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DLN: 93493136013481

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public Inspection

A For	the 2	2009 calendary	ear, or tax year beginning 10-01-20	009 and ending 09-30-20:	10	D Employer i	dentification number	
_		pplicable Please use IRS	C Name of organization Alabama Educational Television					
_	ess cha	label or	I DOING DUSINGSS AS		63-6050895 E Telephone number			
type. See						(205) 328	3-8756	
_		Instruc-	I MUMBELAND SHEEL FOLD ON HIM	aıl ıs not delivered to street addr	ess) Room/suite		its \$ 9,762,416	
_	nınated 							
_	nded r		City or town, state or country, and Z Birmingham, AL 35205	IP + 4				
Appl	ication	pending			_			
			ame and address of principal office	er		ıs a group reti		
		2112	2 11th Ave South		απιιια	ites?	⊤Yes ▼ No	
		Birm	ingham, AL 35205		1 ' '	II affiliates incl	·	
Tax	-exem	nt status 🔽 501	.(c) (3) 4 (insert no)	or – 527			st (see instructions)	
				51 527	H(c) Grou	ıp exemption	number F	
		www.aptvor			<u> </u>			
			oration Trust Association Other		L Year of fo	rmation 1982	M State of legal domicile AL	
Par		Summary Briefly describe	the organization's mission or most	cianificant activities				
Activities & Governance	2 3 4 5	Check this box Number of votin Number of indep	appropriations from the Alabama S bama Public Television under the b If the organization discontinued g members of the governing body (lendent voting members of the governing body) employees (Part V, line 2a) volunteers (estimate if necessary)	d of more than	25% of its ne	t assets 3		
	7a	Total gross unre	elated business revenue from Part \	VIII, column (C), line 12			7 a	
	b	Net unrelated bu	usiness taxable income from Form	990-T, line 34			7b (
		C				or Year	Current Year	
9	8 9		and grants (Part VIII, line 1h) .erevenue (Part VIII, line 2g) .			2,575,571 8,352,947	1,682,883 7,483,534	
Revenue	10		come (Part VIII, column (A), lines			9,165	2,883	
걛	11		(Part VIII, column (A), lines 5, 6d			9,117	593,116	
	12		–add lines 8 through 11 (must equa	ne		2 7 6 2 1 4 6		
						10,946,800		
	13 14		nlar amounts paid (Part IX, column o or for members (Part IX, column (• • • •		68,795	80,406	
	15		compensation, employee benefits		5-		0	
<u> </u>	10	10)		(2,759,690	2,697,040	
Expenses	16a	Professional fu	ndraısıng fees (Part IX, column (A)			0		
ਲੈ∣	b	Total fundraising e	expenses (Part IX, column (D), line 25) 🛌	667,150				
	17		s (Part IX, column (A), lines 11a-:		•	8,305,072		
	18		s Add lines 13-17 (must equal Pa			11,133,557	10,308,678	
	19	Revenue less e	expenses Subtract line 18 from line	e 12		-186,757	-546,262	
3 4 3 2						g of Current 'ear	End of Year	
net Assets or Fund Balances	20	Total assets (F	Part X, line 16)			8,355,100	8,097,880	
4 B	21		(Part X, line 26)			1,300,931	1,372,808	
Ž 🖺	22	Net assets or f	und balances Subtract line 21 fror	m line 20		7,054,169	6,725,072	
Par	t II	Signature I	Block					
Sign Here		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge ****** 2011-05-16						
		Pauline Howlar						
		Type or print n	ame and title					
Paid Prena	ror's		LaRocca CPA	Date	Check if self-empolyed	Preparer's ide (see instruction	ntıfyıng number ins)	
^o repa Jse O		Firm's name (or your firm's name (or your firm),	P	шС		EIN 🕨		
,55 0	y	address, and ZIP +	P O BOX 530095			_		
			BIRMINGHAM, AL 352530095	Phone no (205) 871-9973				

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

The AETFA's sole purpose is to provide funding support for APT and therefore it fully embraces the stated mission of APT as follows "Each of us is born with a natural desire to learn. We seek to explore our world and to understand life and the people around us. Alabama Public Television is a center of discovery for people of all ages. We motivate children to learn, empower students and teachers to succeed, and provide a lifelong path to knowledge."

