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# Form 990

# **Return of Organization Exempt From Income Tax**

901

2009

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Inte	rnal Rev	enue Service		he organization may have to use a copy of	this return to satis	sty state rep	orting requ	uirements	Inspection
A	For t	he 2009 c	alendar	year, or tax year beginning July		nd ending		ne 30	, 20 10
В	Check if	f applicable	Please	C Name of organization Friends of Wiscor	sin Public Tele	vision, Inc		D Employe	er identification number
	Addres	s change	use IRS label or	Doing Business As				23	7300462
		change	print or type.	Number and street (or PO box if mail is not delivered	to street address)	Room/suite		E Telephor	ne number
	Initial r		See	821 University Ave.		10	76	( 608 )	262-5260
	Termin		Specific Instruc-	City or town, state or country, and ZIP + 4					
		led return	tions.	Madison, WI 53706				G Gross rec	eipts \$ 7785563.
_		tion pending	F Nan	e and address of principal officer Jon Miske	owski		H(a) Is thus	a group return f	for affiliates? Yes No
			Same	as C above					cluded? Yes No
ī	Tax-ex	xempt status	5. <b>[</b> ] 5	01(c) ( 3 )◀ (insert no.) ☐ 4947(a)(1) or [	527		l .		ist (see instructions)
J	Webs	site: > wv	vw.wpt	org			H(c) Group e	exemption numb	ber ▶
K	Form o	f organization	✓ Corpo	ration ☐ Trust ☐ Association ☐ Other ►	L Year	of formation.	1969	M State of I	legal domicile WI
E P	art I	Summ	ary						
77	1	Briefly de	escribe	the organization's mission or most sign	nificant activities	. To supp	ort educ	ational, cu	ıltural and
<b>ဂ</b> ့		commu	nity bro	adcasting services of Wisconsin Pub	lic Television.				
٦ğ	1								
₹Ë				,					
MAK L Governance	2	Check this	box ► [	If the organization discontinued its operations	or disposed of more	than 25% of	its net asse	ets.	
	3	Number	of votin	g members of the governing body (Par	t VI, line 1a)			. 3	15.
Oz S	4	Number	of indep	pendent voting members of the govern	ing body (Part Vi	1, line 1b)		. 4	15.
鬓	5	Total nur	nber of	employees (Part V, line 2a)				. 5	11.
<b>2</b> 8	6	Total nur	nber of	volunteers (estimate if necessary)				6	2139.
SCANNIE ACTIVITIES				lated business revenue from Part VIII		12		. 7a	0.
<b>-</b>	b	Net unrel	ated bu	siness taxable income from Form 990-	T, line,34.	<del></del>	<del></del>	. 7b	<u> </u>
				22		ــا ار	Prior Ye		Current Year
<u> </u>				d grants (Part VIII, line 1桁)づしたた尺	2 2 2011 ·	इ∤ ├	21	825758.	6107524.
Revenue				revenue (rait viii, line 29)		(1 <del>  _</del>		0.	<u> </u>
ge Ç				ne (Part VIII, column (A), lines(3),4; and		7	<del></del>	59997.	88154.
	11	Other rev	enue (F	art VIII, column (A), lines-5,-6d, 8c, 9c,	10¢, and 11e)	1:		341963.	280642.
				dd lines 8 through 11 (must equal Part VII		(12)		227718.	6476320.
				ar amounts paid (Part IX, column (A), II		· ·	22	204617.	3726598.
ø	4			or for members (Part IX, column (A), lir	•			0.	0.
nse				mpensation, employee benefits (Part IX, c		-10)		146966.	135886.
Expenses	1			fraising fees (Part IX, column (A), line 11e	e) 150879	)O.	1 12.1/25	<b>0.</b> ≯√%: > \	0.
ш	1		-	expenses (Part IX, column (D), line 25) ▶	- · • • - · • - · · · · · · · · · ·	"······ - <u>*</u> -			<del></del>
				(Part IX, column (A), lines 11a-11d, 111				375034. 226617.	2681952.
				Add lines 13-17 (must equal Part IX, coenses. Subtract line 18 from line 12	olumn (A), line 2	5)	34	1101.	6544436.
- S		i icveriue i	cos evh	enses. Subtract line to from line 12 .	<del></del> .	Rog	inning of Cu		(68116.) End of Year
Net Assets or Fund Balances	20	Total ac-	oto (De-	t X, line 16)		Deg		141901.	2908238.
Ass Bai	21		•	t X, line 16)		· ·		16311.	1259085.
N S	22			nd balances. Subtract line 21 from line	20	• •		25590.	1649153.
	rt II		ture [			<del></del>		20000.	1040100.
		Under per	naltas of	perjury, I declare that I have examined this return, i	ncluding accompany	ing schedules	and statem	ents, and to 1	the best of my knowledge
		and belief	, i is trué	collect and complete. Declaration of preparer (	other than officer) is I	based on all r	nformation of	of which prep	arer has any knowledge
Sig	ın		ナ\	1100			1	2-14	-2011
He		Signa	tere of o		~		Date	<del></del>	
		T	od N	16 Kowski Executive	Director				
		<b> </b>		ame and title	7-1-1011				- <del></del>
_		Preparer's	1	J	Date	Check	ıf	Preparer's ide	ntifying number
D-:-	ı	signature	7	_	1	self- emplo		(see instruction	
Paid							-		
	oarer's	Firm's nar		urs L			EIN	<b>&gt;</b> :	<del></del>
use	Only	if self-emp address, a		4 /			Phone no	<b>)</b>	<del></del>
Ma	y the	IRS discu	ss this	return with the preparer shown above?	(see instruction	ıs) .			Yes No

Fal	Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: To support educational, cultural and community broadcasting services of Wisconsin Public Television.
	(Continued on Schedule O)
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O.  Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.  Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	(Code: ) (Expenses \$ 4953649. including grants of \$ 3726598. ) (Revenue \$ ) Support of educational, cultural and community broadcasting services of Wisconsin Public Television. Production and printing of Wisconsin Public Television program guides.
4D	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	•••••••••••••••••••••••••••••••••••••••
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	······································
	•••••••••••••••••••••••••••••••••••••••
	•••••••••••••••••••••••••••••••••••••••
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )
40	Total program service expenses

Pa	rt 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_1_	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	/	
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		✓
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8_		1
9	Did the organization report an amount in Part X, line 21; 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		✓
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	✓	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	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.			
•	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.			
•	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.		35. V	
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	✓ ×	** **
I2A	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			م أَنْ أَنْ الْمُرْدُّةِ مِنْ الْمُرْدُّةِ مِنْ الْمُرْدُّةِ مِنْ الْمُرْدُّةِ مِنْ الْمُرْدُّةِ مِنْ الْمُرْدُ تابعت
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>√</u>
14a	, , , , , , , , , , , , , , , , , , , ,	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		✓
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, Part II	15		✓
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, Part III	16		<b>✓</b>
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	17		✓_
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	1	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	_	]	,
20	If "Yes," complete Schedule G, Part III.  Did the organization operate one or more hospitals? If "Yes," complete Schedule H	19		<del>-</del>
	The state of the s		!	

