Form **990**

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)

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Α			- t					2005
_			or tax year beginning Jul 1	, 2004, and	ending Jun 3			, 2005 ntification Number
В	Check	f applicable: Please use	C Name of organization					
	Ac	dress change IRS label or print	Nashville Public Tel					0928
	Na	me change or type.	Number and street (or P.O. box if ma	il is not delivered to street addr)	Room/suite	E Telep	hone nu	ımber
	In	tial return specific	161 Rains Avenue					259-9325
	Fi	instruc- nal return tions.	City, town or country	State ZIF	code + 4	F Accou	unting od:	Cash X Accrual
	Ar	nended return	Nashville	TN 3	7203-5330		Other (s	pecify) ►
	Ap	plication pending • Secti	on 501(c)(3) organizations and 4	947(a)(1) nonexempt	H and I are not applic	able to sec	tion 527	7 organizations.
		chari	table trusts must attach a comp	leted Śchedule A	H (a) Is this a grou	p return for	affiliate	es? Yes X No
		` -	n 99 0 or 99 0-EZ).		H (b) If 'Yes,' enter			
G	Web	site: ► http://www	wnpt.net		H (c) Are all affilia			
J	Orga	nization type			(If 'No,' attac			
	(chec	k only one)	X 501(c) 3 4 (insert no.)	4947(a)(1) or 527	H (d) Is this a sepa	rate return	filed by	an
K			nization's gross receipts are norr		organization			multimen2
	\$25,0	000. The organization news	eed not file a return with the IRS ge in the mail, it should file a retu	; but if the organization	I Group Exe			103 110
		e states require a comp		im williout iirianciai uata.				
		•		001 101				ation is not required 0, 990-EZ, or 990-PF).
L D-			, 8b, 9b, and 10b to line 12 ► 4,				01111 33	0, 330-12, 01 330-11).
Pa	rt I		nses, and Changes in Net		ices (See Instru	ctions)		
	1		ants, and similar amounts receive	İ	Ī			
						,145.		
	C	Government contribution	ons (grants)		649	,139.		
	a	Total (add lines 1a through 1c) (cash \$	4,235,241. noncash \$).			1 d	4,235,241.
	2	Program service reven	ue including government fees an	d contracts (from Part VII,	line 93)		2	592,460.
	3	Membership dues and	assessments				3	
	4	Interest on savings and	d temporary cash investments				4	12,823.
	5	Dividends and interest	from securities				5	
	6a	Gross rents		6	44	,492.		
			oss) (subtract line 6b from line 6				6c	44,492.
ь	7	•	me (describe ► See Othe	·)	7	7,426.
Ë	-			(A) Securities	(B) Othe	r 1	-	.,1200
REVENUE	8 a	Gross amount from sal	les of assets other	8:	` '			
U	h		sia and salas aynanaas	01				
E			ile)		_			
			nbine line 8c, columns (A) and (E	· · · · · · · · · · · · · · · · · · ·			8d	
			tivities (attach schedule). If any a			_	ou	
		•			ck liefe ·	_		
	а	Gross revenue (not inc			.1			
		•						
		•	other than fundraising expenses	<u></u>	•			
			om special events (subtract line				9 c	
			ry, less returns and allowances					
			ld		•			
			ales of inventory (attach schedule) (subtra	•		F	10 c	
	11	,	art VII, line 103)			-	11	8,749.
	12		es 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10				12	4,901,191.
E	13	•	n line 44, column (B))			F	13	4,225,232.
EXPENSES	14		eral (from line 44, column (C))			-	14	600,160.
E N	15	Fundraising (from line	44, column (D))				15	961,925.
S	16	-	(attach schedule)				16	
s	17	Total expenses (add li	nes 16 and 44, column (A))	<u></u>	· · · · · · · · · · · · · · · · · · ·		17	5,787,317.
Δ	18		the year (subtract line 17 from lir				18	-886,126.
ΝŜ	19	Net assets or fund bala	ances at beginning of year (from	line 73, column (A))			19	5,914,101.
N S E E T T	20		assets or fund balances (attach e				20	16,256.
s	21		ances at end of year (combine lir			F	21	5,044,231.

Form **8868** (Rev December 2004)

Application for Extension of Time to File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