2	Did the organization the prior Form 990	n undertake any significa or 990-EZ?	int program ser	vices during the year w		Yes ✓ No
	If "Yes," describe th	nese new services on Sc	hedule O			
3	Did the organization services?	n cease conducting, or m	nake sıgnıfıcant • • • •	changes in how it cond		Yes 🔽 No
	If "Yes," describe th	nese changes on Schedu	ile O			
4	Section 501(c)(3) a		ons and section	n 4947(a)(1) trusts are	rgest program services by ex required to report the amour rvice reported	
4a	(Code) (Expenses \$	5,433,814	ıncludıng grants of \$) (Revenue \$	4,965,240)
	plans that are correlate in this service eLearning facilitate on-line profest been trained to facilitate through its employed the educators and parents	ed to state teaching standards ing for Educators - funded by a ssional development courses to the courses online A total of 2 team of trainers and those of of pre-school children on how	s and searchable ba grant from the US for teachers As of ,531 on-line course partner organizatio to incorporate PB	ased on key learning concep Department of Education, t 9/30/10, 543 educators had ss were delivered to 37,208 ans whom AETFA's trainers ha S children's programs broadc	te containing educational video cont ts As of 9/30/10, 62,585 educators this program trains educators in ten been trained to develop on-line col teachers who completed them Early ave trained, conduct workshops thre ast by APT into a comprehensive le 28,394 children A total of 54,807 b	were enrolled and supported states how to develop and urses and 660 educators had or Childhood Learning - AETFA, bughout the entire state for arning experience During FY
4b	(Code) (Expenses \$	1,267,242	including grants of \$) (Revenue \$	2,875,859)
	Programming and Broadistributor APT also le which exceeds \$1 7 m (NPR) and several oth technical and equipme WLRH-FM The AETFA been exhausted for th	adcast Delivery APT leases the ases a smaller amount of its of illion annually APT leases the ier distributors. The AETFA ass ent costs of broadcasting televel assists with paying for these e year APT's association and i	e majority of its content needs from majority of its confusts directly with purision signals over the expenses by purch nembership in nati	ntent for television from the various other distributors. T tent for its FM-public radio st urchasing a portion of these he entire state on a 24 hour- asing needed equipment and onally recognized content dis	Public Broadcast System (PBS) and the AETFA assists directly with purchation (WLRH) located in Huntsville costs which exceeds \$239,000 ann. 7 day basis well exceeds \$3 millior dipaying vendor invoices directly wlatiful to the province of the content of the con	is a member affiliate of this asing a portion of these costs from National Public Radio lally The engineering, utility, a annually including that of the the state appropriation handle viewers and listeners in
4c	Education, Alabama St other industry specific APTPlus to supplement	cories and documentary special awards for its locally produced t the leased content from third	APT to produce tek ils Through 9/30/1 d television program I party distributors	.0, APT had received twelve ns AETFA also assists with the for that service During fisca	64,906) (Revenue \$ evel Such programs include Capito regional Emmys and twelve Telly a ne funding needed to produce educa I year 2010, a total of 155 learning or available through sharing arrang	wards as well as numerous ational video content for objects had been produced
	Other program see	rvices (Describe in Scho	adula O)			
44	o tilei piograffi sei					
4d	(Expenses \$	•	uding grants of:	\$) (Revenue \$)

Part TV	Check	klist o	f Reauire	d Sche	dules
	CIICCI	NIISL U	ı Keuune	u Schle	uuics

Par	t 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)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? 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.			
	◆ 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		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	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		No
15		15		No
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 U S ? <i>If "Yes," complete Schedule F, Part III</i>	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Νο
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		Νο
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		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		Νο
Ь	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νο
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 owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		N o
31	Part I	31		N o
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		Νο
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		Νο
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	Yes	
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		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νο
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

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

			Yes	No
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this			
L	return?	3a 3b		Νο
a	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		Νο
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	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		
I	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		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
n	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter			
	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			
L	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 126			

2112 11th Avenue South Suite 400

Birmingham, AL 35205 (205) 328-8756

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

Se	ection A. Governing Body and Management			
	ction At Governing body and rianagement		Yes	No
			103	110
1a	Enter the number of voting members of the governing body 1a 1	.2		
b	Enter the number of voting members that are independent 1b 1	. 2		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	s 4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	. 6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			No
ь	governing body?	. 7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the	. 76		NO
	year by the following		.,	
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	. 8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal			
ке	evenue Code.)			
10-	December our mention have local about on humanian an officiation?	10a	Yes	No No
	Does the organization have local chapters, branches, or affiliates?	IUa		I NO
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form	n ⁷ 11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give ris to conflicts?	e 12b		No
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	. 13	Yes	
14	Does the organization have a written document retention and destruction policy?	. 14		No
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	Yes	
	Other officers or key employees of the organization	15b	Yes	
_	If "Yes" to line a or b, describe the process in Schedule O (See instructions)	100	1 00	
16-	Did the organization invest in contribute access to or participate in a fourt venture or cimilar arrangement with			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?			
<u> </u>		16b		
	List the States with which a convictible Form 000 is required to be filed.			
17	List the States with which a copy of this Form 990 is required to be filed.			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you 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 interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of	the ora:	anizatioi	n 🕨
	Pauline Howland	orge		

Part VIII 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, and current key employees 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Highest compensated amployee Key employee Officer Institutional Trustee or director		Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
See add'l data										

		rage
222	270	67.57

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►1

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
Education Development Center Inc 55 Chapel Street Newton, MA 02458	Educational Materials	852,089
Boston College 140 Commonwealth Avenue Chestnut Hill, MA 02467	Educational Materials	651,503
WLWPBS 39 123 Sesame Street Bethleham, PA 18015	Educational Materials	320,281
E-Mints National Center 325 Clark Hall Columbia, MO 65211	Educational Materials	280,610
West Virginia Department of Education 1900 Kanawha Blvd E Building 6 B204 Charleston, WV 25305	Educational Materials	269,311
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►12	who received more than	

