	***************************************	X
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?			9a	1	X
b	Did the organization make a distribution to a donor, donor advisor, or related person?				1	Х
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					
11	Section 501(c)(12) organizations. Enter:					
а	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?	4	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.					
а				13a	201001000000	1,000000000
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which	F I	ı			
	the organization is licensed to issue qualified health plans		-			
С	Enter the amount of reserves on hand	13c	<u></u>		*****	1 T 7
14a					+-	X
h	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule (7)		14h	. 1	1

X

Form 990 (2013) WASATCH PUBLIC MEDIA

Part VI

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

Sec	tion A. Governing Body and Management					
		,		2000000000	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	11	_		
	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	10	_		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct					1
	supervision of officers, directors, or trustees, or key employees to a management company or other person?					X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?	.	, . .	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, or persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by	the follo	owing:			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Interr	al Re	venue Co	de.)		
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
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	X	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	conflicts	?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
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?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	Х	
	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		X
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		***************************************
Sec	tion C. Disclosure			- 1		
17	List the states with which a copy of this Form 990 is required to be filed ▶ UT				•	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)	(3)s ont	y)	· • · · · · · · · · ·		
	available for public inspection. Indicate how you made these available. Check all that apply.		• •			
	X Own website					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest p	olicy an	ıd			
	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; ► ORGANIZATION 210 E 400 S SUITE 7	,				
SA	LT LAKE CITY UT 8411		80	1-363	3-10	040

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any	bo	x, unk ficer a	Pos check ess pe	erson i	than or is both or/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) EDWIN WALL										•
	5.00									
BOARD MEMBER	0.00	X						0	0	0
(2) TIM CHAMBLESS										
BOARD MEMBER	5.00 0.00	х						О	o	0
(3) JOHN MILES										
BOARD MEMBER	5.00 0.00	x						o	0	0
(4) STEVE PETERSEN	,									
	5.00				ļ					•
BOARD MEMBER	0.00	X						0	0	0
(5) MARK WAGNER										
BOARD MEMBER	5.00 0.00	x						o	0	0
(6) MASON WOOLF										
	5.00									
BOARD MEMBER	0.00	X						0	0	0
(7) JEN MILNER										
	5.00							_	_	
CHAIRPERSON	0.00	X						0	0	0
(8) AARON GUSS	5 00									
VICE-CHAIRPERSON	5.00 0.00	Х						0	o	0
(9) PAUL BRUNO										
. ,	5.00						ŀ			
BOARD MEMBER	0.00	Х						0	0	0
(10) GWEN DOBSON	5.00									
BOARD MEMBER	0.00	х		İ				o	o	0
(11) ED SWEENEY		**	-				_			
. ,	40.00									
PRESIDENT & CEO	0.00			X				47,917	0	7,490
DAA										Form 990 (2013)

Pa	rt VII Section A. Officers	, Directors, Trus	stee	s, Ke	y Er	nplo	yees	s, an	d Highest Compensated I	Employees (continued)	
	(A) Name and title	(B) Average hours per week (list any hours for	b	ox, uni	Pos check less po	erson directo	than o	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(**2 1000-111000)	organization and related organizations
(12)	- 4,1										
(13)											
(14)											
(15)											
(16)											
(17)		•									
(18)											
(19)											
1b c	Sub-total							>	47,917		7,490
d 	Total (add lines 1b and 1c) Total number of individuals (increportable compensation from the compensation fro	luding but not lim	ited					► (e) w	47,917 tho received more than \$100),000 in	7,490
3	Did the organization list any for employee on line 1a? If "Yes," of For any individual listed on line										Yes No
4 5	organization and related organization and related organization and related organization individual	zations greater tha	an \$′	150,0	000?	If "Y	es," (comp	olete Schedule J for such		•••
Secti	for services rendered to the orgion B. Independent Contractor	anization? If "Yes rs	s," co	mple	ete S	ched	lule J	for s	such person		5 X
1	Complete this table for your five compensation from the organization	ation. Report com							ear ending with or within the	e organization's tax year.	(0)
	Name and	(A) business address							Descript	(B) ion of services	(C) Compensation
			•			· · · · · · · · · · · · · · · · · · ·					
							:				
2	Total number of independent or received more than \$100,000 or	entractors (includi f compensation fr	ng b om t	ut no	t limi gani:	ited t zatio	o tho	se li:	sted above) who	0	000