	0011100	The a separate application for each return.		
If you are	filing for an Automatic 3-Month	Extension, complete only Part I and check this box		▶ 🛚 🖈
If you are	filing for an Additional (not auto	matic) 3-Month Extension, complete only Part II (o	n page 2 of this for	rm).
-	· ·	dy been granted an automatic 3-month extension of		-
Part I	Automatic 3-Month Extens	ion of Time - Only submit original (no co	pies needed)	
		atic 6-month extension – check this box and comp		▶□
		lers) must use Form 7004 to request an extension of	-	
Partnerships,	REMICs and trusts must use For	m 8736 to request an extension of time to file Form	n 1065, 1066, or 10	41.
below (6-mor extension, ins	nths for corporate Form 990-T filer	ed electronically if you want a 3-month automatic exects). However, you cannot file it electronically if you completed signed page 2 (Part II) of Form 8868. For	want the additional	(not automatic) 3-month
-	Name of Exempt Organization		E	mployer identification number
Type or				
print File by the	Nashville Public Tele	2-1740928		
due date for	Number, street, and room or suite number.	1.7		
filing your return. See	161 Rains Avenue,			
instructions.	City, town or post office. For a foreign addr	ess, see instructions.		state ZIP code
	Nashville			TN 37203-5330
Check type o	of return to be filed (file a separate	e application for each return):		
X Form 990	· · · · · ·	Form 990-T (corporation)	Form 4720	
Form 990)-BL	Form 990-T (section 401(a) or 408(a) trust)	Form 5227	
Form 990)-EZ	Form 990-T (trust other than above)	Form 6069	
Form 990)-PF	Form 1041-A	Form 8870	
Telephon If the orga If this is f check this the exten	or a Group Return , enter the organs box . ► If it is for part of the sion will cover.	FAX No. ► (615) 254-74 or place of business in the United States, check the anization's four digit Group Exemption Number (GE ne group, check this box . ► and attach a list were stated in the state	is box If thi vith the names and	is is for the whole group, EINs of all members
to file th	ne exempt organization return for calendar year 20 or	s for a Form 990-T corporation) extension of time the organization named above. The extension is fo, 2004, and endingJun30, 20, check reason: Initial return Final r	r the organization's	
3a If this a nonrefu	pplication is for Form 990-BL, 990 ndable credits. See instructions.	D-PF, 990-T, 4720, or 6069, enter the tentative tax,	less any	\$0.
b If this a Include	pplication is for Form 990-PF or 9 any prior year overpayment allow	990-T, enter any refundable credits and estimated to ed as a credit	ax payments made	\$0.
c Balance coupon	e Due. Subtract line 3b from line 3 or, if required, by using EFTPS (I	Ba. Include your payment with this form, or, if requin Electronic Federal Tax Payment System). See instr	red, deposit with Fi actions	TD \$\$0.
payment inst	ructions.	c fund withdrawal with this Form 8868, see Form 84	153-EO and Form 8	
BAA For Priv	vacy Act and Paperwork Reduction	on Act Notice, see instructions.		Form 8868 (Rev 12-2004)

Nashville Public Television, Inc. 62-1740928

8868 p1- 990: Application for Extension of Time to File (1st Ext) -990/990-EZ

Filing Address Smart Worksheet

Send Form 8868 to: Internal Revenue Service Center

Ogden, UT 84201-0012

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

	Oo not include amounts reported on line	(1) 01	-	(B) Program	(C) Management				
	6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	services	and general	(D) Fundraising			
22	Grants and allocations (att sch)								
	(cash \$ 3,900. non-cash \$)	22	3,900.	3,900.					
23	Specific assistance to individuals (att sch)	23	0.	0.					
24	Benefits paid to or for members (att sch)	24	0.	0.					
25	Compensation of officers, directors, etc	25	392,313.	103,228.	289,085.	0.			
26	Other salaries and wages	26	1,621,211.	1,199,517.	148,153.	273,541.			
27	Pension plan contributions	27	145,158.	97,872.	37,789.	9,497.			
28	Other employee benefits	28	136,048.	93,369.	21,991.	20,688.			
29	Payroll taxes	29	139,438.	94,221.	24,879.	20,338.			
30	Professional fundraising fees	30	300,877.	0.	0.	300,877.			
31	Accounting fees	31	20,634.	0.	20,634.	0.			
32	Legal fees	32	17,348.	0.	17,348.	0.			
33	Supplies	33	58,779.	38,820.	13,149.	6,810.			
34	Telephone	34	47,606.	6,107.	33,673.	7,826.			
35	Postage and shipping	35	64,461.	35,170.	26,702.	2,589.			
36	Occupancy	36	214,882.	0.	214,882.	0.			
37	Equipment rental and maintenance	37	10,574.	7,850.	2,649.	75.			
38	Printing and publications	38	50,105.	36,208.	5,717.	8,180.			
39	Travel	39	23,667.	15,117.	6,825.	1,725.			
40	Conferences, conventions, and meetings	40	5,589.	4,287.	1,302.	0.			
41	Interest	41	0.	0.	0.	0.			
42	Depreciation, depletion, etc (attach schedule)	42	450,648.	359,436.	77,932.	13,280.			
	Other expenses not covered above (itemize):								
	Allocate Shared Costs	43a	0.	491,181.	-536,790.	45,609.			
	Books for Schools	43b	12,643.	12,643.	0.	0.			
	Premiums	43 c	179,484.	45.	265.	179,174.			
	Purchased Programs	43 d	979,922.	979,922.	0.	0.			
44	See Other Expenses Stmt	43 e	912,030.	646,339.	193,975.	71,716.			
	Total functional expenses (add lines 22 - 43). Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	5,787,317.	4,225,232.	600,160.	961,925.			
Join	t Costs. Check . If you are following				,				
	any joint costs from a combined education			solicitation reported in (B	Program services?	. ► Yes X No			
If 'Ye	es, enter (i) the aggregate amount of these	e joint	costs \$; (ii) the a	mount allocated to Prog	ram services			
\$; (iii) the amount all	ocate	d to Management and ge	eneral \$; and (iv) th	e amount allocated			
	undraising \$.								
	t III Statement of Program Serv								
	t is the organization's primary exempt purp					Program Service Expenses (Required for 501(c)(3) and			
All o	rganizations must describe their exempt p ts served, publications issued, etc. Discus ons and 4947(a)(1) nonexempt charitable	urpose s achi	e achievements in a clear evements that are not m	ar and concise manner. S neasurable. (Section 501	State the number of (c)(3) & (4) organ-	(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)			
						optional for others.)			
á	Acquisition & Programming								
	for 24/7/365 broadcast on	<u>cha</u>	nnels 8 analog	and 46 digital	<u>over</u>				
	70 mile radius.								
_			,	d allocations \$	0.)	1,277,874.			
I	Production - Produces tel								
	plus short series, specia								
	Material produced is used	Toc				1 200 500			
				d allocations \$	0.)	1,375,579.			
(<u> Educational Services - Gu</u>				coward formal				
	classroom instruction with emphasis on K-12, and associated								
teacher training and parent/teacher outreach efforts (Grants and allocations \$ 3,900.) 288,931									
	More Modia Green				3,900.)	288,931.			
(New Media - Supports prog								
	and program information t								
	including anciliary materials for K-12 use, broadcast schedules, etc.								
	Ollow was a series of the seri		`	d allocations \$	0.)	285,727.			
	Other program servicesEngineering		· · · · · · · · · · · · · · · · · · ·		0.)	997,121.			
	Total of Program Service Expenses (sho	uia ec			<u></u>	4 , 225 , 232 . Form 990 (2004)			
BAA			TEEA0102 0	1/0//05		FUITH 330 (2004)			