Form 9		,						Page 9
Part \	<u>/1111</u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
# st	1a	Federated camp	paigns 1a					
를 를 하는 기를 하는 기를 이	ь	Membership du	es 1b					
કે.ઉ	c	Fundraising eve	ents 1c					
≝ ≅	d	Related organiz	rations 1d	1,035,000				
E, S	e	Government grants	s (contributions) 1e					
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no	ons, gifts, grants, and 1f ot included above butions included in	647,883				
Cont	h		s 1a-1f	•	1,682,883			
ë				Business Code				
Program Serwce Revenue	2a	US Department of		515,100	4,457,961	4,457,961		
8	Ь	Corporation for Pul		515,100	2,556,703	2,556,703		
MCA	°	State of Alabama [Dept	515,100	360,000	360,000		
Š	d	Other		515,100	75,015	75,015		
an I	e	Maryland Public Te		515,100	33,855	33,855		
ؼٙ	*	All other progra	am service revenue					
_ <u>~</u>	g	Total. Add lines	s 2a-2f	▶	7,483,534			
	3		ome (including dividen	. +	2.002			2.002
	١,		ar amounts) stment of tax-exempt bond	-	2,883			2,883
	4 5			· · · · · · · · · · · · · · · · · · ·				
		Noyunties :	(ı) Real	(II) Personal				
	6a	Gross Rents	,					
	ь	Less rental expenses						
	c	Rental income						
	d	or (loss) Net rental incoi	me or (loss)					
			(ı) Securities	(II) O ther				
	7a b	Gross amount from sales of assets other than inventory Less cost or						
		other basis and sales expenses						
	c	Gain or (loss)						
	d		s)					
une	8a	Gross income for events (not included) \$	luding 					
Other Revenue		of contributions See Part IV, lin	reported on line 1c) ne 18 a					
ĭţ.	b		penses b					
0	c 9a		(loss) from fundraising	events F				
) Ja	See Part IV, lin	rom gaming activities le 19 a					
	b c		penses b (loss) from gaming activ	vities				
	10a	Gross sales of returns and allo	. ,					
	ь	Less cost of go	oods sold b					
	С		(loss) from sales of inve	entory 🕨				
		Miscellaneous		Business Code				
	11a	APT Foundation	n	515,100	555,064	555,064		
	Ь	Blue Cross/Blu	e Shield	515,100	15,000	15,000		
	C	University of A		515,100	13,773	13,773		
	d		ue		9,279	9,279		
			S 11a-11d	•	593,116			
	12	lotal revenue.	See Instructions	▶[9,762,416	8,076,650	0	2,883

	990 (2009)				Page 10		
Par	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) but are not required to complete columns (B), (C), and (D).						
			(B), (C), and	(D).	(D)		
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses		
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV , line 21 $$	64,906	64,906				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	15,500	15,500				
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, trustees, and key employees	297,490	83,019	128,065	86,406		
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$						
7	Other salaries and wages	1,809,193	1,248,968	143,395	416,830		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	45,361	27,726	7,101	10,534		
9	Other employee benefits	377,588	230,794	59,107	87,687		
10	Payroll taxes	167,408	102,325	 	38,877		
11	Fees for services (non-employees)						
a	Management						
b	Legal	27,426		27,426			
c	Accounting	850		850			
d	Lobbying	9,571	9,571	030			
e	Professional fundraising See Part IV, line 17	3,3,1	3,3,1				
f	Investment management fees						
g .	Other	236,479	203,460	32,924	95		
12	Advertising and promotion	42,073	42,073	 			
13	Office expenses	140,210	33,781	90,101	16,328		
14	Information technology	88,680	78,109	5,088	5,483		
15	Royalties	33,333	, 0,103	3,000	3,.03		
16	Occupancy	20,145	20,145				
17	Travel	161,360	134,955	+ + +			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	101,500	154,955	20,403			
19	Conferences, conventions, and meetings	47,627	37,840	8,325	1,462		
20	Interest	17,027	37,640	0,323	1,102		
21	Payments to affiliates	1,349,017		1,349,017			
22	Depreciation, depletion, and amortization	76,452		76,452			
23	Insurance	53,503		53,503			
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)						
а	eLearning Subcontractor	3,634,462	3,634,462				
b	Production-On-Air/Web	881,064	881,064				
С	Stipends for eLearning	325,617	325,617				
d	Education Materials for	280,367	280,367				
е	Engineering Expense	152,881	152,881				
f	All other expenses	3,448			3,448		
25	Total functional expenses. Add lines 1 through 24f	10,308,678	7,607,563	2,033,965	667,150		
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						

Pa	rt X	Balance Sheet					<u>-</u>
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			1,400	1	1,400
	2	Savings and temporary cash investments			856,527	2	725,855
	3	Pledges and grants receivable, net			1,112,032	3	1,351,260
	4	Accounts receivable, net			78,060	4	93,337
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	, key e	mployees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under sepersons described in section 4958(c)(3)(B) Complete Part II o		1958(f)(1)) and			
		Schedule L				6	
Assets	7	Notes and loans receivable, net				7	
8	8	Inventories for sale or use		8			
⋖	9	Prepaid expenses and deferred charges			48,699	9	36,735
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	2,223,579			
	ь	Less accumulated depreciation	10b	516,683	1,739,361	10c	1,706,896
	11	Investments—publicly traded securities			4,505,496	11	4,171,927
	12	Investments—other securities See Part IV, line 11		•		12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11	13,525	15	10,470		
	16	Total assets. Add lines 1 through 15 (must equal line 34)	8,355,100	16	8,097,880		
	17	Accounts payable and accrued expenses .			1,221,386	17	1,309,685
	18	Grants payable				18	
	19	Deferred revenue	79,545	19	63,123		
_	20	Tax-exempt bond liabilities				20	
jes	21	Escrow or custodial account liability Complete Part IV of Schedule	eD.	•		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Lia		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			1,300,931	26	1,372,808
es		Organizations that follow SFAS 117, check here ▶	lete lin	es 27			
uc	27	Unrestricted net assets			6,458,482	27	6,095,542
- E	28	Temporarily restricted net assets			119,885	28	153,728
Fund Balance	29	Permanently restricted net assets			475,802	29	475,802
u,		Organizations that do not follow SFAS 117, check here ▶ an	d comp	let e	·		
or F		lines 30 through 34.	-				
8	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .				31	
	32	Retained earnings, endowment, accumulated income, or other fu	nds			32	
Net	33	Total net assets or fund balances			7,054,169	33	6,725,072
_	34	Total liabilities and net assets/fund balances			8,355,100	34	8,097,880

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
C	If "Yes," to 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	2c	Yes	
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 Separate basis Consolidated basis Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Public Charity Status and Public Support