Ha	πV	Check if Schedule	nue Dicon	tains a r	esponse o	or note to any line i	n this Part VIII	***************************************	
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
S	1a	Federated campaigns	1a						
ran	b	Membership dues	1b						
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events	1c						
Sifts ar A	d	Related organizations	1d						
s, C	e	Government grants (contributions)	1e		123,732				
tion sr S	f	All other contributions, gifts, grants,							
ibu		and similar amounts not included above			550,070				
ontr od C	g	Noncesh contributions included in lines 1a-				6E0 000			
	h	Total. Add lines 1a-1f		· · · · · · · · · · · · · · · · · · ·		673,802			
Program Service Revenue		ACCOUNT AND ALL DELETING			Busn. Code	150			150
eve	2a b	MISCELLANEOUS REVEN						-	
ce F	C	• • • • • • • • • • • • • • • • • • • •							
ervi	d				· · · · · ·				
S E	P								
gra	f	All other program service reven							
Pro		Total. Add lines 2a-2f			▶	150			
	3	Investment income (including di							
		and other similar amounts)			.				
	4	Income from investment of tax-	exempt	bond prod	eeds 🕨				
	5	Royalties	<u></u>		<u></u>				
		(i) Real		(ii) P	ersonal				
	6a	Gross rents							
	b	Less: rental exps.			_				
	C	Rental inc. or (loss)							
	d 7a	Net rental income or (loss)		1					
		sales of assets (i) Securities		(ii)	Other				
	_	other than inventory		<u></u>					
	Ð	Less: cost or other							
		basis & sales exps. Gain or (loss)							
		Net gain or (loss)	_	l	—				
		Gross income from fundraising ever	г	· · · · · · · · · · · · · · · · · · ·					
Jue		(not including \$							
vel		of contributions reported on line 1c)							
r R		See Part IV, line 18							
Other Revenue	b	Less: direct expenses							
0		Net income or (loss) from fundr		events	<u>F</u>				
	9a	Gross income from gaming activities							
		See Part IV, line 19							
		Less: direct expenses							
	ĺ	Net income or (loss) from gamin	ng activ	rities					
	10a	Gross sales of inventory, less			40				
		returns and allowances	a						
	•	Less: cost of goods sold Net income or (loss) from sales	of inve	entory.		13			13
	C	Miscellaneous Revenue	or inve	ntory	Busn, Code	13			==
	11a								
	b						-		
	C								
	d	All other revenue							
	e	T 4 1 4 14 Page 44 - 44 -							
	12	Total revenue. See instruction				673,965	0	0	163

Form 990 (2013) WASATCH PUBLIC MEDIA
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)	١.
---	-----	----

2000	on 501(c)(3) and 501(c)(4) organizations must cor Check if Schedule O contains a response	nse or note to any line in this	Part IX		
Do n	ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b, 8	b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	47 017	47 017		
_	trustees, and key employees	47,917	47,917		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
-	persons described in section 4958(c)(3)(B)	198,935	198,935		
7	Other salaries and wages	130,333	130,333		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	27,967	27,732	235	
		18,666	18,666		**
10 11	Payroll taxes Fees for services (non-employees):				
a	Management				
b		474		474	
c	Legal Accounting	14,753	<u>.</u>	14,753	
ď	Lobbying		i - 		
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other, (If line 11g amount exceeds 10% of line 25, column				
Ū	(A) amount, list line 11g expenses on Schedule O.)	40,946	24,275	7,605	9,066
12	Advertising and promotion				
13	Office expenses	32,446	950	24,113	7,383
14	Information technology				
15	Royalties		<u></u>		
16	Occupancy	68,724	58,633	2,805	7,286
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	142,444	128,200	14,244	
21	Payments to affiliates	21 262		01 003	
22	Depreciation, depletion, and amortization	21,263	·	21,263	
23	Insurance	7,693		7,693	
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.)	126 207	126 207		
a	PROGRAMMING	126,207 36,583	126,207 172	6,338	30,073
b	OTHER COSTS - OFFICE	13,897	1/2	1,000	
C	BAD DEBTS	11,249	256	2,394	
d	WEBSITE AND INTERNET	11,249	250	10,149	
9E	All other expenses	821,373	632,193	113,066	
25 26	Total functional expenses. Add lines 1 through 24e	021,010	552,155	220,000	1 - 1 - 1 - 1
23	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)				
DAA	1080 Hing 001 00 2 (100 000 120)				Form 990 (2013)