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓	_
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		1
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		1
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		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		✓
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<b>✓</b>
	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		1
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	:	<b>√</b>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		<b>√</b> _
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<b>✓</b>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		✓_
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		✓_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		✓_
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		✓_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	1	

Pai	Statements Regarding Other IRS Filings and Tax Compliance		r · · · · ·	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
	Effect the number of forms were an included in time fat. Effect of it not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	<b>V</b>	
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calculate year and in with a within the year accounted by this return  2a  11.	- <u>-</u> -	+ , 4	- 3g / A
b	Statements, filed for the calendar year ending with or within the year covered by this return   11.  12a 11.  15 at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)		,	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		<b>\</b>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶		2.7 s.	· · · · ·
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>√</b>
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>✓</b>
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	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?	6a		✓
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).		* * * * * * * * * * * * * * * * * * * *	,
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	70	, <u>*</u>	·学
	and services provided to the payor?	7a 7b		
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	ه د د د	<b>√</b>
	in res, indicate the number of rorms ozoz med during the year		1 100	.1. a √3 ^3
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	2.3.44	√ 
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		_✓
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g		-
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		
8	required?		·	~ pr.
0	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.	·		-
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter:	14	4.	. ,
	Initiation fees and capital contributions included on Part VIII, line 12	-	·	å .
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	. ''	, I	-
1	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders		'	
b	Gross income from other sources (Do not net amounts due or paid to other sources against			-
200	amounts due or received from them.)  Section 4047(a)(1) non-exempt charitable trusts is the examination filling Form 900 in liquid Form 10412.	 12a		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes" enter the amount of tax-exempt interest received or accrued during the year.	120		

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.

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body	<b>⊣</b>	<u> </u>	] ;
b	Enter the number of voting members that are independent			. 25-
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			<u> </u>
	any other officer, director, trustee, or key employee?	2		<b>✓</b>
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?	3		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		✓_
6	Does the organization have members or stockholders?	6	1	
-	Does the organization have members, stockholders, or other persons who may elect one or more members			
, ,	of the governing body?	7a	✓	
h	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1 11	- * D	
0	the year by the following:	11. No. 12.	72,23	7
_		8a	1	
	The governing body?	8b	1	
o D	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	00	·	
9	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		1
Soc	tion B. Policies (This Section B requests information about policies not required by the International Control of the International			
	enue Code.)	ciriai		
1100	crue code.)		Yes	No
		10a		1
	Does the organization have local chapters, branches, or affiliates?	100		<del>                                     </del>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b		1
	affiliates, and branches to ensure their operations are consistent with those of the organization?	100		<del></del>
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	11	./	
	form?	12.12	<b>V</b>	73. 4
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		.58 ~~ .	7, *;
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	<b>✓</b>	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1,_	,	
	describe in Schedule O how this is done	12c	<b>√</b>	
13	Does the organization have a written whistleblower policy?	13	<b>V</b>	
14	Does the organization have a written document retention and destruction policy?	14	V	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by	- 22/24 ·		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ه روز مشاعدات	<u> </u>	الشنا
а	The organization's CEO, Executive Director, or top management official	15a	✓	<u> </u>
b	Other officers or key employees of the organization	15b		<b>✓</b>
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	100	· -	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	ئىشدا		الأستارية
	with a taxable entity during the year?	16a		<b>✓</b>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	, ~,	-	; 1
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	_ 2.2		ر ، ۱ اعب سما
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ Wisconsin			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501)	c)(3)s	onlv)	
. •	available for public inspection. Indicate how you make these available. Check all that apply.	-,,,-,-	,	
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	proet	
13	policy, and financial statements available to the public.	J. 1110		
20	State the name, physical address, and telephone number of the person who possesses the books and reci	ordo o	f tha	
20	organization: ► Deborah Allen Schultz, 821 University Avenue, Rm 1076, Madison, WI 53706 (608) 262-	5260		

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

# 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. Use Schedule J-2 if additional space is needed.

- 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. 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 the organization did not c	ompensate	any o	curr	ent	offi	cer, c	lirec	tor, or trustee.	·	
(A)	(B)	Į .	(C)					(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Ron Anderson	<u> </u>		L	-	-	<u>a</u>	<del> </del>			
Director	1.0	1						0.	0.	0.
Thomas Basting	140			_		1 -		_		
Director	1.0	1						0.	0.	0.
Sheehan Donoghue Director	1.0	✓						0.	0.	0.
Diane Everson Secretary	1.0	1		1				0.	0.	0.
Camille Haney Director	1.0	<b>√</b>						0.	0.	0.
Phil Hansotia Director	1.0	<b>√</b>						0.	0.	0.
Wade Huseth Treasurer	1.0	1		<b>✓</b>				0.	0.	0.
Richard Lepping Director	1.0	<b>√</b>						0.	0.	0.
Judith Leroy Director	1.0	<b>√</b>						0.	0.	0.
Katharine Lyall Director	1.0	<b>√</b>		Î				0.	0.	0.
John McHugh Vice President	1.0	<b>√</b>		<b>√</b>				0.	0.	0.
Mary Mohs Director	1.0	1						0.	0.	0.
Linda Prehn Director	1.0	<b>√</b>						0.	0.	0.
James Steinbach Director	1.0	<b>√</b>						0.	0.	0.
Jeanan Yasiri President	1.0	<u> </u>		1				0.	0.	0.
Jon Miskowski Executive Director	40.0	<b>V</b>		<b>,</b>	-			38521.	0.	14831.