Part IV Balance Sheets (See Instructions)

Note			ere required, attached schedules and amounts within umn should be for end-of-year amounts only.	the des	scription	(A) Beginning of year		(B) End of year
	4	1 5	Cash — non-interest-bearing			250.	45	250.
	4	46	Savings and temporary cash investments			1,586,766.	46	1,338,075.
			1					
	4		Accounts receivable	47 a	257,238.			
		b	Less: allowance for doubtful accounts	47 b	15,000.	310,645.	47 c	242,238.
		••	DI I	40	0			
			Pledges receivable		0.	0	40 -	0
	,		Less: allowance for doubtful accounts			0.	48 c 49	0.
						0.	49	0.
A	Ę	50	Receivables from officers, directors, trustees, and ke employees (attach schedule)	У		0.	50	0.
A S E T S		51 a	Other notes & loans receivable (attach sch)		0.	<u> </u>	30	<u> </u>
T	•		Less: allowance for doubtful accounts		0.	0.	51 c	0.
	Ę		Inventories for sale or use	•		0.	52	0.
	Ę	53	Prepaid expenses and deferred charges			313,202.	53	59,157.
	5	54	Investments – securities (attach schedule)L54.	Stmt	► Cost FMV	317,420.	54	322,186.
	Ę	55 a	Investments - land, buildings, & equipment: basis.	55 a				
		b	Less: accumulated depreciation					
			(attach schedule)	55 b			55 c	
			Investments — other (attach schedule)	1	F	117,195.	56	127,878.
	Ę	57 a	Land, buildings, and equipment: basis	57 a	7,277,164.			
		b	Less: accumulated depreciation		4 060 410	2 605 601		2 000 554
	,	-0	(attach schedule) L-5.7 .Stmt		4,068,410.	3,627,621.		3,208,754.
			Other assets (describe See Line 58 Stmt)	19,111.	58 59	17,374.
	_		Total assets (add lines 45 through 58) (must equal line Accounts payable and accrued expenses			6,292,210. 366,909.	60	5,315,912. 262,436.
L			Grants payable			0.	61	202,430.
1			Deferred revenue		-	11,200.	62	9,245.
B			Loans from officers, directors, trustees, and key employees (attach		-	0.	63	0.
A B I L I T I E S			Tax-exempt bond liabilities (attach schedule)		-	0.	1 - t	0.
Ţ			Mortgages and other notes payable (attach schedule)		-	0.	64b	0.
S	6	6 5	Other liabilities (describe ►)	0.	65	0.
	6	66	Total liabilities (add lines 60 through 65)			378,109.	66	271,681.
N (Org	jani	zations that follow SFAS 117, check here ► X an	d comp	olete lines 67			
P F			through 69 and lines 73 and 74.					
Ą	6		Unrestricted		_	5,849,789.		4,960,919.
ASSETS			Temporarily restricted			12,000.		31,000.
			Permanently restricted			52,312.	69	52,312.
Q R	Jrç	janı	zations that do not follow SFAS 117, check here	aı	nd complete lines			
F	_	70	70 through 74.				70	
N D	_		Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, building, and equi		F		71	
B	_		Retained earnings, endowment, accumulated income				72	
A N			•				-	
FUND BALANCES	7	/3	Total net assets or fund balances (add lines 67 throu 72; column (A) must equal line 19; column (B) must	ugn 69 equal l	or lines /0 through line 21)	5,914,101.	73	5,044,231.
5	7	74	Total liabilities and net assets/fund balances (add lii		· -	6,292,210.	+ +	5,315,912.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