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 53,772 15,668 Cash—non-interest bearing 1,194 1,198 2 Savings and temporary cash investments 10,462 10,549 Pledges and grants receivable, net 3 38,382 68,828 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Complete Part II of Schedule L 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 6 organizations (see instructions). Complete Part II of Schedule L Notes and loans receivable, net 2,689 2,663 8 Inventories for sale or use 1,543 7,207 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or 218,116 10a other basis. Complete Part VI of Schedule D 110,239 88,974 129,142 10c b Less: accumulated depreciation 10b 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 2,427,183 2,427,183 14 14 Intangible assets Other assets. See Part IV, line 11 15 2,643,561 2,624,173 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 604,027 472,571 17 Accounts payable and accrued expenses ______ 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 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 2,326,617 2,323,181 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 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 2,799,188 2,927,208 Total liabilities. Add lines 17 through 25 ... Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances -303,035 -155,627 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 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 -155,627 -303,035 33 Total net assets or fund balances 33 2,624,173 2,643,561 Total liabilities and net assets/fund balances

Form **990** (2013)

Schedule O.

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

the Single Audit Act and OMB Circular A-133?

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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...

Form **990** (2013)

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X

SCHEDULE A

(Form 990 or 990-EZ)

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.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

WASATCH PUBLIC MEDIA

Employer identification number 80-0166208

	88888888		5 11 61 11	04 4 (81)				-1.\ 0			_			_
	art I			Status (All organizations			tnis pa	п.) Se	e instr	uctions	S.			
The	orgar		-	it is: (For lines 1 through 11, che										
1		A church, co	nvention of churches, or asso	ociation of churches described in	section 1	70(b)(1)(/	۹)(i).							
2		A school des	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
3		A hospital or	a cooperative hospital service	e organization described in sectic	n 170(b)(1)(A)(iii).								
4		A medical res	search organization operated	in conjunction with a hospital des	cribed in s	section 1	70(b)(1)((A)(iii). E	Enter the	e hospita	al's nan	ne,		
		city, and state	e:											
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in													
		-	b)(1)(A)(iv). (Complete Part	=	-									
6				vernmental unit described in sect	ion 170 <i>(</i> b)(1)(A)(v)	L							
7	\vdash			ubstantial part of its support from	•			the gene	eral nub	lic				
•	ш	~	section 170(b)(1)(A)(vi). (C		u gerenni	ionical ann		u. u. g						
۰				70(b)(1)(A)(vi). (Complete Part II	`									
8	X	-		more than 33 1/3% of its support	· ·	tributiono	mamba	robin for	c and	arocc.				
9	Δ	_												
		-		ot functions—subject to certain ex						S				
			=	d unrelated business taxable inco			i tax) iio	iii busiii	esses					
				, 1975. See section 509(a)(2). (0										
10		=		xclusively to test for public safety.										
11	Ш	_	•	xclusively for the benefit of, to per			•	•						
		-		d organizations described in sect						ion				
		509(a)(3). Ch	_	ne type of supporting organization			11e thro	_						
		a Type		c Type III–Functions			ď				onally i	ntegrated		
е		By checking t	his box, I certify that the orga	inization is not controlled directly of	or indirecti	y by one o	or more o	lisqualifi	ed pers	ons				
		other than fou	indation managers and other	than one or more publicly suppor	ted organi	zations de	escribed	in sectio	n 509(a	1)(1)				
		or section 509	9(a)(2).											
f		If the organiza	ation received a written deter	mination from the IRS that it is a I	Гуре I, Тур	e II, or Ty	rpe III su	pporting						
		organization,	check this box							, ,			[
g		Since August	17, 2006, has the organizati	on accepted any gift or contribution	on from an	y of the								
		following per	sons?											
		(i) A persor	who directly or indirectly con	ntrols, either alone or together with	n persons	described	l in (ii) ar	nd				Υ	es I	No
				supported organization?								11g(i)		
		• /	member of a person describ	• • • • • • • • • • • • • • • • • • • •								11g(ii)		
			ontrolled entity of a person d	,								11g(iii)		_
h		• •	ollowing information about the	******										
<u>''</u>	l Name	of supported	(ii) EIN	(iii) Type of organization	(iv) is the o	rganization	(v) Did v	ou notify	(vi)	s the	(vii)	Amount of m	onetarv	_
ν,		anization	(1) 2.11	(described on lines 1–9	1 ' '	sted in your	the organ	nization in	organizat	ion in col.	(*,	support	0.100.17	
				above or IRC section	governing	document?		of your port?		zed in the S.?				
				(see instructions))	Yes	No	Yes	No	Yes	No				
(4)		-			, 43									
(A)														
ъ,					+		··							—
B)										1				
				-	+									—
C)														
	_						<u> </u>							
D)					1									
					1									
E)					1									

roto					1888888		.		I					

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

Schedule A (Form 990 or 990-EZ) 2013

Part II Support Sched

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.)