Name and title  Average hours per week  Individual trustee  Indivi		(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
hours per		compensation from the organization	from related organizations	other compensation from the organization and related
				1
	-		<u> </u>	
	4			
1b Total	<b> </b>	38521.	0.	1483
2 Total number of individuals (including but not limited to those listed above	e) wh			
reportable compensation from the organization ▶ 0.				
3 Did the organization list any former officer, director or trustee, key empemployee on line 1a? If "Yes," complete Schedule J for such individual	oloyee	e, or highest c	-	Yes No
4 For any individual listed on line 1a, is the sum of reportable compensation the organization and related organizations greater than \$150,000? If "Yes, individual."				4
5 Did any person listed on line 1a receive or accrue compensation from services rendered to the organization? If "Yes," complete Schedule J for	any such	unrelated orga	anization for	5
Section B. Independent Contractors				<del></del>
1 Complete this table for your five highest compensated independent control compensation from the organization.	actor	s that received	d more than \$10	0,000 of
(A) Name and business address		(B) Description of se	ervices	(C) Compensation
None				
	+			<del></del>
	+-			

Pari	VII	Statement of Re	venue					
٠.	-				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
gifts, grants ilar amounts	b c	Federated campaigns Membership dues Fundraising events Related organizations	1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1	b c d				
Contributions, gifts, grants and other similar amounts	f g	Government grants (contributions, gifts, gand similar amounts not include Noncash contributions include <b>Total.</b> Add lines 1a–1f	grants, ded above 11	f 6107524.	6107524.			
Program Service Revenue	2a b c d e f	All other program serving Total. Add lines 2a-2f		Business Code				
_	3 4 5	Investment income (incother similar amounts) Income from investment of Royalties		🕨	65180.			65180.
	6a b c		(i) Real	(ii) Personal				
į	7a	Gross amount from sales of assets other than inventory	(i) Securities 61641	(ii) Other				
į		Less cost or other basis and sales expenses . Gain or (loss) . Net gain or (loss) .	59344 2297	<del></del>	22974.			22974.
Other Revenue	8a	Gross income from events (not including \$ of contributions reported See Part IV, line 18	d on line 1c).	a 995018. b 714376.				
oth	С	Less: direct expenses Net income or (loss) fro Gross income from gam	m fundraising	~	280642.	280642.		me There we deline the
i	b	See Part IV, line 19 Less: direct expenses Net income or (loss) fro		b tivities •				
	b	Gross sales of inverteurns and allowances Less: cost of goods so Net income or (loss) from	 ld	a b ntory ▶	And the state of t	Callery of the Caller	All the second s	
	11a	Miscellaneous Reve		Business Code	* * * * * * * * * * * * * * * * * * *		2	, , , , , , , , , , , , , , , , , , ,
	b c d	All other revenue .						
		Total. Add lines 11a-17 Total revenue. See ins		<u>}</u>	6476320.	280642.		88154.

# Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

per organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
	o not include amounts reported on lines 6b, o, 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 U.S. See Part IV, line 21	3726598.	3726598.						
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				7				
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		<b></b>		A STATE OF S				
5	Compensation of current officers, directors, trustees, and key employees	53352.	10127.	37962.	5263.				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.				
7	Other salaries and wages	59356.	0.	59356.	0.				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0.	0.	0.	0.				
9	Other employee benefits	22716.	0.	22716.	0.				
10	Payroll taxes	462.	0.	462.	0.				
11	Fees for services (non-employees):  Management	0.	0.	0.	0.				
	Legal	4027.	0.	4027.	0.				
	Accounting	7800.	0.	7800.	0.				
		0.	0.	0.	0.				
	Professional fundraising services. See Part IV, line 17	0.		THAN WARRY	0.				
	Investment management fees	10504.	0.	10504.	0.				
g	Other	0.	0.	0.	0.				
12	Advertising and promotion	0.	0.	0.	0.				
13	Office expenses	17386.	0.	17386.	0.				
14	Information technology	5912.	0.	5912.	0.				
15	Royalties	0.	0.	0.	0.				
16	Occupancy	0.	0.	0.	0.				
17	Travel	2815.	0.	2815.	0.				
18	Payments of travel or entertainment expenses	0.	o.	0.	0				
	for any federal, state, or local public officials	2857.	0.	2857.	<u>0.</u>				
19	Conferences, conventions, and meetings .	0.	0.	0.	<u> </u>				
20	Interest	0.	0.	0.	0.				
21 22	Payments to affiliates	0.	0.	0.	0.				
23	Insurance	3923.	0.	3923.	0,				
24	Other expenses. Itemize expenses not								
	covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)								
_	Membership	1181974.	0.	0.	1181974.				
a b	Airwaves Production & Printing	165251.	165251.	0.	0.				
,	Volunteer Management	85108.	0.	0.	85108.				
d	Major Gifts & Planned Giving	241708.	0.	0.	241708.				
e	LZ Lambeau/Vietnam Outreach	1061800.	1061800.	0.	0.				
f	All other expenses Allocated Overhead	(109113.)	(10127.)	(93723.)	(5263.)				
25	Total functional expenses. Add lines 1 through 24f	6544436.	4953649.	81997.	1508790.				
26	Joint costs. Check here ▶ ☐ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation								

Part X **Balance Sheet** (A) Beginning of year (B) End of year 175411. 400937. Cash-non-interest-bearing . . . . . . 1 1 118432. 2 119052. 2 Savings and temporary cash investments . . . . 66191. 3 129472. 3 16584. 4 35085. 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Schedule L . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 7 Notes and loans receivable, net Assets 8 Inventories for sale or use . . . . . 8 9 58686. 58812. 9 Prepaid expenses and deferred charges . 20000. . . Land, buildings, and equipment: cost or 10a 10a other basis. Complete Part VI of Schedule D 10b 20000 0. 10c 0. Less: accumulated depreciation . . . . 1105399. 11 1189923. Investments—publicly traded securities 11 12 12 Investments-other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets . . . . . . . . Other assets. See Part IV. line 11 901198. 15 974957. 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 2441901. 16 2908238. 368675. 17 439844. 17 Accounts payable and accrued expenses . . . 358437. 18 620980. 18 Grants payable 189199. 19 198261. 19 Deferred revenue . . . . . 20 20 Tax-exempt bond liabilities . . . . 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 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 . . . 23 24 24 Unsecured notes and loans payable to unrelated third parties . . . Other liabilities. Complete Part X of Schedule D 25 25 Total liabilities. Add lines 17 through 25 26 916311. 26 1259085. Organizations that follow SFAS 117, check here ▶ ☑ and Balances complete lines 27 through 29, and lines 33 and 34. 1219399. 27 1049303. Unrestricted net assets . . . 27 216191. 28 439472. 28 Temporarily restricted net assets . . . Net Assets or Fund 90000. 160378. 29 Permanently restricted net assets . . . . Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 32 Retained earnings, endowment, accumulated income, or other funds 1649153. 1525590. 33 33 Total liabilities and net assets/fund balances 2441901. 2908238. 34