BAA

Par	Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.) Total revenue, gains, and other support				Financial	B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return			
а	Total revenue, gains, and other support per audited financial statements	а	5,179,947.	а	Total expenses and financial statements	losses per audited	а	6,068,817.	
b	Amounts included on line a but not on line 12, Form 990:			b	Amounts included or on line 17, Form 990				
(1)	Net unrealized gains on investments \$			(1) Donated services and use of facilities \$	281,500.			
(2)	Donated services and use of facilities \$ 281,500.			(2	Prior year adjust- ments reported on line 20, Form 990 \$				
` '	Recoveries of prior year grants \$,	Losses reported on line 20, Form 990 \$ Other (specify):				
,,				,					
С	Add amounts on lines (1) through (4) Line a minus line b	b c	281,500. 4,898,447.	С	Add amounts on lines (1) Line a minus line b	- · · ·	b c	281,500. 5,787,317.	
d	Amounts included on line 12, Form 990 but not on line a:			d	Amounts included or Form 990 but not on				
(1)	Investment expenses not included on line 6b, Form 990 \$			(1) Investment expenses not included on line 6b, Form 990 \$				
(2)	Other (specify): K-1 & Non-			(2	Other (specify):				
	Operating \$ 2,744.		0 544		\$	40 140 5			
	Add amounts on lines (1) and (2)	d	2,744.		Add amounts on line	· · · · · · · · · · · · · · · · · · ·	d		
e 	Total revenue per line 12, Form 990 (line c plus line d) ▶			е	Total expenses per I 990 (line c plus line	d) ▶		5,787,317.	
Parl	V List of Officers, Directors								
	(A) Name and address	(1	3) Title and average ho per week devoted to position	urs	(C) Compensation (if not paid, enter -0-)	(D) Contributions t employee benefit plans and deferred compensation	:	(E) Expense account and other allowances	
Ben	R. Rechter								
Nas	hville, Tn	-			0		^	0	
Ric	hard F. Warren	ע	<u>ir</u>	0	0.		0.	0.	
	hville, TN]							
	Scott Fillebrown, Jr hville, TN	_ D	ir, Sec	1	0.	(0.	0.	
1100		D	ir	0	0.	(0.	0.	
	hleen E. Harkey hville, TN								
Cha	rles W. Cook, Jr	D	ir	0	0.	(0.	0.	
	hville, TN	1							
		D	ir	2	0.	(0.	0.	
See	List of Officers, Etc. Statement	-			392,313.	13,45	2.	4,782.	
75	Did any officer, director, trustee, or k than \$100,000 from your organizatior \$10,000 was provided by the related If 'Yes,' attach schedule — see instru	an orga	d all related organization nizations?	ins, o	of which more than		<u> </u>	Yes X No	