Sec	ction A. Public Support				•	· · · · · · · · · · · · · · · · · · ·	·
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
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.						
Sec	tion B. Total Support						•
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						<u>.</u>
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s	ee instructions)				12	
13	First five years. If the Form 990 is for the o	organization's first, s	second, third, fourth	ı, or fifth tax year as	s a section 501(c)(3	3)	
	organization, check this box and stop here				<u> </u>		
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2013 (line 6, o	oolumn (f) divided b	y line 11, column (f))		14	%
15	Public support percentage from 2012 Scheo	lule A, Part II, line 1	4			15	%
16a	33 1/3% support test—2013. If the organize	ation 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 qualifie		·				▶ _
b	33 1/3% support test—2012. If the organize				33 1/3% or more,		
	check this box and stop here. The organiza						▶
17a	10%-facts-and-circumstances test—2013						
	10% or more, and if the organization meets t				•		
b	Part IV how the organization meets the "facts organization 10%-facts-and-circumstances test—2012 15 is 10% or more, and if the organization m	. If the organization	did not check a bo	x on line 13, 16a, 1	6b, or 17a, and line		▶ □
	Explain in Part IV how the organization meet			· ·	•		
18							> 🗆
				•			▶ □
	instructions						· · · · · · · · · · · · · · · · · · ·

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.)

Sec	tion A. Public Support						
Caler	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	939,242	1,212,369	1,281,379	675,264	673,802	4,782,056
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	939,242	1,212,369	1,281,379	675,264	673,802	4,782,056
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						
8 6	Add lines 7a and 7b Public support (Subtract line 7c from						4,782,056
800	line 6.) tion B. Total Support						4,702,000
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
Çalel 9	Amounts from line 6		1,212,369	1,281,379	675,264	673,802	4,782,056
9 10a	Gross income from interest, dividends,	333,242	2/212/3	2/202/			
	payments received on securities loans, rents, royalties and income from similar sources	1,045	653	215	582	·	2,495
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	1,045	653	215	582	-	2,495
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.)	1,243	1,468	1,510		163	4,384
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	941,530	1,214,490	1,283,104	675,846		4,788,935
14	First five years. If the Form 990 is for the organization, check this box and stop here	organization's first, se	<u> </u>			3))
Sec	tion C. Computation of Public S						
15	Public support percentage for 2013 (line 8						99.86%
<u> 16</u>	Public support percentage from 2012 Scho			<u></u>	<u></u>	16	99.79%
Sec	tion D. Computation of Investme			(0)		47	%
17	Investment income percentage for 2013 (li					1	
18	Investment income percentage from 2012	Schedule A, Part III, li	ne 1/	and line 15 is mor	o than 22 1/20/		70
19a	33 1/3% support tests—2013. If the orga	nization did not check	une pox on line 14	, and line to is mor ifice as a publicly of	e ulali oo 1/0%, an unnartad araanizati	on on	▶ [X
	17 is not more than 33 1/3%, check this bo 33 1/3% support tests—2012. If the orga	x and stop nere. The	s organization qual sa boy on line 14 o	r line 19a and line :	16 is more than 33	1/3%, and	🖭
b	line 18 is not more than 33 1/3%, check th	is boy and stop here	The organization	aualifies as a public	ly supported organ	ization	▶ [
20	Private foundation. If the organization did	d not check a boy on li	ine 14, 19a or 19h	check this box and	d see instructions		
20	Fireate foundation. If the organization the	A HOL OLIGON & DOX OIT II	,	,			

Schedule A	(Form 9	90 or 990-E	EZ) 2013	WASA!	TCH PU	BLIC	MEDIA			80-0166208	Page 4
Part IV	Su	pplemer	ntal Info	mation.	Provide t	he expl	anations re	equired by Par Il information.	t II, line 10; F (See instruct	art II, line 17a or 1	17b; and
PART					R INCO			****************			
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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.