Pa	rt XI Financial Statements and Reporting							
			Yes	No				
1	Accounting method used to prepare the Form 990:   Cash  Accrual  Other	,						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		- :					
	Schedule O.		- •					
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?							
b	Were the organization's financial statements audited by an independent accountant?	2b	<b>√</b>					
С	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?							
	If the organization changed either its oversight process or selection process during the tax year, explain in							
	Schedule O.							
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were							
	issued on a consolidated basis, separate basis, or both:	27 J. S.						
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	***						
За	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		✓				
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						

Form **990** (2009)

# 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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection Employer identification number

		the organization							Employ	er identifica	ation number
			in Public Telev						23		7300462
Pa	rt i	Reasor	for Public C	harity Status (All o	rganızat	ions mus	st comp	lete this	part.) S	ee instru	ctions.
The 1 2 3 4		A church, co A school de A hospital of A medical re	onvention of chi scribed in <b>secti</b> r a cooperative	ndation because it is: urches, or association on 170(b)(1)(A)(ii). (Ai hospital service orgalation operated in contate.	n of church ttach Sch nization of njunction	ches described with a ho	cribed in In sections pospital de	section on 170(b)	170(b)(1) (1)(A)(iii) in sectio	(Å)(i).	1)(A)(iii). Enter the
5		An organiza	=	r the benefit of a colle						vernmenta	al unit described in
6											
7		An organiza	tion that normall	y receives a substanti (1)(A)(vi). (Complete I	ial part of					-	the general public
8 9		A communit An organizar receipts from support from	y trust describe tion that normall n activities relat n gross investm	d in section 170(b)(1) y receives: (1) more the ed to its exempt function and unread after June 30, 1975	)(A)(vi). (0 nan 33⅓ % ntions—si elated bu	% of its suubject to issiness ta	ipport fro certain e xable ind	xceptions come (les	s, and (2) s section	no more	than 331/3 % of its
10 11	1 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.										
е	V	persons other	this box, I cer	tify that the organiza on managers and othe	tion is no		lled direc	tly or inc	directly b	y one or	
f g		organization	, check this box it 17, 2006, has	a written determinat the organization acce							Ill supporting
		and (iii) b	elow, the gover member of a pe	r indirectly controls, a ning body of the sup- erson described in (i) a	ported or above?	rganızatio	n? . 		s descri	oed in (ii) ·	Yes No 11g(i) ✓ 11g(ii) ✓
h				of a person described ation about the suppo							11g(iii) 🗸
		of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) is the o	organization	(v) Did y the organ col (i)	ou notify nization in of your port?	organizat (i) organi	s the ion in col zed in the S?	(vii) Amount of support
			!		Yes	No	Yes	No	Yes	No	
WHA	\-TV 	·	39-1805963	6		1	✓		1		2345302.
Wisconsin Public Broadcasting Fnd			39-1447533	11a		1	✓		✓		1381296.
Tota	1							,		,	3726598.

Pa	Support Schedule for Org (Complete only if you ched	ganizations ked the box	Described in on line 5, 7,	Sections 17 or 8 of Part	70(b)(1)(A)(iv) l.)	and 170(b)(1	)(A)(vi)
Sec	tion A. Public Support						
C	alendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						N/A
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		<u> </u>	,			
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.	All State of the S			49 ( 12	- 1, 1, 1 , 2 , 1	
	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						N/A
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						
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 .	The state of the	3-1 3 75 1	1 x x x		- ( ^ * - * - * - * - * - * - * - * - * - *	
12	Gross receipts from related activities, etc.	(see instruction	ons)			12	
13	First five years. If the Form 990 is for organization, check this box and stop he		n's first, secon		_		n 501(c)(3)
Sec	tion C. Computation of Public Sup	port Percer	ntage				
14	Public support percentage for 2009 (line 6	6, column (f) di	vided by line 11	, column (f))		14	%
15	Public support percentage from 2008 Sch	edule A, Part I	l, line 14			15	%
l6a	33%% support test—2009. If the organization qualifies					6 or more, chec	
b	33% % support test—2008. If the organiz box and stop here. The organization qual						
17a	10%-facts-and-circumstances test—200 more, and if the organization meets the "facts-and-circums organization meets the "facts-and-circums"	<b>09.</b> If the organicts-and-circun	zation did not c nstances" test, d	heck a box on check this box	line 13, 16a, or and <b>stop here.</b>	16b, and line 14 Explain in Part I	is 10% or V how the
ь 18	10%-facts-and-circumstances test—2008. more, and if the organization meets the "facts-and-circumstan Private foundation. If the organization did	cts-and-circum	stances" test, cl organization qua	neck this box a lifies as a public	and <b>stop here.</b> By supported org	Explain in Part l' ganization , .	V how the

# 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.)

Š	ction A. Public Support	ou the box of		.,,,,							
		(=) 0005	(h) 0000	(-) 0007	(4) 0000	[ (1) 0000 T	(O T-1-)				
U	alendar year (or fiscal year beginning in) 🕨	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total				
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						N/A				
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					<del></del>	<del></del>				
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.)						N/A				
	tion B. Total Support										
Ca	alendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total				
9	Amounts from line 6						N/A				
l0a	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										
1	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on										
2	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)										
3	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						N/A				
4	First five years. If the Form 990 is for torganization, check this box and stop i	nere	<u> </u>		•	ear as a section					
<u>Sec</u>	tion C. Computation of Public Sup	port Percen	tage								
5	Public support percentage for 2009 (lin			e 13, column (	f)) 	15 16	<u>%</u> %				
6_											
	Public support percentage from 2008 Stion D. Computation of Investment										
Sec	tion D. Computation of Investmen	t Income Pe	rcentage	by line 13. co	olumn (f))	17	<u>%</u>				
Sec 7	tion D. Computation of Investment Investment income percentage for 2009	t Income Pe (line 10c, coli	rcentage umn (f) divided		olumn (f)) .	17 18	<u>%</u>				
	Investment income percentage for 2009 Investment income percentage from 20 331/3 % support tests – 2009. If the orga	t Income Pe (line 10c, colu 08 Schedule A anization did no	ercentage  umn (f) divided  a, Part III, line  ot check the bo	17 ox on line 14, a	nd line 15 is m	18 ore than 331/3 %	%, and line				
Sec 7 8 9a	tion D. Computation of Investment Investment income percentage for 2008 Investment income percentage from 20	It Income Pe O (line 10c, coli 08 Schedule A anization did no ox and stop he ization did not d	ercentage  Jumn (f) divided  A, Part III, line  Of check the book  Te. The organizeheck a box on	17		18 hore than 331/3 % upported organ is more than 3	%, and line nization ► □				