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

Employer identification number

	na Educi ation Au	ational Television thority						63-6050	805	
Pa	rt I	Reason for P	ublic Charity Sta	atus (All o	rganizatio	ons must con	nnlete th			
			ate foundation becau						inoti detioi	10
1	_	A church, convention of churches, or association of churches section 170(b)(1)(A)(i).								
2	_	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)								
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4	<u>'</u>		ch organization opera						/1\/A\/iii\	Enterthe
•	'	hospital's name, o		ateu III conju	metion wit	n a nospital de	scribed iii	Section 170(D)	(1)(4)(111)	. Litter the
5	Γ	An organization o	perated for the benef	fit of a collec	je or unive	rsity owned or	operated	by a governmer	ntal unit de	scribed in
		section 170(b)(1)	(A)(iv). (Complete	Part II)						
6	\vdash	A federal, state, o	r local government o	or governme	ntal unit de	escribed in sec	tion 170(I	o)(1)(A)(v).		
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II)								
8	Γ	A community trus	t described in sectio	n 170(b)(1)	(A)(vi) (Complete Part	II)			
9	\vdash	An organization th	nat normally receive:	s (1) more t	:han 331/3	% of its suppo	rt from co	ntributions, mei	mbership fe	es, and gross
		receipts from acti	vities related to its	exempt func	tıons—sub	ject to certain	exception	s, and (2) no m	ore than 33	31/3% of
		ıts support from g	ross investment inc	ome and unr	elated bus	ıness taxable ı	ıncome (le	ss section 511	tax) from	businesses
		acquired by the oi	rganızatıon after Jun	e 30,1975	See sect ic	on 509(a)(2).(Complete	Part III)		
10	_		rganızed and operate							
11	굣	An organization o	rganızed and operate cly supported organı	ed exclusive	ly for the b	enefit of, to pe	rform the	functions of, or		
		•	ribes the type of sup b Type	porting orga	nı <u>za</u> tıon aı		ies 11e th	rough 11h	_	pe III - Other
e	Γ		box, I certify that the tion managers and o	-						
f			received a written o	determinatio	n from the	IRS that it is a	a Type I, 1	ype II or Type	III suppor	ting organization,
g		Since August 17,	2006, has the organ	nization acce	epted any	gıft or contrıbu	tion from a	any of the		•
		following persons? (i) a person who o	lirectly or indirectly	controls, eıt	her alone (or together with	n persons	described in (ii)	Yes No
		and (III) below, the	governing body of t	he the supp	orted orga	nızatıon?	·	•		1g(i) No
		(ii) a family memb	per of a person desci	ribed in (i) al	oove?					Lg(ii) No
			olled entity of a perso			ı) above?				g(iii) No
h		• •	ing information abou		• • • •	•				,
			(iii) Type of	(iv) Is th		(v)		(vi)		
	(i)		organization	organizat	ion in	Did you not organizat	•	Is the organizati		(vii)
	ame of oported	(ii) EIN	(described on lines 1-9 above	col (ı) lıs		col (ı) of		col (ı) orga		A mount of
	nizatio		or IRC section	your gove docume	_	suppor	•	ın the U		support?
			(see	docume	1					_
			ınstructions))	Yes	No	Yes	No	Yes	No	
Alabama Educational Television Commission		636000619	6	Yes		Yes		Yes		10,308,678
					ļ					
					-					
		+			+					+
					+		1			-

10,308,678

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	֥ <i>)</i>		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	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) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support	T			1	T	I
cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
_	purpose Gross receipts from activities that						
3	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 Amounts included on lines 1, 2,						
/a	and 3 received from disqualified				1		
	persons						
b	A mounts 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						
	rom line 6) ction B. Total Support						
	ndar year (or fiscal year beginning						
cuic	in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar						
	sources						
ь	Unrelated business taxable						
	income (less section 511 taxes) from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
13	IV) Total support (Add lines 9, 10c,						
13	11 and 12)						
14	First Five Years If the Form 990 is for	or the organizat	ion's first, second	l, thırd, fourth, or	fifth tax year as a	a 501(c)(3) orgar	
	check this box and stop here						► □
Se	ction C. Computation of Publ	ic Support P	ercentage				
15	Public Support Percentage for 2009			13 column (f))		15	
16	Public support percentage from 200	-		.,,		16	
	Table support personage nom 200	o o o modulo m, n	arc 111, mrs 15			10	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ae			
17	Investment income percentage for 2				n (f))	17	
18	Investment income percentage from	•		•		18	
	33 1/3% support tests—2009. If the		•		d line 15 is more		line 17 is not
1.7a	more than 33 1/3%, check this box a					u.ii 23 1/3/0 dill	. IIIC 17 13 110t
	organization	•厂		•			
ь	33 1/3% support tests—2008. If the	organization di	d not check a box	on line 14 or line	e 19a, and line 16	5 is more than 33	1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	515,100	4,457,961	4,457,961		
	515,100	2,556,703	2,556,703		
	515,100	360,000	360,000		
Other	515,100	75,015	75,015		
	515,100	33,855	33,855		

DLN: 93493136013481

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Political Campaign and Lobbying Activities