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

OMB No. 1545-0047 Inspection

Name of the organization Employer identification number WASATCH PUBLIC MEDIA 80-0166208 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 Total number at end of year Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year 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? 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? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV. line 7. 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 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 Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 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)? 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 Assets included in Form 990, Part X

200210	art III Organizations Maintaining			cai Treasu	ires. (Similar		: (contin	ued)	Page
3								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o (oonan	<u>ucu,</u>	
а	Public exhibition	d 🗌	Loan or exchar	nge programs							
b	Scholarly research	e 🗍	Other								
С	Preservation for future generations	_									
4	Provide a description of the organization's colle	ctions and explain h	ow they further	the organization	on's ex	empt purpo	se in Part				
	XIII.										
5	During the year, did the organization solicit or re								_	_	_
30000000	assets to be sold to raise funds rather than to b	e maintained as par	t of the organiza	tion's collection	on?	· · · · · · · · · · · · · · · · · · ·		<u></u>	<u></u>	Yes	No
	Escrow and Custodial Arra Complete if the organization 990, Part X, line 21.		" to Form 99	0, Part IV, I	line 9	, or repo	rted an a	mount	on Form	1	
1a	Is the organization an agent, trustee, custodian	or other intermediar	v for contributio	ns or other as	sets no	t					
			-							res [No
b	If "Yes," explain the arrangement in Part XIII and							• • • • • • • •	Ш	_	
								·	Amou	nt	
	Beginning balance						<u> </u>	lc			
d	Additions during the year							ld			
е	Distributions during the year	* / * 4 * * * * * * * * * * * * * * * *						le			
f	Ending balance		• • • • • • • • • • • • • • • • • • • •					lf			
2a	Did the organization include an amount on Form	n 990, Part X, line 21	l?						D \	es	No
	If "Yes," explain the arrangement in Part XIII. Ch	neck here if the expla	anation has bee	n provided in I	Part XII	I	<u></u> ,,,,,,,,			[<u> </u>
Pa	ert V Endowment Funds.										
	Complete if the organization	answered "Yes"	to Form 990), Part IV, I	ine 10)					
		(a) Current year	(b) Prior y	еат (с) Two yea	ars back	(d) Three	years back	(e) F	ur years	back
1a											
b	Contributions										
	Net investment earnings, gains, and losses			•				-			
d	Grants or scholarships	-			•——				<u> </u>		
	Other expenditures for facilities and		701								
_	programs					i					
f	Administrative expenses										
΄.	End of year balance										
2	Provide the estimated percentage of the current	vear and halance /li	no 1a ookuma (all bold on:							
	Board designated or quasi-endowment	year end balance (ii	ne ig, column (a)) Neiu as.							
	Permanent endowment > %										
	Temporarily restricted endowment ▶	%									
٠	The percentages in lines 2a, 2b, and 2c should a										
3a	Are there endowment funds not in the possession	•	n that are held a	nd administor	od for t	bo					
vu	organization by:	or or the organization	i ulat ale nelu a	na aanninster	ea ior i	iie					N.
	/ii) uprolated organizations								2-63	Yes	No
	(ii) related ergenizations	••••••							3a(i)	├	
h	If "Yes" to 3a(ii), are the related organizations list	ted as required an S	chodulo P2		· - · - · •			• • • • • • • • •	3a(ii)	<u> </u>	
4	Describe in Part XIII the intended uses of the org	rea as required on S	sont fundo			• • • • • • • • • • • • • • • • • • • •		· · · · · · · · ·	3b	1	
Þя	# VI Land, Buildings, and Equip		ient iunos.								
	Complete if the organization a		to Form aan	Part IV lie	ne 11	a See 5	orm aan	Dart V	(line 10	1	
	Description of property	(a) Cost or other ba		Cost or other basi			Coumulated	, rail/	, IIII E IU (d) Bool		
	manufaction of galaxies	(investment)	(5)	(other)	~	• •	preciation		(0) 5001	value	
12	Land			\·/	8	201					
h	Land Ruildings										
	Buildings Leasehold improvements			Ω	975		8,9	75			
				209,			120,1			20	07/
	Equipment Other			۷۵, ۱	T - # T		120,1	3/	•••	88,	9/4
	. Add lines 1a through 1e. (Column (d) must equa	I al Form 990 Part Y	column (B) line	10(c) \	E			•		88,	07/
-cui		oum 350, Falt A,	SOLUTION (D), IIII	· · · (·)-)	- · - · · · ·	<u> </u>				50,	<i>914</i>