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. Provide any other additional information. See instructions.
Part 1, Line 2: There are three grants provided to WHA-TV (operating as Wisconsin Public Television, under license from the
University of Wisconsin Board of Regents-University of Wisconsin Extension) for general overall support and to support
specific projects. The Director of Wisconsin Public Television reports station activity and financial results at regular
Board of Directors and Finance Committee meetings.
Part 1, Line 3: There is one grant provided to Wisconsin Public Broadcasting Foundation (operating as Wisconsin Public
Television, under license from the Wisconsin Educational Communications Board) for general overall support and to
support specific projects. The Director of Wisconsin Public Television reports station activity and financial results at
regular Board of Directors and Finance Committee meetings.

# SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. ► See separate instructions.

Frie	nds of Wisconsin Public Television, Inc.		ļ	23	7300462
Pa	Organizations Maintaining Do the organization answered "Yes			ds or Accou	nts. Complete if
	<del></del>	(a) Donor advised fund	ds	(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 funds are the organization's property, sub	I donor advisors in writing the ject to the organization's exc	at the assets held i	in donor advise	ed Yes No
6	Did the organization inform all grantees, dused only for charitable purposes and not purpose conferring impermissible private	lonors, and donor advisors in for the benefit of the donor of	writing that grant	funds can be or for any other	
Pa	t II Conservation Easements. Com	plete if the organization ans	wered "Yes" to F	orm 990, Part	IV, line 7.
1	Purpose(s) of conservation easements hel  Preservation of land for public use (e.g.  Protection of natural habitat  Preservation of open space  Complete lines 2a through 2d if the organization	g., recreation or pleasure)	Preservation of Preservation of	f a certified his	toric structure
	easement on the last day of the tax year.				
				Held at	the End of the Tax Year
а	Total number of conservation easements .			2a	
ь	Total acreage restricted by conservation e			1 44 1	
С	Number of conservation easements on a conservation easement easements on a conservation easement easeme				
d	Number of conservation easements includ	ed in (c) acquired after 8/17/0	06	2d	
3	Number of conservation easements modified the tax year ▶	ied, transferred, released, exti	inguished, or termi	inated by the c	rganization during
4	Number of states where property subject	to conservation easement is I	ocated ▶		
5	Does the organization have a written polic violations, and enforcement of the consent		itoring, inspection,	-	☐ Yes ☐ No
6	Staff and volunteer hours devoted to moni	toring, inspecting, and enforc	ing conservation e	easements duri	ng the year
7	Amount of expenses incurred in monitoring  ▶\$	g, inspecting, and enforcing o	onservation easen	nents during th	e year
8	Does each conservation easement reporte $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(ii)$ ?				Yes No
9	In Part XIV, describe how the organization balance sheet, and include, if applicable, the organization's accounting for conserva-	he text of the footnote to the	ints in its revenue organization's fina	and expense s ancial statemer	tatement, and its that describes
Pa	t III Organizations Maintaining Colle Complete if the organization answ			er Similar As	sets.
1a	If the organization elected, as permitted ur art, historical treasures, or other similar asso provide, in Part XIV, the text of the footnot	ets held for public exhibition, e	education, or resear	rch in furtheran	nce sheet works of ce of public service,
b	If the organization elected, as permitted ur historical treasures, or other similar assets provide the following amounts relating to t	held for public exhibition, ed	s revenue statemer ucation, or researd	nt and balance ch in furtherand	sheet works of art, e of public service,
	(i) Revenues included in Form 990, Part V	/III, fine 1		. , ▶ \$	
	(ii) Assets included in Form 990, Part X .			. ▶ \$	
2	If the organization received or held works following amounts required to be reported	under SFAS 116 relating to t	hese items:	ets for financia	al gain, provide the
a b	Revenues included in Form 990, Part VIII, Assets included in Form 990, Part X $$ .				

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Page	4

Pai	t III Organizations Maintain	ing Collections	of Art, H	istoric	al Treasure	es, c	or Ot	her Simila	r Ass	ets (cont	tinued)
3	Using the organization's acquisition collection items (check all that appl	, accession, and c y):	other reco	rds, ch	eck any of t	he fo	ollow	ing that are	a sigr	nificant us	e of its
а	Public exhibition		d	LJ I	Loan or exc	hang	ge pr	ograms			
b	Scholarly research		е	_ <b>.</b>	Other	<b>.</b>	·		· · · · · · ·		
C	Preservation for future general	tions									
4	Provide a description of the organiz Part XIV.	ation's collections	s and exp	lain ho	w they furth	er th	e org	ganization's	exem	pt purpos	se in
5	During the year, did the organization sassets to be sold to raise funds rather	r than to be mainta	ained as p	art of th	ie organizatio	on's	collec	ction?	· _	Yes	
Pai	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.										
									s not	Yes	□ No
b	If "Yes," explain the arrangement in	Part XIV and com	nplete the	followi	ng table:	ſ			Α		
						ŀ		<u></u>	Amo	Juni	
C	Beginning balance					. }	1c				
d	Additions during the year					.	<u>1d</u>				
е	Distributions during the year .					. }	<u>1e</u>				
f	Ending balance					. L	1f			<del></del>	
	Did the organization include an amount "Yes," explain the arrangement in	Part XIV.				•	· ·			∐ Yes	∐ No ———
Par	t V Endowment Funds. Co						_				
		(a) Current year	(b) Pno		(c) Two yea	rs bac	:K (	d) Three years		(e) Four yea	ars back
1a	Beginning of year balance	901198.	8	<u> 342435.</u>	At the	<u> </u>		٠٠ ، ١٠		(2) 3° "#	<u>}</u>
b	Contributions		2	<u> 27752.</u>				\$1.7 BY 1.50	15 E		10.4
С	Net investment earnings, gains,					4,7%	TE .				9년 : 33년 근대
	and losses	120839.	(1:	21840.)	42.5	, ,		A. CANA	, , , , ,		*,*
d	Grants or scholarships	42423.		43480.	1 2 . S Sant	<u> </u>	ig.	11年- (16春)	18		<u> 188 - 4</u>
е	Other expenditures for facilities and programs					۽ ". '.				The last of the way	
f	Administrative expenses	4657.	_	3669.	10 (10 - 10)	ξ'↑ <u>"۸</u> ]		·	. '		= -
g	End of year balance	974957.	9	01198.	11 V 2 24	,	z	E, -×-, -, -, -, -, -, -, -, -, -, -, -, -, -			27, 1
2	Provide the estimated percentage of			as:							
a	Board designated or quasi-endowm		.l. %								
þ	Permanent endowment ▶										
_	Term endowment ▶ %								_		
3a	Are there endowment funds not in the	e possession of th	e organiza	ation th	at are held a	ind a	ıdmin	istered for	the	Yes	s No
	organization by:									3a(i)	110
	··· <del>-</del>					•			•	3a(ii)	<del></del>
<b>L</b>	(ii) related organizations	nizations listed at		Lan Sal	bodulo B2				•	3b	<del></del>
4	Describe in Part XIV the intended us						•		•	30	
	t VI Investments—Land, Bu					Part	Y lir	ne 10			
ı aı	<del></del>								7	(d) Book val	
	Description of investment	(a) Cost or oth			st or other is (other)		dep	cumulated reciation	ļ	(d) Book val	
1a	Land					-	. ,				
b	Buildings								<u> </u>		
C	Leasehold improvements								<b> </b>		
d	Equipment		20000.					20000.	1		<u> </u>
_	Other								1		
Tota	I. Add lines 1a through 1e. (Column (d) r	nust equal Form 99	90, Part X,	column	(B), line 10(c	:).) .		▶			0.