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If th	e organization answered "Yes	s," to Form 990, Part IV, Line 4, o	or Form 990-E∠, Pa	art VI, line 47 (Lobi	oying <i>F</i>	Activit	ies), ther	1
	` /` /	have filed Form 5768 (election unde	` ''	•				
Se	ection 501(c)(3) organizations that	have NOT filed Form 5768 (election	under section 501(h)) Complete Part II-	B Don	ot con	nplete Part	II-A
If th	e organization answered "Yes	s," to Form 990, Part IV, Line 5 (I	Proxy Tax) or Forn	n 990-EZ, line 35a (regard	ding p	roxy tax)	, then
Se	ection 501(c)(4), (5), or (6) organiz	ations Complete Part III						
	me of the organization			Employ	erıden	tıfıcat	ıon numbe	r
	Alabama Educational Television Foundation Authority 63-6050895							
	<u> </u>	ganization is exempt unde	r section 501(c			ora	anizatio	n
	<u> </u>		•	-		o.g.	anne de cio	•••
1	Provide a description of the org	anızatıon's dırect and ındırect poli	tıcal campaıgn actı	vities in Part IV				
2	Political expenditures				-	\$		
3	Volunteer hours							
Par	Complete if the org	ganization is exempt unde	r section 501(c	:)(3).				
1	Enter the amount of any excise	tax incurred by the organization u	nder section 4955		•	\$		
2	Enter the amount of any excise	tax incurred by organization mana	gers under section	4955	•	\$		
3	If the organization incurred a s	ection 4955 tax, did it file Form 47	20 for this year?				☐ Yes	┌ No
4a	Was a correction made?						☐ Yes	☐ No
ь	If "Yes," describe in Part IV							
Par	t I-C Complete if the org	ganization is exempt unde	r section 501(c) except section	n 501	L(c)(3).	
1	Enter the amount directly expe	nded by the filing organization for s	section 527 exemp	t function activities	•	\$		
2		rganızatıon's funds contributed to	other organizations	for section 527				
	exempt funtion activities				•	\$		
3	Total exempt function expendit	ures Add lines 1 and 2 Enter her	e and on Form 1120	D-POL, line 17b	F	\$		
4	Did the filing organization file F	orm 1120-POL for this year?					☐ Yes	┌ No
5	were made For each organizati contributions received that wer	d employer identification number (on listed, enter the amount paid from the promptly and directly delivered the state (PAC) If additional space is	om the filing organiz o a separate politic	ation's funds Also al organization, suc	enter t	he am	ount of po	litical
	(a) Name	(b) Address	(c) EIN	(d) A mount paid	from	(e)	A mount of	political

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

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing Organization's Totals	(b) Affiliated Group Totals		
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	ıbyıng)			
b	Total lobbying expenditures to influence a legisla					
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000 \$1,000,000					
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either line section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

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

		(a	1)	(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		Νo		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
е	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		1,950	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		9,571	
i	Other activities? If "Yes," describe in Part IV		Νo		
j	Total lines 1c through 1i			11,521	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo		
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

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

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

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

	Current year	2
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
1	Dues, assessments and similar amounts from members	

- **b** Carryover from last year
- Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
- If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?
- Taxable amount of lobbying and political expenditures (see instructions)

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Ret urn Reference	Explanation
, · · · · · · · · · · · · · · · · · · ·	Activities	The AETFA is a member of the American Public Television Systems (APTS) located in Washington, D C in which of a part of the annual membership dues is directed to APTS' related lobbying organization APTS Action, Inc None of the funds spent by APTS Action, Inc are used to contribute to the campaigns of political candidates

2b

2c 3

4

5

DLN: 93493136013481

OMB No 1545-0047

Open to Public

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, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Alaba	e of the organization ma Educational Television dation Authority	·		loyer identification number
Par	·			6050895 or Accounts. Complete if the
	organization answered Tes to Form 99	(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year			,
	Aggregate contributions to (during year)			
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advi		nor adv	rsed ∀es
	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit		· •	
ar	Conservation Easements. Complete	ıf the organization answered "Yes"	to Forr	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreati Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	on or pleasure) Preservation of a Preservation of a	certifie	ically importantly land area d historic structure onservation
	,			Held at the End of the Year
a	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
:	Number of conservation easements on a certified his	storic structure included in (a)	2c	
i	Number of conservation easements included in (c) a	cquired after 8/17/06	2d	
	Number of conservation easements modified, transfe	•	ed by th	o organization during
	the taxable year 🗠	arrea, released, extinguished, or terminat	.cu by ti	ic organization daring
	Number of states where property subject to conserva	ation easement is located 🛌		
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		ndling of	violations, and Yes No
	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easei	ments d	uring the year ►
	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easemen	ts durın	g the year 🟲 \$
	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of se	ction	┌ Yes
	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financia	•	·
art	Organizations Maintaining Collection Complete if the organization answered '		or Ot	her Similar Assets.
	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir	116, not to report in its revenue statem for public exhibition, education or resea	rch ın fu	
	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research		•
	(i) Revenues included in Form 990, Part VIII, line 1			► \$
	(ii) Assets included in Form 990, Part X			<u></u>
	If the organization received or held works of art, histofoliowing amounts required to be reported under SFA		for finan	cial gain, provide the

Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	<u>llections of Art</u>	, His	torical Tr	easu	ires, or C	<u> the</u>	<u>r Similar As</u>	<u>sset</u>	:S (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	e following t	hat ar	e a sıgnıfıc	ant u	se of its collec	tion		
а	Public exhibition		d	┌ Loan	orexc	hange prog	rams				
ь	Scholarly research		e	┌ O ther							
с	Preservation for future generations										
4	Provide a description of the organization's c Part XIV	ollections and expla	ın hov	v they furthe	rthe	organizatioi	ı's ex	cempt purpose	ın		
5	During the year, did the organization solicit assets to be sold to raise funds rather than			•				nılar	┌ ʏ	'es	┌ No
Pai	rt IV Escrow and Custodial Arrang					n answere	d "Y	es" to Form	990,		
	Part IV, line 9, or reported an ar			•							
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?				tions	or other ass	ets	not	┌ ¥	'es	Г No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng table		г					
_						}		A	moun	<u></u>	
c	Beginning balance					}	1c				
d	Additions during the year						1d				
e	Distributions during the year					}	1e				
f	Ending balance					L	1f				
2a	Did the organization include an amount on F		e 21?						Y	es	No
	If "Yes," explain the arrangement in Part XIV			1 1111/-	- 0 - 1 -	F 000		171/1 10			
Ра	rt V Endowment Funds. Complete	(a)Current Year		<u>wered "Ye</u>)Prior Year				TIV, IINE IU.)Three Years Back		Four Ye	ears Back
1a	Beginning of year balance	1,501,284	(5	1,464,85		Wo Tears Back	1	, mee rears back	1		ars back
ь	Contributions			89,80	2				T		
С	Investment earnings or losses	85,295		-53,37	3						
d	Grants or scholarships										
e	Other expenditures for facilities										
_	and programs						+		┼		
f	Administrative expenses	1,586,579		1,501,28	1		+		\vdash		
g	End of year balance			1,301,20	*						
2	Provide the estimated percentage of the year		as								
а	Board designated or quasi-endowment	70.000 %									
Ь	Permanent endowment - 30.000 %										
с -	Term endowment ► 0 %										
3а	Are there endowment funds not in the posse organization by	ssion of the organiza	ation t	nat are nei	i and a	idministere	a for	tne	Γ	Yes	No
	(i) unrelated organizations							За	-	Yes	
	(ii) related organizations							За	(ii)		Νο
Ь	If "Yes" to 3a(II), are the related organization							3	ВЬ		
4	Describe in Part XIV the intended uses of th										
Pa	t VI Investments—Land, Building	s, and Equipme	nt. S					I	$\overline{}$		
	Description of investment			(a) Cost or basis (inves		(b)Cost or o basis (oth		(c) Accumulate depreciation	d ((d) Boo	ok value
1a	Land		•			609	9,596		\perp		609,596
b	Buildings		•			1,32	1,352	328,5	90		992,762
С	Leasehold improvements		•			10	5,321	3,6	585		12,636
d	Equipment		•			3:	1,600	9,1	185		22,415
е	Other					244	1,710	175,2	23		69,487

1,706,896

Part VII Investments—Other Securities. Sec	e Form 990, Part X, line 17	
(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 derivatives		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	*	
Part VIII Investments—Program Related. Se	ee Form 990, Part X, line	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
——————————————————————————————————————	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	▶ Inc. 1E	
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
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Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, (a) Descri	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, (a) Description (b) Should equal Form 990, Part X, col.(B) line	ine 15.	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part	Ine 15. Iption 15.) X, line 25.	
Part IX Other Assets. See Form 990, Part X, (a) Description (b) Should equal Form 990, Part X, col.(B) line	ine 15.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
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Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	15.) X, line 25. (b) A mount	

Schedule D (Form 990) 2009

Pai	13XII Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	its	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	9,762,416
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	10,308,678
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-546,262
4	Net unrealized gains (losses) on investments	4	217,165
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	217,165
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-329,097
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	8,686,939
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	514,588
3	Subtract line 2e from line 1	3	8,172,351
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	1,590,065
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	9,762,416
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	9,257,083
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
Ь	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	297,423
3	Subtract line 2e from line 1	3	8,959,660
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
Ь	Other (Describe in Part XIV)	4-	1 240 010
c E	Add lines 4a and 4b	4c	1,349,018
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	10,308,678

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	The earnings from restricted endowment funds are intended to be used to directly support the programmatic services of APT including purchasing equipment needed for local production efforts but not for administrative or overhead expenses. Some of the endowment funds are restricted by the donor to be used for specific programmatic purposes and these restrictions are documented and adhered to. The AETFA has also established quasi endowments for investing and spending sizable donations that come to the AETFA as unrestricted. The intention is for the earnings to be spent directly for the programmatic services of APT. The principle can only be spent upon the recommendation of the Executive Director for a specific purpose and approved by majority vote of the Board. The AETFA adopted an investment and spending policy in 2002 for its endowments in which an investment consultant was employed to invest the funds in accordance with an asset allocation plan approved by the AETFA Investment Committee. The spending policy provides a methodology for the amount of earnings that can be spent. This methodology averages out the highs and lows of the stock market over 16 rolling quarters. Only 50% of this amount can then be spent after adjusting for inflation. The intention is to preserve endowment principle at current dollar values and to grow the principal at a modest rate while allowing a portion of the earnings to support the intended or designated programmatic services.
Part X	Description of Uncertain Tax Positions Under FIN 48	Effective October 1, 2009, APT implemented the new accounting requirements associated with uncertainty in income taxes using the provision of Financial Accounting Standards Board (FASB) ASC 740, Income Taxes As of February 25, 2011 the Company had no uncertain tax positions that qualify for either recognition or disclosure in the financial statements
Part XII, Line 4b - Other Adjustments		Intercompany Transfers 1590065
Part XIII, Line 4b - Other Adjustments		Intercompany Transfers 1349018

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Schedule I

(Form 990)

DLN: 93493136013481 OMB No 1545-0047

Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Department of the Treasury Attach to Form 990 **Inspection** Internal Revenue Service Name of the organization Employer identification number Alabama Educational Television 63-6050895 Foundation Authority Part I General Information on Grants and Assistance 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 Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (a) Name and address of (c) IRC Code section (e) A mount of non-(f) Method of **(b)** EIN (d) A mount of cash (g) Description of (h) Purpose of grant organization ıf applıcable arant cash valuation non-cash assistance orassistance (book, FMV, appraisal or government assistance other) 636001138 501(c)(3) 64,906 Production Grant The University of Alabama Center for Public Television and Radio201 Reese Phifer Hall Box 870172 Tuscaloosa, AL 35487

Grants and Other Assistance to Organizations,

	(; ······/ =
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
College Scholarships	7	15,500			
See Additional Data Table					