Schedule D (Form 990) 2013

Part VII	Investments—Other Securities.			
	Complete if the organization answered "Yes" to	Form 990, Part IV, I	ne 11b. See Form 990, Part X, line 12	2
	(a) Description of security or category	(b) Book value	(c) Method of valuation:	
	(including name of security)		Cost or end-of-year market value	
(1) Financial d	lerivatives			
(2) Closely-he	ld equity interests			
(3) Other				
(A)	***************************************			
(B)				
(C)	••••••		· · · · · · · · · · · · · · · · · · ·	
(D)				
(E)	***************************************			
(F)				
(G)				-
(H)	,			**
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 12.) ▶	**		
Part VIII	Investments—Program Related.	· · · · · · · · · · · · · · · · · · ·		
	Complete if the organization answered "Yes" to I	Form 990, Part IV, Ii	ne 11c. See Form 990, Part X, line 13	.
	(a) Description of investment	(b) Book value	(c) Method of valuation:	
			Cost or end-of-year market value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)		 	,	
(9)	<u> </u>			
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶	-		
Part IX	Other Assets.			
	Complete if the organization answered "Yes" to F	orm 990 Part IV lis	ne 11d See Form 900 Part V line 15	
	(a) Description	Omi 330, i aitiv, iii	(b) Book	
(1)	(a) assembles	<u>.</u>	(b) Book	value
(2)	-			
(3)		<u> </u>		
(4)				
	74.			 -
(5) (6)		<u> </u>		
(6)				
(7)				
(8)	· · · · · · · · · · · · · · · · · · ·			
(9)	(1)			
	(b) must equal Form 990, Part X, col. (B) line 15.)		<u>,</u>	
Part X	Other Liabilities.		44 445	
	Complete if the organization answered "Yes" to F	orm 990, Part IV, lir	ie 11e or 11f. See Form 990, Part X,	
	line 25.	T		
1.	(a) Description of liability	(b) Book value	_	
	come taxes			
(2)				
(3)	<u>, </u>			
(4)			_	
(5)				
(6)				
(7)				
(8)				
(9)				
otal. (Column ((b) must equal Form 990, Part X, col. (B) line 25.) ▶			
Liability for un	ncertain tax positions. In Part XIII, provide the text of the footnote	to the organization's fina	ncial 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

Schedule D (Form 990) 2013 WASATCH PUBLIC M		0-0166208 Page 4
Part XI Reconciliation of Revenue per Audited	d Financial Statements With Reve	nue per Return.
Complete if the organization answered "	Yes" to Form 990, Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial st	atements	1 673,965
2 Amounts included on line 1 but not on Form 990, Part VIII, line	: 12:	
a Net unrealized gains on investments	2a	
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3 673,965
4 Amounts included on Form 990, Part VIII, line 12, but not on lin	ne 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	2	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990,	Part (, line 12.)	5 673,965
Part XII Reconciliation of Expenses per Audite	a Financial Statements With Expe	enses per Return.
Complete if the organization answered "\		001 000
Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990. Part IX line 2.	·····	1 821,373
	2a	
- Official		
		
	***************************************	3 821,373
 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 	4.	3 021,373
a Investment expenses not included on Form 990, Part VIII, line 7		
b Other (Describe in Part XIII.)	4b	
e Add lines 4s and 4h		4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990). Part I. line 18.)	5 821,373
Part XIII Supplemental Information		021,010
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	ines 1a and 4; Part IV, lines 1b and 2b; Part \	/, line 4; Part X, line
2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complet		
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Page 5	80-0166208		PUBLIC MEDIA	WASATCH	rm 990) 2013	Schedule D (Fo
		·	n (continued)	ental Informatio	Suppleme	Part XIII
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047
2013

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

WASATCH PUBLIC MEDIA

ALL OF US MIGHT GROW AND IMPROVE PUBLIC DISCLOSURE.

FORM 990 - ORGANIZATION'S MISSION

Employer identification number 80-0166208

KCPW PROVIDES IN-DEPTH LOCAL, NATIONAL AND INTERNATIONAL NEWS TO CREATE INFORMED AND ENGAGED CITIZENS. BY PRESENTING NEWS, LECTURES, LOCAL EVENTS AND SPECIAL BROADCASTS RELATED TO POLITICS, THE ENVIRONMENT, EDUCATION AND BUSINESS, WE KEEP OUR AUDIENCE CONNECTED AND INVOLVED. STRATEGIC PARTNERSHIPS WITH LOCAL BUSINESSES AND ORGANIZATIONS HELP US FOSTER AND STRENGTHEN THE COMMUNITY. WE ACT AS A LIFELONG LEARNING RESOURCE SO THAT