Part VII	Investments—Other Secur	ities. 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
Financial d	erivatives		
Closely-hel	d equity interests		
_			
			<del></del>
•••••			<del></del>
	•••••		<del></del>
••••••			
	b) must equal Form 990, Part X, col (B) line 12)	<b>&gt;</b>	· 图1. 10. 11. 12. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15
Part VIII	Investments—Program Re	ated. See Form 990, Part	X, line 13.
(a	a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
			Cost of end-of-year market value
		<del></del>	
T-1-1 (0-1	T)		with the second
Part IX	b) must equal Form 990, Part X, col (B) line 13)  Other Assets. See Form 990,	Part Y line 15	with the second
Tartin	Other Assets. See Form See,	(a) Description	(b) Book value
		<del></del>	
		<del></del>	
Total. (Colui	mn (b) must equal Form 990, Part X, o	col. (B) line 15.)	
Part X	Other Liabilities. See Form 9	90, Part X, line 25.	
<u>1</u>	(a) Description of liability	(b) Amount	
Federal inco	ome taxes		
	<del></del>	<del></del>	
Total. (Column (	b) must equal Form 990, Part X, col (B) line 25)	<b>&gt;</b>	
2. FIN 48 Fo	potnote. In Part XIV, provide the tex	t of the footnote to the organ	ization's financial statements that reports the
organization	n's liability for uncertain tax position	ns under FIN 48.	· · · · · · · · · · · · · · · · · · ·

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00.10	0310 E (1 0311 000) 2000				1 age
Pa	rt XI Reconciliation of Change in Net Assets from Form 990	to Audite	d Financial St		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1_	6476320.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	6544436.
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3	(68116.)
4	Net unrealized gains (losses) on investments			4	191679.
5	Donated services and use of facilities			5	
6	Investment expenses			6_	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV.)		I	8	
9	Total adjustments (net). Add lines 4 through 8			9 10	100500
10	Excess or (deficit) for the year per audited financial statements. Comb  **T XII Reconciliation of Revenue per Audited Financial Sta	temente	Alith Povenus		123563.
			with nevenue	1 1	
1	Total revenue, gains, and other support per audited financial statemer	nts		1-3	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a	191679.	4	-
a	Net unrealized gains on investments	2b	1510/5	٠.	4
b	Donated services and use of facilities	2c			Kug ) Lan
C	Recoveries of prior year grants	2d	714376.	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	14 C
d	Other (Describe in Part XIV.)			2€	906055.
e	Add lines 2a through 2d			3	<del></del>
3 4	Subtract line <b>2e</b> from line <b>1</b>	· · · ·		<del>ا</del> ا	0430010.
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a	10504.		-
a b	Other (Describe in Part XIV.)	4b	10304.		*
C	Add lines 4a and 4b			40	10504.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Pa	t XIII Reconciliation of Expenses per Audited Financial St				0710020
1	Total expenses and losses per audited financial statements			1	7248308.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			.*	6)
a	Donated services and use of facilities	2a		330	
b	Prior year adjustments	2b			×2
С	Other losses	2c			,¢ 
d	Other (Describe in Part XIV.)	2d	714376.	2 12 1	<del>}</del>
е	Add lines 2a through 2d			2e	714376.
3	Subtract line 2e from line 1			3	6533932.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			* * * * * * * * * * * * * * * * * * *	2.
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	10504.	\ \	·, [
b	Other (Describe in Part XIV.)	4b		شد.	~
С	Add lines <b>4a</b> and <b>4b</b>			4c	+
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I	, line 18.)	<u> </u>	5	6544436.
Com and this	t XIV Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5, 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b part to provide any additional information.  t V, Line 4: The income from the endowment assets is available for	; and Part :	XIII, lines 2d and	i 4b.	. Also complete
for	general support.				
Par	t XII, Line 2d., and Part XIII, Line 2d.: Special Event Expenses from F	form 990, F	art VII, 8b, and	Sch	edule G
			••••		
			••••		