Paire IV Suppi	iementai information. Con	npiete this part to provide the information required in Part 1, line 2, and any other additional information.	
Ident if ier	Return Reference	Explanation	

Compensation Information

DLN: 93493136013481

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Internal Revenue Service

Department of the Treasury

Name of the organization

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Alat	pama Educational Television			• •			
Fou	ndation Authority			63-6050895			
Pa	rt I Questions Regarding Compensation)					
						Yes	Νo
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III						
	First-class or charter travel	Г	Housing allowance or residence for	personal use			
	Travel for companions		Payments for business use of perso	nal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiati	on fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauf	feur, chef)			
b	If any of the boxes in line 1a are checked, did the orgreimbursement orprovision of all the expenses descr			•	1b		
2	Did the organization require substantiation prior to re officers, directors, trustees, and the CEO/Executive				2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the Compensation committee						
	Independent compensation consultant	Γ	Compensation survey or study				
	Form 990 of other organizations	▽	Approval by the board or compensa	tion committee			
4	During the year, did any person listed in Form 990, Por a related organization	art V I	I, Section A, line 1a with respect to t	ne filing organization			
а	Receive a severance payment or change-of-control p	ayme	nt?		4a		Νo
b	Participate in, or receive payment from, a supplemen	tal nor	nqualified retirement plan?		4b		Νo
c	Participate in, or receive payment from, an equity-ba	sed co	ompensation arrangement?		4с		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	vide t	he applicable amounts for each item i	n Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus		<u>-</u>				
5	For persons listed in form 990, Part VII, Section A, I compensation contingent on the revenues of	ıne 1a	, did the organization pay or accrue a	ıy			
а	The organization?				5a		Νo
b					5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, I compensation contingent on the net earnings of	ıne 1a	, did the organization pay or accrue a	ıy			
а	The organization?				6a		Νo
Ь	Any related organization?				6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," do			n-fixed	7		No
8	Were any amounts reported in Form 990, Part VII, passible to the initial contract exception described in in Part III				_		N
۵		rob	able procumption procedure describe	d in Poquiations	8		No
9	If "Yes" to line 8, did the organization also follow the	reputt	avie presumption procedure describe.	u iii keyulations	1	1	ı

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of (i) Base compensation	f W-2 and/or 1099-MISC compensation (ii) Bonus & (iii) Other reportable compensation		(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
Allan A Pizzato	(I) (II)	7,200 131,140	0	_ =	0 15,603	0 9,564		

Part III Supplemental Information

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

]	Ident if ier	Ret urn Ref erence	Explanation
]	Ident if ier	Reference	Explanation

Schedule J (Form 990) 2009

Software ID: **Software Version:**

EIN: 63-6050895

Name: Alabama Educational Television

Foundation Authority

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493136013481

OMB No 1545-0047

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

Supplemental Information to Form 990

Name of the organization Alabama Educational Television Foundation Authority

SCHEDULE 0

Department of the Treasury

Internal Revenue Service

(Form 990)

Employer identification number

63-6050895

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The information contained in the AETFA Form 990 is prepared jointly by the organization's Senior Accountant and CFO and provided to an independent tax preparer. Upon receipt of the completed Form 990 from the preparer, it is reviewed by the Senior Accountant and CFO for completeness, accuracy and continuity. It is then forwarded to the Executive Director for final review and approval. Once it is approved by the Executive Director, the CFO signs the Form 990. The return is then provided to the Board of Directors and filed with the IRS.

ldentifier I	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		The employees of the AETFA have passw ord access to an employee intranet site that has an on-line employee guide that contains the conflict of interest policy. New employees are required to review all organizational policies in the employee guide within two weeks of employment and sign a statement that they have review ed and understand these policies. All current employees are required to review the employee guide annually in January of each year and sign a statement that they have done so. The Board of Directors adopted the conflict of interest policy by majority vote and is periodically provided a hard copy of the policy in their board materials. New board members receive a hard copy of the policy in their board books provided immediately upon their appointments. The Board also adopted a confidential reporting system (more popularly known as a whistle-blower policy) available to all employees which is described in detail in the employee guide. This system provides a toll-free number for employees to call if they suspect any impropriety by managers and executives of the company in the form of misuse of company assets or that of other employees that they may feel have not been addressed appropriately. The phone call can be anonymous and goes to a third party provider that takes the information and then relays it directly to a Board member who has accepted responsibility for handling such employee concerns. It is then the responsibility of that Board member to take appropriation action depending on the nature of the concern. Since the implementation of the confidential reporting system in 2007, no complaints or concerns have been received.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		Compensation for officers and key employees is done in accordance with the State of Alabama Personnel rules in order to be consistent with the process followed by all employees of AETC. However, this is not mandated by the State for AETFA. The AETFA chooses to follow the same rules so that there is one process for all employees that are consistent, fair and equitable. Therefore, all officers and key employees receive a six-month and an annual performance review by their immediate supervisor that has been previously reviewed and approved by a reviewing officer. The performance review is documented on a standardized form and key tasks are rated on the annual review. Based on the final score, the employee may receive a merit increase within the range allowable by the State of Alabama. When the State provides AETC employees with a cost of living raise, the same percentage increase is provided to AETFA employees, including officers and key employees.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The AETFA is a public corporation and is therefore subject to the Alabama Open Records Act of 1915. All documents of the corporation must be made available to any member of the public requesting to see them. The requestor may physically examine these documents during regular office hours at the corporate headquarters located in Birmingham, Alabama. Reasonable advance notice is required in order for staff to have sufficient time to pull the requested documents from the public file maintained by APT and to reserve space for the requestor to conduct their examination.

ldentifier	Return Reference	Explanation
Form 990, Part 1, Line 1	Additional information regarding mission statement	Funds are raised primarily through grants for television and educational services solicited from local, state and national public and private organizations including other foundations. Fundraising efforts for the radio station are solicited from individuals and businesses. Solicitation from individuals is conducted through direct mail, through over-the-air pledge drives that are broadcast at various times during the year, and through face-to-face meetings. The AETFA has successfully competed for grants at the local, state and national level, the largest being a multi-year \$22 million grant awarded in 2006 from the US Department of Education for on-line professional development for teachers in eight states including Alabama.