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE BOARD RECEIVES AN E-MAIL DRAFT OF THE FORM 990 AND HAS THE OPPORTUNITY
TO ASK CLARIFYING QUESTIONS. THE BOARD VOTES TO APPROVE FORM 990 BEFORE THE
RETURN IS FILED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

MANAGEMENT AND BOARD MEMBERS DISCLOSE ANY CONFLICTS AND SIGNS A CONFLICT OF

INTEREST FORM ANNUALLY.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE BOARD OF DIRECTORS REVIEWS AND APPROVES THE COMPENSATION PACKAGE FOR

THE PRESIDENT AND CEO OF KCPW. THE COMPENSATION PACKAGE IS BASED UPON A

NUMBER OF FACTORS INCLUDING NON-PROFIT MANAGEMENT EXPERIENCE, MAJOR GIFT

AND CAPITAL CAMPAIGN EXPERIENCE, KNOWLEDGE OF THE UTAH PHILANTHROPIC

COMMUNITY AND EXPERIENCE WITH THE FINANCING AND ACQUISITION OF A BUSINESS

LIKE KCPW.

Schedule O (Form 990 or 990-EZ) (2013) Name of the organization	Page Employer identification number
WASATCH PUBLIC MEDIA	80-0166208
•	
FORM 990, PART VI, LINE 15B - COMPENSATION PR	OCESS FOR OFFICERS
THE COMPENSATION OF OTHER KEY EMPLOYEES OF KC	PW WAS BASED UPON
WHAT THE PREVIOUS OWNER OF THE STATION WAS PA	YING THEM AT THE TIME THE
STATION WAS ACQUIRED.	
FORM 990, PART VI, LINE 19 - GOVERNING DOCUME	NTS DISCLOSURE EXPLANATION
ALL ITEMS ARE AVAILABLE BY REQUEST AT THEIR OF	FFICES AND SOME ARE AVAILABLE
ON THE WEBSITE.	
	•••••
	·····
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Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service

(99)

► See separate instructions.

Attach to your tax return.

Attachment Sequence No.

Nam	e(s) shown on return WASAT	CH PUBLIC ME	DIA			Identifyii	_	mber 56208
Busir	less or activity to which this form relates			· · · · · · · · · · · · · · · · · · ·		1 00 1	<u> </u>	10200
	NDIRECT DEPRECIA	TION						
	WWW.000.000	ense Certain Prop	erty Under Se	ction 179	· .			
*9000000		any listed property			omnlete Part	1		
1	Maximum amount (see instruction	no\		·			1	500,000
2	Total cost of section 179 propert		nstructions)			·····	2	300,000
3	Threshold cost of section 179 pr	operty before reduction in	limitation (see ins	tructions)	• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·	3	2,000,000
4	Reduction in limitation, Subtract	line 3 from line 2. If zero	or less enter -0-			j.	4	2,000,000
5	Dollar limitation for tax year. Subtract			ried filing senarately s	eo înstrucțions	·····	5	
6		otion of property	1000, 011101	(b) Cost (business use	- 1) Elected cost	-	
				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(4	<u>,</u>	-	-
		-	-			·		
7	Listed property. Enter the amoun	t from line 29			7			
8	Total elected cost of section 179	property. Add amounts in	column (c) lines	6 and 7			8	
9	Tentative deduction. Enter the sn	naller of line 5 or line 8					9	
10	Carryover of disallowed deduction		2 Form 4562				10	
11	Business income limitation. Enter	r the smaller of business	income (not less th	nan zero) or line 5 (s	ee instructions)	·····	11	-
12	Section 179 expense deduction.	Add lines 9 and 10, but d	o not enter more th	nan line 11	ce mondonono,	·····	12	-
13	Carryover of disallowed deduction	n to 2014. Add lines 9 and	d 10 less line 12		13	· · · · · · · ·	14	
	: Do not use Part II or Part III below	w for listed property. Inste	ead, use Part V.					
		tion Allowance an		eciation (Do no	t include liste	d property	1/5	See instructions)
14	Special depreciation allowance fo					d property	./ />	oce man actions.)
	during the tax year (see instruction						14	
15	Property subject to section 168(f)		• • • • • • • • • • • • • • • • • • • •			·····	15	
16	Other depreciation (including ACI	RS)					16	<u></u>
62000000	irt III MACRS Deprecia	ation (Do not includ	le listed proper	ty) (See instruc	tions)	<u> </u>	10	
200000			Section Sectio		,uorio.,			
17	MACRS deductions for assets pla	aced in service in tax vea					17	21,263
18	If you are electing to group any assets place					(T) (W)		21,200
		-Assets Placed in Serv					em	
	(a) Classification of property	(b) Month and year placed in	(c) Basis for depreci	ation (d) Recovery	(e) Convention	(f) Method		(g) Depreciation deduction
19a	3-year property	service	only-see instruction	ns) police				<u> </u>
<u> </u>	5-year property	-	_			-	_	
	7-year property	⊣ ⊢	.				\dashv	
d	10-year property	⊣ ⊦						
	15-year property	┧ ├				***	-	··
	20-year property	⊣ ⊦						·
	25-year property	Ⅎ		2E 180		- C/I	_	-
	Residential rental			25 yrs.	D 40 4	S/L	\dashv	
.,	property		<u></u>	27.5 yrs.	MM	S/L		
	Nonresidential real			27.5 yrs.	MM MM	S/L	-	-
•	property			39 yrs.		S/L		· · · · · · · · · · · · · · · · · · ·
	<u> </u>	Assets Placed in Service	e During 2013 Ta	v Voor Using the A	MM Starnative Done	S/L	4	
202	Class life	Assets Flaceu III Sel Vic	E During 2015 1a	IX rear Using the A	liternative Depr	-	tem	
		⊢ -		40		S/L_	-	
	12-year			12 yrs.		S/L	\dashv	
**********	40-year rt IV: Summary (See ins	etructions \		40 yrs.	MM	S/L	[
								