# SCHEDULE G (Form 990 or 990-EZ)

**Supplemental Information Regarding Fundraising or Gaming Activities** 

OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Friends of Wisconsin Public Television, Inc. 7300462 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Solicitation of non-government grants Mail solicitations Internet and email solicitations Solicitation of government grants □ Phone solicitations Special fundraising events In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? L Yes No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name of individual (iii) Did fundraiser have (v) Amount paid to (ii) Activity (iv) Gross receipts (vi) Amount paid to (or retained by) (or retained by) custody or control of or entity (fundraiser) from activity fundraiser listed in col (i) contributions? organization Yes No 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Pa	art II	Fundraising Events. Comore than \$15,000 on F				
			(a) Event #1 Garden & Quilt Ed	(b) Event #2 Auction	(c) Other events	(d) Total events (add col (a) through col (c))
Revenue		Cross recents	(event type) 690483.	(event type) 304535.	(total number)	995018.
Ве́	2	Gross receipts	000400.	304000.		0000101
	3	Gross income (line 1 minus line 2)	690483.	304535.		995018.
	4	Cash prizes				
	5	Noncash prizes		10000.		10000.
enses	6	Rent/facility costs				174116.
Direct Expenses	8	Food and beverages Entertainment				
Oire	9	Other direct expenses	0.4000	186652.		530260.
	10 11	Direct expense summary. Ad Net income summary. Comb	d lines 4 through 9 in course line 3, column (d), a	olumn (d)		( 714376.) 280642.
	rt II	Gaming. Complete if than \$15,000 on Form	the organization ansv	vered "Yes" to Form	990, Part IV, line 19,	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Rev	1	Gross revenue				
nses	2	Cash prizes				
ct Expenses	3	Noncash prizes				
Direc	4	Rent/facility costs				
	<u>5</u> 6	Other direct expenses .  Volunteer labor	☐ Yes% ☐ No	☐ Yes% ☐ No	☐ Yes% ☐ No	
	7	Direct expense summary. Ad	d lines 2 through 5 in c	olumn (d)		( )
	8	Net gaming income summary	/. Combine line 1, colun	nn d, and line 7	<b>.</b>	ly - N
9 a		ter the state(s) in which the o		-	es?	1 - 1 1
b		No," explain:				
		re any of the organization's o		d, suspended or termin		ar? 10a
11 12	ls t	es the organization operate g the organization a grantor, be med to administer charitable	eneficiary or trustee of a			entity \land

Page	3
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Sche	dule G (Form 990 or 990-EZ) 2009			age
	1 1		Yes	No
13	Indicate the percentage of gaming activity operated in:  The organization's facility  13a  %	1		
a	The organization 3 facility	┨.		-
14	An outside facility	<b> </b>		-
'7	and records:			
		2	- 1	
	Name ▶	1		-
				13
	Address >	132	- 1	
		,	-	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	2.2.2.	
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the	, e <sup>n</sup>	3.7.	
_	amount of gaming revenue retained by the third party ▶ \$	1. N		~* ``
С	If "Yes," enter name and address of the third party:	- A		
	Name ▶			ja n
				;
	Address ▶			*** ***
16	Gaming manager information:	1	***	Ž.
	Curing manager mornation.			#\ #\x^. - \
	Name ▶		145	1
	Name P	1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	2.00	
	Gaming manager compensation ▶ \$	1 1	s	
		, ^q,		
	Description of services provided ▶	2. mg	25 - 2 / 2 - 2 / 2	* •
	п п	\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.	16	,
	☐ Director/officer ☐ Employee ☐ Independent contractor		1 124	-~ `

a Is the organization required under state law to make charitable distributions from the gaming proceeds to b Enter the amount of distributions required under state law to be distributed to other exempt organizations

or spent in the organization's own exempt activities during the tax year ▶ \$

17 Mandatory distributions:

Schedule G (Form 990 or 990-EZ) 2009

# **SCHEDULE 1** (Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.

OMB No. 1545-0047 2009

Open to |

å (h) Purpose of grant or assistance Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Employer Identification number 7300462 See Part IV See Part IV ✓ Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance . (d) Amount of cash grant 2082759. 1381296. Part IV and Schedule I-1 (Form 990) if additional space is needed Enter total number of section 501(c)(3) and government organizations (c) IRC section if applicable the selection criteria used to award the grants or assistance? Part I General Information on Grants and Assistance 139 9 39-1805963 39-1447533 (b) EIN Enter total number of other organizations Friends of Wisconsin Public Television, Inc. 821 University Ave., Madison, WI \* Wisconsin Public Broadcasting 1 (a) Name and address of organization or government 3319 W. Beltline, Madison, WI Name of the organization

Wisconsin Public Television, under license from the Wisconsin Educational Communications Board) with general overall support and to support specific projects, in accordance with the Friends of Wisconsin Public Television, Inc. mission statement of supporting educational, cultural and community broadcasting. The amounts Part II, Line 1(h) WHA-TV: the purpose of the grants is to provide WHA-TV, (operating as Wisconsin Public Television, under license from the University of Wisconsin Wisconsin Public Television, Inc. mission statement of supporting educational, cultural and community broadcasting. The amounts reported here are grants paid from Part II, Line 2(h) Wisconsin Public Broadcasting Foundation, Inc.: the purpose of the grant is to provide Wisconsin Public Broadcasting Foundation, Inc. (operating as 7/1/09 through 6/30/10 and includes \$358,437 of grant expenses reported in FY09 but not paid until FY10. Grants of \$620,980 reported as expense from 7/1/09 through (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. 6/30/10 but not paid until FY11 are excluded for this schedule, but are reported with grant expenses on Form 990, Part III, Line 4a, and are also included in Part IX, Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Board of Regents-University of Wisconsin Extension) with general overall support and to support specific projects, in accordance with the Friends of Method of valuation (book, FMV, appraisal, other) reported here are grants paid from 7/1/09 through 6/30/10; all reported as FY10 expense on Form 990, Part III, Line 4. e (d) Amount of non-cash assistance Use Part IV and Schedule I-1 (Form 990) if additional space is needed (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Part IV Part III

#### SCHEDULE O (Form 990)

# Supplemental Information to Form 990

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

► Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Friends of Wisconsin Public Television, Inc.

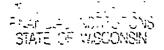
Employer identification number 23 7300462

Form 990, Part III, Line 1, Description of Organization Mission: Includes but not limited to the following purposes: 1. To support the educational, cultural and community broadcasting services of Wisconsin Public Television, a public broadcasting service operated jointly by the Wisconsin Educational Communications Board and the University of Wisconsin Board of Regents-University of Wisconsin Extension, each an agency of the State of Wisconsin. 2. To establish development services and other activities which complement and/or assist the broadcasting activities described above. 3. To engage in other activities and programs ancillary to and in support of the foregoing. 4. To raise funds and invest in, receive, hold, use and dispose of property of all kinds as may be necessary or desirable to carry into effect the purposees stated above. Form 990, Part VI, Section A, Line 6: Persons making contributions to the Friends of Wisconsin Public Television, Inc. will become and continue as members of the organization for a one-year period beginning upon the date of contribution. Form 990, Part VI, Section A, Line 7a: The election of directors occurs by secret ballot of the membership. The Governance Committee establishes procedures concerning the conduct of elections, distributes ballots to all members and in all respects supervises thet election of Directors by Members and certifies its results. Form 990, Part VI, Section A, Line 8b: The Executive Committee shall have and may exercise, when the Board of Directors is not in session, the powers of the Board of Directors in the management of the affairs of the Corporation, except action in respect to election of officers or the filling of vacancies in the Board of Directors or Executive Committee. The other two standing committees are the Governance Committee, described above, and the Finance Committee; these committees may not act on behalf of the Governing Board. All Icommittees shall keep a record of their proceedings and a copy of the minutes of their meetings shall be submitted to the Board of Directors.