Pa	rt VI Other Information (See instructions.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	76		Х
77		77	Х	
	If 'Yes,' attach a conformed copy of the changes.			
78	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78 a		Х
I	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	78 b		Х
79	Was there a liquidation, dissolution, termination, or substantial contraction during the			
		79		X
80	a Is the organization related (other than by association with a statewide or nationwide organization) through common	90.0		v
	membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization?	80 a		X
'	and check whether it is exempt or nonexempt.			
81	a Enter direct and indirect political expenditures. See line 81 instructions			
		81 b		Х
82	a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X	
	b If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)			
83	· · · · · · · · · · · · · · · · · · ·	83a	Х	
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	Χ	
84	a Did the organization solicit any contributions or gifts that were not tax deductible?	84 a		Х
	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were			
٥.	-	84b		
		85 a 85 b		
1	If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a	93 D		
	waiver for proxy tax owed for the prior year.			
	Dues, assessments, and similar amounts from members			
	Section 162(e) lobbying and political expenditures			
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices			
	Taxable amount of lobbying and political expenditures (line 85d less 85e)			
	````	85 g		
	, , , , , , , , , , , , , , , , , , , ,	85 h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on			
	line 12			
	Gross receipts, included on line 12, for public use of club facilities			
87	1,000			
	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX	88		Х
	a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:  section 4911 ► 0. ; section 4912 ► 0. ; section 4955 ► 0.			
l	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement	89b		Х
,	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			0.
	d Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.
90	a List the states with which a copy of this return is filed  Tennessee			
	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)	90 b		39
91	The books are in care of ► Charles Brumbelow Telephone number ► (615) 259-93	325		. — — -
0.2	Located at ► 161 Rains Avenue, Nashville TN ZIP + 4 ► 37203- Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here	- <u>5</u> 3.	<u> 3 U</u>	
92	and enter the amount of tax-exempt interest received or accrued during the tax year		'	- Ц

	990 (2004) Nashville Public T				62-1740	928 Page <b>6</b>
Fart	VII   Alialysis of illcome-Produc				ion F10 F12 or F14	
	Enter gross amounts unless ise indicated.	(A) Business code	d business income (B) Amount	(C) Excluded by sect	(D) Amount	<b>(E)</b> Related or exempt function income
93	Program service revenue:					
а	Royalties on ITV Programs					81,354.
b	Royalties on PTV Programs					75,000.
С	Presentation Fees					55,938.
d	Grants Outreach Production					326,875.
	See Program Service Revenue Stmt					53,293.
	Medicare/Medicaid payments					
-	Fees & contracts from government agencies					
	Membership dues and assessments					
95	Interest on savings & temporary cash invmnts .			14	12,823.	
96	Dividends & interest from securities					
	Net rental income or (loss) from real estate:					
	debt-financed property			16 17	44 400	
	not debt-financed property  Net rental income or (loss) from pers prop			16,17	44,492.	
98 99	Other investment income			15	7,426.	
100	Gain or (loss) from sales of assets			13	7,420.	
100	other than inventory					
101	Net income or (loss) from special events					
102	Gross profit or (loss) from sales of inventory $\ \ldots \ .$					
	Other revenue: a					
	Snack Commission			03		
	Postage etc reimbursement			03	8,749.	
d	:					
10 <i>4</i>	Subtotal (add columns (B), (D), and (E))				73,490.	592,460.
	<b>Total</b> (add line 104, columns (B), (D),	and (E))				665,950.
	Line 105 plus line 1d, Part I, should equ					003,730.
	VIII Relationship of Activities t			xemnt Purnoses	(See instructions )	
Line						a a a a usua li a la usa a ust
	of the organization's exempt purp	oses (other tha	an by providing funds	s for such purposes).		accomplishment
93a	& b Distribution of progr			_		
	consistant with its s			of the progra	amming	
	destributed does not	generate	royalties.			
-	See Relationship of Activities to the					
Part	IX Information Regarding Tax	<u> (able Subsi</u>	<u>diaries and Disre</u>	egarded Entities	(See instructions.)	N/A
	(A)	(B)		(C)	(D)	(E)
Na	me, address, and EIN of corporation,	Percentage		of activities	Total	End-of-year
	partnership, or disregarded entity	ownership in			income	assets
			%			
			%			
-			<u> </u>			
Part	X Information Regarding Tra	nefere Ass		conal Benefit Co	ntracte (Soo instru	otions )
	id the organization, during the year, receive any fu				•	
	, , , ,	, ,	37 1 3 1	•		Yes X No
	old the organization, during the year, pa		•	on a personal benefit	t contract?	. Yes X No
NO	<b>te:</b> If 'Yes' to <b>(b),</b> file Form 8870 <b>and</b> Fo	•		ing cohodules and statemen	ate and to the best of my kr	nowledge and helief it is
	Under populties of perium, I declare that I ha		etuini, including accompany	ing scriedules and statemen	las any knowledge.	lowledge and belief, it is
	Under penalties of perjury, I declare that I ha true, correct, and complete. Declaration of pr	eparer (other than	officer) is based on all infor	mation of which preparer if		
Pleas		eparer (other than	officer) is based on all infor	mation of which preparer in		
Sign		eparer (other than	officer) is basēd on all'infor	mation of which preparer in	Date	
	e -	Treasure		mation of which preparer if		
Sign	Signature of officer			mation of which preparer in		
Sign Here	Signature of officer  Charles Brumbelow, Type or print name and title.			Date	Date  Check if	
Sign Here Paid	Signature of officer Charles Brumbelow,				Date	reparer's SSN or PTIN (See erieral Instruction W)
Sign Here	Signature of officer Charles Brumbelow, Type or print name and title.  Preparer's signature  Signature				Date  Check if Self-	
Sign Here Paid Pre-	Signature of officer  Charles Brumbelow, Type or print name and title.  Preparer's signature				Date  Check if Self-	

#### **SCHEDULE A** (Form 990 or 990-EZ)

# Organization Exempt Under Section 501(c)(3)

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

Supplementary Information — (See separate instructions.)

2004

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Nashville Public Television, Inc 62-1740928 Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See instructions. List each one. If there are none, enter 'None.') (d) Contributions to employee benefit plans and deferred (a) Name and address of each (b) Title and average (c) Compensation (e) Expense account and other employee paid more hours per week ˈthán \$50,000 devoted to position allowances compensation Daniel Tidwell Nashville, TN Dir Development 40 76,343 12,071 0. Gary Shipley Nashville, TN Dir Corp Mktng 74,954 8,758 0. Kevin Crane Nashville, TN Dir Technology 40 70,603 10,086. 0. Jo Ann Scalf Nashville, TN Dir Educ Serv 40 67,611 9,881 0. Brian O'Neill 66,893 11,278 Nashville, TN Dir Brand Mgt 40 0. Total number of other employees paid over \$50,000 Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions. List each one (whether individuals or firms). If there are none, enter 'None.') (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation Carl Bloom Associates Direct Mail Processing 167,654. New York, NY Mail Enterprises Nashville, TN Premium Mailing & Postage 111,346. Total number of others receiving over \$50,000 for professional services