21	Listed property. Enter amount from		. 40 and 00	(_) 12 _ 01			21	
22	Total. Add amounts from line 12,				Enter here			01 000
22	and on the appropriate lines of you					<u> 1 </u>	22	21,263
23	For assets shown above and place portion of the basis attributable to:		urrent year, enter ti	ie	23			

Form 4562

Name(s) shown on return

Depreciation and Amortization

(Including Information on Listed Property)

ed Property)

2013

Attachment

Internal Revenue Service

(99)

► See separate instructions.

Attach to your tax return.

Identifying number

WASATCH PUBLIC MEDIA 80-0166208 Business or activity to which this form relates PartI **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) 1 500,000 1 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 5 (b) Cost (business use only) Listed property. Enter the amount from line 29 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 9 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2013 21,386 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (q) Depreciation deduction period only-see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property e 15-year property 20-year property 25-year property 25 yrs. S/L h Residential rental 27.5 yrs. MM S/L property 27.5 yrs. MM S/L Nonresidential real MM 39 yrs. S/I property MM Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12-year 12 yrs. S/L 40-year S/L 40 yrs. MM Part IV Summary (See instructions.) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 22 and on the appropriate lines of your return. Partnerships and S corporations—see instructions 21,386

For assets shown above and placed in service during the current year, enter the

23

KCPWWPM WASATCH PUBLIC MEDIA
80-0166208 Federal Asset Report Form 990, Page 1

05/18/2015 9:41 AM

FYE: 6/30/2014

Asset	Description	Date I <u>n Service</u>	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
2	MACRS: OFFICE SPACE BUILDOUT MICROSOFT OFFICE, SQL AND WINDO LOUNGE FURNITURE	6/10/09 8/31/10 9/09/09	8,975 16,303 12,776 38,054		X X	8,975 8,151 6,388 23,514	39 MM S/L 5 HY 200DB 7 HY 200DB	7,330 15,624 10,221 33,175	1,645 679 2,555 4,879
	Grand Totals Less: Dispositions and Transfe Less: Start-up/Org Expense Net Grand Totals	ers 	38,054 0 0 38,054		-	23,514 0 0 23,514		33,175 0 0 33,175	4,879 0 0 0 4,879

KCPWWPM WASATCH PUBLIC MEDIA 80-0166208 FYE: 6/30/2014	Federal Statements	tements		5/18/2015 9:41 AM
Form 990, F	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)	ees for Service (Non-	employee)	
Description CONTRACT SERVICES TOTAL	Total Expenses \$ 40,946	Program Service \$ 24,275	Management & General \$ 7,605	Fund Raising \$ 9,066
山 山	Form 990, Part IX, Line 24e	IX, Line 24e - All Other Expenses		
Description BANK CHARGES	Total Expenses	Program Service	Management & General	Fund Raising
EQUIP KENTAL & MAINT PROFESSIONAL MEMBERSHIP BUSINESS REGISTRATION	4,231 610 210	250	3,981	610
TOTAL	\$ 11,209	\$ 250	\$ 10,149	\$ 810