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Page	•

Employer identification number

Name of the organization	Employer identification number
Friends of Wisconsin Public Television, Inc.	23 7300462
Form 990, Part VI, Section A, Line 10: The Finance Committee is charged with the review	and approval of the Form 990.
Draft copies are made available to the Board of Directors for review and comment. In the	event of unresolved objections,
the return will be extended and can be discussed at the next regularly scheduled meeting	. The Executive Director
maintains all correspondence, questions and objections, should any arise.	
Form 990, Part VI, Section B, Line 12c.: Conflicts of interest disclosures are documented	in the minutes of the
respective meeting of the governing body.	
Form 990, Part VI, Section B, Line 15: The compensation of the Executive Director is neg	otiated with the University of
Wisconsin Board of Regents-University of Wisconsin Extension, the licensee of WHA-TV,	(operating as Wisconsin Public
Television), and is consistent with University of Wisconsin compensation policies.	
Form 990, Part VI, Section C, Line 19: The organization makes its governing documents,	conflict of interest policy, and
financial statements available to the public upon request.	



09 JUL 10 PM 3: 17



# AMENDED AND RESTATED ARTICLES OF INCORPORATION OF

# FRIENDS OF WHA-TV, INC. Herein Renamed

FRIENDS OF WISCONSIN PUBLIC TELEVISION, INC.



The following Amended and Restated Articles of Incorporation of Friends of WHA-TV, Inc., herein renamed Friends of Wisconsin Public Television, Inc., duly adopted pursuant to the authority and provisions of the Wisconsin Nonstock Corporation Law, Chapter 181 of the Wisconsin Statutes, supersede and take the place of the existing Articles of Incorporation and amendments thereto:

# ARTICLE I

The name of the Corporation is FRIENDS OF WISCONSIN PUBLIC TELEVISION, INC.

#### **ARTICLE II**

The Corporation is organized exclusively for charitable and educational purposes, including but not limited to the following purposes: to support the educational, cultural and community broadcasting services of the Wisconsin Educational Communications Board (ECB) and the University of Wisconsin Board of Regents (UWEX), each an agency of the State of Wisconsin and operating their broadcasting services together as Wisconsin Public Television WPT); to establish development services and other activities which complement and/or assist the broadcasting activities described above; to engage in other activities and programs ancillary to and in support of the foregoing; and to raise funds and invest in, receive, hold, use and dispose of property of all kinds as may be necessary or desirable to carry into effect the purposes stated in this Article.

# **ARTICLE III**

The Corporation shall have all powers now or in the future given by law to nonstock corporations organized under the laws of Wisconsin, provided however that such powers may be exercised only to further the purposes stated in Article II above, and further provided that:

- (1) No part of the net earnings of the Corporation inure to the benefit of any private individual, except that the Corporation may pay reasonable compensation for services rendered and may make payments and distributions in furtherance of its purposes stated in Article II above;
- no substantial part of the activities of the Corporation may be the carrying on of propaganda, or otherwise attempting, to influence legislation (except as otherwise

provided in subsection 501(h) of the Internal Revenue Code of 1986, as amended);

- (3) the Corporation not participate in, or intervene in (including the publishing or distributing of statements), any political campaign on behalf of any candidate for public office; and
- (4) notwithstanding any other provision of these Articles, the Corporation may not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code of 1986, as amended, or (b) by a corporation, contributions to which are deductible under section 170 (c)(2) of the Internal Revenue Code of 1986, as amended

#### **ARTICLE IV**

The Corporation shall have members. Membership provisions, including the designation of one or more classes of members and the qualifications, rights, and method of acceptance of members of each class shall be as set forth in the Bylaws.

#### ARTICLE V

The affairs of the Corporation shall be managed by a Board of Directors. The number of Directors and their manner of election or appointment and their terms of office shall be as provided in the Bylaws, but the number of Directors shall not be less than three.

#### ARTICLE VI

The principal office of the Corporation is located in Dane County, Wisconsin, and its mailing address is:

821 University Avenue Madison, WI 53706

and the name and address of its current Registered Agent is:

Jon Miskowski 821 University Avenue Madison, WI 53706

# ARTICLE VII

Upon the dissolution of the Corporation, the Board of Directors shall, after paying or making provision for the payment of all of the liabilities of the Corporation, dispose of all of the assets of the Corporation exclusively for the purposes of the Corporation to one or both of the ECB and the UWEX for support of the educational, cultural and community broadcasting

services of WPT, as determined by the Board of Directors, provided that the UWEX and/or ECB then hold licenses for television broadcast issued by the Federal Communications Commission for the stations of WPT, or to such other entity or entities then holding such licenses provided that any such holder(s) are organized and operated exclusively for charitable, educational or scientific purposes as shall at the time qualify as exempt organizations under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, or if the organization(s) holding such license(s) at the time of dissolution do not qualify as exempt under said Section 501(C)(3), as amended, then to such other organization or organizations that do so qualify as the Board of Directors shall determine.

## ARTICLE VIII

The Articles of Incorporation may be amended by a vote of at least two-thirds of the Members of the Corporation present at a meeting duly held for that purpose, if the Bylaws provide for a vote of Members in this regard, or otherwise by the Board of Directors upon the vote of at least two-thirds of the Directors in office.

#### ARTICLE IX

These Restated Articles of Incorporation supersede and take the place of the heretofore existing articles of incorporation and all amendments thereto.

The undersigned officers of Friends of WHA-TV, Inc., herein renamed Friends of Wisconsin Public Television, Inc., a Wisconsin corporation with its principal office in Dane County, Wisconsin, CERTIFY: that said corporation has no members having voting rights with respect to the adoption of or amendments to the Articles of Incorporation of the Corporation, and that the foregoing Amended and Restated Articles of Incorporation of said corporation, which includes amendments to the existing Articles of Incorporation, were duly adopted in accordance with Section 181.1002 of the Wisconsin Statutes at a meeting of its Board of Directors on the 14<sup>th</sup> day of May, 2009, by the affirmative vote of at least two-thirds of the Directors then in office.

Executed this 14th day of May, 2009.

. President

, Secretary

This document was drafted by Michael E. Skindrud Godfrey & Kahn, S.C. Madison, Wisconsin 3725756\_3