Pai	t III	Statements About Activities (See instructions.)		Yes	No
1	Dur to i	ring the year, has the organization attempted to influence national, state, or local legislation, including any attempt nfluence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid			
	or i	ncurred in connection with the lobbying activities \( \brace \)\$ 2,000.			1
		ust equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1	Х	
	org	panizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other anizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the bying activities.			
2	sub	ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any estantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any able organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal neficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.)			
ā	Sal	e, exchange, or leasing of property?	2a		Х
ŀ	Ler	nding of money or other extension of credit?	2b		Х
(	Fur	nishing of goods, services, or facilities?	2c		Х
,	l Pav	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2 d	Х	
•	u	ment of compensation (or payment of formbarsement of expenses if more than \$1,000).		- 21	
•	Tra	nsfer of any part of its income or assets?	2e		Х
38	Do exp	you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an planation of how you determine that recipients qualify to receive payments.)	3a		Х
ŀ	Do	you have a section 403(b) annuity plan for your employees?	3b	Х	
4 8	Did on	you maintain any separate account for participating donors where donors have the right to provide advice the use or distribution of funds?	4a		Х
ŀ	Do	you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		Х
Pai	t IV	Reason for Non-Private Foundation Status (See instructions.)			
	orga	nization is not a private foundation because it is: (Please check only <b>ONE</b> applicable box.)			
5		A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6		A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9	Ħ	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's	name	. citv.	
•	ш	and state &		, σ.ι.,	
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section	170/h)	(1)(/)	
10		(Also complete the <b>Support Schedule</b> in Part IV-A.)		(T)(A)	(IV).
11 a	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general part of 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)	ublic.		
11 k		A community trust. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)			
12		An organization that normally receives: <b>(1) more than 33-1/3%</b> of its support from contributions, membership fees, and from activities related to its charitable, etc, functions — subject to certain exceptions, and <b>(2) no more than 33-1/3%</b> of from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired organization after June 30, 1975. See section 509(a)(2). (Also complete the <b>Support Schedule</b> in Part IV-A.)	d gross f its su d by th	recei ipport e	pts
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports orga described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) section 509(a)(3).)	nizatio !). (Se	ons e	
		Provide the following information about the supported organizations. (See instructions.)			
		(a) Name(s) of supported organization(s)	<b>(b)</b> Lii		
			fror	n abov	/e
14		An organization organized and operated to test for public safety, Section 509(a)(4), (See instructions.)			

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note	: You may use the worksheet in th	e instructions for conv	verting from the accru	iai to the cash method	i or accounting.	
begi	ndar year (or fiscal year nning in)	<b>(a)</b> 2003	<b>(b)</b> 2002	<b>(c)</b> 2001	<b>(d)</b> 2000	<b>(e)</b> Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	2,780,542.	2,489,580.	2,795,595.	2,190,544.	10,256,261.
16	Membership fees received					
	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose	609,780.	382,677.	365,965.	412,589.	1,771,011.
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	15,372.	22,275.	29,070.	61,810.	128,527.
19	Net income from unrelated business activities not included in line 18					
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	2,644,694.	2,896,560.	2,891,117.	3,468,508.	11,900,879.
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of		0.045		0.5	
	capital assets See L22 Stmt	33,785.	3,246.	22,375.	35,092.	94,498.
	Total of lines 15 through 22	6,084,173.	5,794,338.	6,104,122.	6,168,543.	24,151,176.
	Line 23 minus line 17	5,474,393.	5,411,661.	5,738,157.	5,755,954.	22,380,165.
25	Enter 1% of line 23	· · · · · · · · · · · · · · · · · · ·	57,943.	61,041.	61,685. ► <b>26</b> a	445 600
	Organizations described on lines  Prepare a list for your records to show the supported organization) whose total gifts f return. Enter the total of all these excess	name of and amount contril	buted by each person (othe led the amount shown in li	ne 26a. <b>Do not file this list</b>	or publicly with your	447,603.
c	: Total support for section 509(a)(1					22,380,165.
	Add: Amounts from column (e) for	or lines: 18	128,527.	19		
		22	94,498.	19 26b	0 ► <b>26d</b>	223,025.
	Public support (line 26c minus lin					22,157,140.
	Public support percentage (line		ed by line 26c (denor	minator))	▶ 26f	99.00 %
	Organizations described on line For amounts included in lines 15, name of, and total amounts receisuch amounts for each year:  (2003)	16, and 17 that were ved in each year from	, each 'disqualified p	erson.' <b>Do not file this</b>	s list with your return	. Enter the sum of
I	SFor any amount included in line 1 show the name of, and amount re \$5,000. (Include in the list organi computing the difference between (the excess amounts) for each year.	7 that was received freceived for each year, zations described in linthe amount received ar:	om each person (oth that was more than t nes 5 through 11, as and the larger amou	er than 'disqualified p the <b>larger</b> of <b>(1)</b> the ar well as individuals.) <b>I</b> nt described in <b>(1)</b> or	ersons'), prepare a lismount on line 25 for to not file this list wit (2), enter the sum of	st for your records to the year or <b>(2)</b> th your return. After these differences
	(2003)	(2002)	(2001)		_ (2000)	
C	Add: Amounts from column (e) for 17  Add: Line 27a total	or lines: 15 20		16 21		
c	 Add: Line 27a total	<b></b> an	d line 27b total	·	▶ 27d	
6	Public support (line 27c total min	us line 27d total)			▶ 27e	
T	Lotal Support for Section Sugran,	n test. Enter amount t	rom line 23 collimn			
ç	Public support percentage (line	27e (numerator) divide	ed by line 27f (denon	ninator))	▶ 27g	%
r	Investment income percentage (	line 18, column (e) (nı	ımerator) divided by	line 27f (denominator	r)) ▶ 27 h	%

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

Private School Questionnaire (See instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV) N/A Yes No Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? ..... 29 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, 30 30 and scholarships? Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 31 If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.) Does the organization maintain the following: a Records indicating the racial composition of the student body, faculty, and administrative staff? ..... 32 a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 32b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 32 c 32 d If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: a Students' rights or privileges? 33 a 33b **b** Admissions policies? 33 c c Employment of faculty or administrative staff? d Scholarships or other financial assistance? 33 d 33 e f Use of facilities? ...... 33 f 33 q 33h h Other extracurricular activities? If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.) 34a Does the organization receive any financial aid or assistance from a governmental agency? ..... 34a **b** Has the organization's right to such aid ever been revoked or suspended? ..... 34b If you answered 'Yes' to either 34a or b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.