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DLN: 93493136013481

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Department of the Treasury Internal Revenue Service

Name of the organization Alabama Educational Television Foundation Authority

Employer identification number 63-6050895

Part I Identification of Disregarded Entities (Complete	ıf the organization	answered "Yes" o	n Form 990, Par	t IV, line 33.)	
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizat	tions (Complete ıf	the organization a	nswered "Yes" o	n Form 990, Part	IV, line 34 because it had one

or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	(f) Direct controlling entity			
Alabama Educational Television Commission								
2112 11th Avenue South Suite 400	Educational Television	AL	Governmental Entity					
Birmingham, AL 35205 63-6000619								
The APT Foundation								
2112 11th Avenue South Suite 400	Fundraising	AL	501(c)(3)	Line 11a, I				
Bırmıngham, AL 35205 26-3740432								
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y Schedule R (Form 990) 2009								

(a) lame, address, and EIN of related organization (b) Primary activity		re related organizations trea (c) Legal domicile (state or foreign country) (d) Direct controlling entity		(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	Share of end	(g) Share of end-of-year assets		ortionate tions?			(j) General or managing partner?	
								Yes	No			Yes	No
												+	
				s a Corporation on treated as a corpo				nswer	ed "Y	es" on F	orm 990, P	art IV,	
	cause it flad offe t		elated organizations				(f))		(-)	(5)		
(a) Name, address, and EIN o	f related organization	(b) Primary a	ctivity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	Share of total income		Sh end-	(g) nare of -of-year ssets	(h) Percentag ownership		
									1				

(6)

176	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV	, iiile 34, 35, 0f 36.)		T v/	T			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		_	Yes	No			
	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-	·IV?		1	No			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity b Gift, grant, or capital contribution to other organization(s)								
b Gift, grant, or capital contribution to other organization(s)								
C	Gift, grant, or capital contribution from other organization(s)		1c	Yes	<u> </u>			
d	Loans or loan guarantees to or for other organization(s)		1d		No			
е	Loans or loan guarantees by other organization(s)		1e		No			
f	Sale of assets to other organization(s)		1f		No			
g	Purchase of assets from other organization(s)		1 g		No			
h	Exchange of assets		1h		No			
i	Lease of facilities, equipment, or other assets to other organization(s)		1 i		No			
j Lease of facilities, equipment, or other assets from other organization(s)								
k	Performance of services or membership or fundraising solicitations for other organization(s)		1k		No			
ı	Performance of services or membership or fundraising solicitations by other organization(s)		11		No			
m Sharing of facilities, equipment, mailing lists, or other assets								
n	Sharing of paid employees		1 n	Yes				
o	Reimbursement paid to other organization for expenses		10		No			
p	Reimbursement paid by other organization for expenses		1р		No			
q	Other transfer of cash or property to other organization(s)		1 q	Yes				
r	O ther transfer of cash or property from other organization(s)		1r		No			
	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationsl	hips and transaction thres	sholds					
	(a) Name of other organization (b) Transaction type(a-r)							
1) /	Alabama Educational Television Commission	М		6	57,882			
2) /	Alabama Educational Television Commission	Q		1,34	9,017			
3) 1	The APT Foundation	С		1,03	5,000			
4) 1	The APT Foundation	N		55	5,064			
5)								

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) neral or naging rtner?	
			Yes	No		Yes	No		Yes	N	
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Software ID: Software Version:

EIN: 63-6050895

Name: Alabama Educational Television

Foundation Authority

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

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other compensation	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	from the organization and related organizations	
Joseph B Mays Jr Board Member	1 00	Х						0	0	0	
Gregory O Griffin Sr Board Member	1 00	X						0	0	0	
Robert E Nesbitt Board Member	1 00	х						0	0	0	
John H Mosley Board Member	1 00	Х						0	50	0	
Dannetta K Thornton O wens Board Member	1 00	х						0	50	0	
Belva M Williams Board Member	1 00	х						0	50	0	
Thomas E Jackson Board Member	1 00	х						0	25	0	
Charles F Bowman Board Member	1 00	х						0	50	0	
Ferris W Stephens Board Member	1 00	х						0	0	0	
Gloria J Alexander Dennard Board Member	1 00	х						0	0	0	
Vanzetta Penn McPherson Board Member	1 00	х						0	0	0	
Harvey Lester Barnett Board Member	1 00	Х						0	25	0	
Allyson L Edwards Board Member	1 00	х						0	0	0	
Allan A Pizzato President	40 00			х				7,200	131,140	25,167	
Pauline Howland Chief Financial Officer	40 00			х				6,000	101,889	21,687	
John Brady VP of Development	40 00			х				42,475	0	3,420	
Charles Grantham Chief Operating Oficer	40 00			х				114,865	0	2,837	
Nancy P Hill VP of Education	40 00			х				54,889	0	4,707	
Gary A Stokes VP of Development	40 00			х				81,068	0	8,663	
Cindy F Kirk VP of Education	40 00			х				18,447	0	1,094	

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
eLearning Subcontractor	3,634,462	3,634,462		
Production-On-Air/Web	881,064	881,064		
Stipends for eLearning	325,617	325,617		
Education Materials for	280,367	280,367		
Engineering Expense	152,881	152,881		