Part VI-A	Lobbying Expenditures by Electing Public (To be completed ONLY by an eligible organization the	Charities (See ins	structions.)	
	(To be completed <b>CNLT</b> by all eligible organization ti	lat filed Form 5/66)		N/A
Check ► a	if the organization belongs to an affiliated group.	Check ► <b>b</b> if	you checked 'a' and 'limit	ted control' provisions apply.

Che	ck ► a	if the organization belongs to an affiliated group. Check	k <b>► b</b>	if	you check	ked 'a' and 'limited cont	rol' provisions apply.
		Limits on Lobbying Expenditures  (The term 'expenditures' means amounts paid or incurr	ed.)			(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lol	bbying expenditures to influence public opinion (grassroots lol	obying)		36		
37	Total lol	bbying expenditures to influence a legislative body (direct lobb	oying)		37		
38	Total lol	bbying expenditures (add lines 36 and 37)			38		
39	Other ex	xempt purpose expenditures			39		
40	Total ex	cempt purpose expenditures (add lines 38 and 39)			40		
41	Lobbyin	g nontaxable amount. Enter the amount from the following tal	ole –				
	If the an	nount on line 40 is - The lobbying nontaxable	amount i	is –			
	Not ove	r \$500,000 20% of the amount on line	40	. —			
	Over \$500	0,000 but not over \$1,000,000\$100,000 plus 15% of the excess	over \$500,0	000			
	Over \$1,00	00,000 but not over \$1,500,000 \$175,000 plus 10% of the excess	over \$1,00	0,000	<del>-</del> 41		
	Over \$1,50	00,000 but not over \$17,000,000 \$225,000 plus 5% of the excess o	ver \$1,500	,000			
	Over \$1	7,000,000\$1,000,000					
42	Grassro	ots nontaxable amount (enter 25% of line 41)			42		
43	Subtrac	t line 42 from line 36. Enter -0- if line 42 is more than line 36			43		
44	Subtrac	t line 41 from line 38. Enter -0- if line 41 is more than line 38			44		
	Caution	: If there is an amount on either line 43 or line 44, you must i	file Form	4720			

4 -Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the instructions for lines 45 through 50.)

		Lobbying Expenditures During 4 -Year Averaging Period							
	Calendar year (or fiscal year beginning in) ►	<b>(a)</b> 2004	<b>(b)</b> 2003	<b>(c)</b> 2002	<b>(d)</b> 2001	<b>(e)</b> Total			
45	Lobbying nontaxable amount								
46	Lobbying ceiling amount (150% of line 45(e))								
47	Total lobbying expenditures								
48	Grassroots non- taxable amount								
49	Grassroots ceiling amount (150% of line 48(e))								
50	Grassroots lobbying expenditures								

Part VI-B Lobbying Activity by Nonelecting Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers	Х		
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines <b>c</b> through <b>h.</b> )	Х		
<b>c</b> Media advertisements		Х	
<b>d</b> Mailings to members, legislators, or the public		Х	
e Publications, or published or broadcast statements		Х	
f Grants to other organizations for lobbying purposes		Х	
g Direct contact with legislators, their staffs, government officials, or a legislative body	Х		2,000.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		Х	
i Total lobbying expenditures (add lines c through h.)			2,000.
If 'Vas' to any of the above, also attach a statement giving a detailed description of the lobbying activities	C C O	0 Do	rt VII_D Ctmt

# Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did th	ne reporting organization	directly or in	directly engage in any of the following rganizations) or in section 527, relation	g with any other organization described	in sectio	n 501	(c)
	•		o a noncharitable exempt organization			Yes	No
		-	. •		51 a (i)		Х
					a (ii)		Х
	r transactions:				, ,		
<b>(i)</b> S	Sales or exchanges of ass	ets with a no	oncharitable exempt organization		b (i)		Х
(ii)F	Purchases of assets from a	a noncharita	ble exempt organization		b (ii)		Х
(iii)F	Rental of facilities, equipm	ent, or other	assets		b (iii)		Х
(iv)F	Reimbursement arrangeme	ents			b (iv)		Х
<b>(v)</b> ∟	oans or loan guarantees				b (v)		Х
(vi)P	Performance of services or	membershi	p or fundraising solicitations		b (vi)		Х
<b>c</b> Shari	ng of facilities, equipment	t, mailing lis	ts, other assets, or paid employees .		С		X
<b>d</b> If the the gany t	answer to any of the abo oods, other assets, or ser ransaction or sharing arra	ve is 'Yes,' ( vices given l naement. sh	complete the following schedule. Colu by the reporting organization. If the or now in column (d) the value of the go	imn (b) should always show the fair mark rganization received less than fair mark ods, other assets, or services received:	rket value et value i	e of in	
(a) Line no.	(b) Amount involved		(c) noncharitable exempt organization	(d) Description of transfers, transactions, and sl			to
LINE NO.	Amount involved	Name of	nonchantable exempt organization	Description of transfers, transactions, and si	ilai iliy ai rai	igemeni	.5
descr	e organization directly or in ribed in section 501(c) of the s,' complete the following	the Code (ot	liated with, or related to, one or more her than section 501(c)(3)) or in secti	tax-exempt organizations on 527?	► ☐ Ye	s X	No
	(a) Name of organization		<b>(b)</b> Type of organization	(c) Description of relations	ship		

# Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of organization

### **Schedule of Contributors**

Supplementary Information for line 1 of Form 990, 990-EZ and 990-PF (see instructions)

Employer identification number

2004

OMB No. 1545-0047

Nashville Public Television,	Inc.	62-1740928
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( <u>3</u> ) (enter number	er) organization
	4947(a)(1) nonexempt charit	able trust <b>not</b> treated as a private foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private fou	ndation
	````	able trust treated as a private foundation
	501(c)(3) taxable private fou	
Check if your organization is covered by the G boxes for both the General Rule and a Specia		te: Only a section 501(c)(7), (8), or (10) organization can check
General Rule —		
X For organizations filing Form 990, 990-EZ, contributor. (Complete Parts I and II.)	or 990-PF that received, during the	e year, \$5,000 or more (in money or property) from any one
Special Rules —		
For a section 501(c)(3) organization filing 509(a)(1)/170(b)(1)(A)(vi) and received fro amount on line 1 of these forms. (Complet	m any one contributor, during the	et the 33-1/3% support test of the regulations under sections year, a contribution of the greater of \$5,000 or 2% of the
	re than \$1.000 for use exclusively	0-EZ, that received from any one contributor, during the year, for religious, charitable, scientific, literary, or educational s I, II, and III.)
some contributions for use <i>exclusively</i> for \$1,000. (If this box is checked, enter here	religious, charitable, etc, purposes the total contributions that were re-	O-EZ, that received from any one contributor, during the year, but these contributions did not aggregate to more than ceived during the year for an <i>exclusively</i> religious, charitable, ies to this organization because it received nonexclusively
religious, charitable, etc, contributions of \$	5,000 or more during the year.)	<u>\</u> \$
	eading of their Form 990, Form 990	cial Rules do not file Schedule B (Form 990, 990-EZ, or -EZ, or on line 2 of their Form 990-PF, to certify that they do
BAA For Panerwork Peduction Act Notice S	ee the Instructions	Schedule R (Form 990, 990-F7, or 990-PF) (2004

For Paperwork Reduction Act Notice, see for Form 990, Form 990-EZ, and Form 990-PF.

Form 990, Page 1, Line 7

Other Investment Income Statement

Other investment income (describe)	
PTMMG LLC (was CSRG Digital) K-1 Net Income	3,142.
PBS NDI LLC K-1 Income	-398.
PBS NDI MovieBeam K-1 Income	0.
Gain/Loss on Beneficial Interests	2,485.
Gain/Loss on Investments	2,197.
T-1-1	T 406
Total	7,426.

Form 990, Page 2, Part II, Line 43

Other Expenses Stmt

Other expenses not covered above (itemize):	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Intellectual Property	6,132.	6,132.	0.	0.
Talent	21,806.	21,281.	0.	525.
Film & Processing	106.	106.	0.	0.
Prod Serv & Captioning	12,885.	12,885.	0.	0.
Amortization	331,893.	331,893.	0.	0.
Copier Services	7,024.	0.	7,024.	0.
Advertising	43,472.	43,269.	203.	0.
Association Dues	47,151.	42,912.	3,700.	539.
PR & Hospitality	14,413.	3,757.	9,141.	1,515.
Interconnect - Internet	4,043.	4,043.	0.	0.
CC, Bank, Payroll Fees	65,062.	225.	25,049.	39,788.
Software Support	38,358.	7,683.	1,326.	29,349.
Award Entry Fees	5,385.	4,965.	420.	0.
CC Late Fees	0.	0.	0.	0.
Insurance	60,263.	4,840.	55,423.	0.
Other Expenses	10,360.	642.	9,718.	0.
Freelance/Consultants	37,976.	36,446.	1,530.	0.
Audience Research	24,654.	24,654.	0.	0.
Air Time - Chatt Cable	2,723.	2,723.	0.	0.
Bad Debts	39,150.	0.	39,150.	0.
Maint Sup & Exp	139,174.	97,883.	41,291.	0.
Total	912,030.	646,339.	193,975.	71,716.

Form 990, Page 3, Part IV, Line 54 **Investments - Securities Statement**

Line 54 — Investments - Securities:	Beginning of Year	End of Year
Certificate of Deposit	317,420.	322,186.
Total	317,420.	322,186.

Form 990, Page 3, Part IV, Line 56 Investments - Other Statement

Line 56 — Investments - Other:	Beginning of Year	End of Year
Limited Partnership Community Foundation Account Beneficial Interest - Trust	38,596. 26,287. 52,312.	44,596. 28,485. 54,797.
Total	117,195.	127,878.

Form 990, Page 3, Part IV, Lines 57a & 57b Land, Buildings and Equipment Statement

	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
Land	120,000.	0.	120,000.
Building & Improvements	1,876,036.	1,230,516.	645,520.
Editing Equipment	215,610.	181,269.	34,341.
Computer Systems	195,491.	138,929.	56,562.
Vehicles	56,076.	51,690.	4,386.
Furniture & Fixtures	186,773.	153,402.	33,371.
MCR/Broadcast Equipment	3,231,180.	1,402,617.	1,828,563.
Studio Production Equipment	1,276,841.	821,604.	455,237.
Field Production Equipment	115,960.	85,186.	30,774.
Art/Print Equipment	0.	0.	0.
Shop Equipment	2,047.	2,047.	0.
Monitors & VCRs	1,150.	1,150.	0.
Other "Fixed" Assets	0.	0.	0.
Total	7,277,164.	4,068,410.	3,208,754.

Form 990, Page 3, Part IV, Line 58

Other Assets Statement

Line 58 - Other Assets:	Beginning of Year	End of Year
Copyrights, Trademarks, Etc. (net of amortization)	19,111.	17,374.
Total	19,111.	17,374.

Form 990, Page 4, Part V List of Officers, Etc. Statement

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
DeWitt Ezell				
Nashville, TN	Dir 0	0.	0.	0.
Rev.V.H. "Sonnye" Dixon, Jr.	0			
Nashville, TN	Dir			
P. 1	0	0.	0.	0.
Barbara G. Chazen Nashville, TN	Dir			
Nasiiviiie, in	0	0.	0.	0.
Jean Bottorff				
Nashville, TN	Dir			
<u> </u>	0	0.	0.	0.
Susan Short Jones	Dire			
Nashville, TN	Dir 0	0.	0.	0.
MaryAnne Howland	0			
Nashville, TN	Dir			
	0	0.	0.	0.
Eilene Maupin	Dia			
Nashville, TN	Dir 0	0.	0.	0.
Martin Brown, Jr.	0			
Nashville, TN	Dir			
	0	0.	0.	0.
Owen G. Shell, Jr.	D '			
Nashville, TN	Dir, Chair	0.	0.	0.
Richard W. Oliver				
Nashville, TN	Dir			
	0	0.	0.	0.
Steven M. Bass Nashville, TN	Din Drog GEO			
Nashville, TN	Dir, Pres, CEO 40	210,778.	5,520.	4,782.
Charles Brumbelow				
Nashville, TN	Treasurer			
	40	78,307.	4,328.	0.
Elizabeth T. Curley Nashville, TN	VD CT Max			
Nashville, IN	VP, ST Mgr	103,228.	3,604.	0.
DeWitt C. Thompson, IV				
Nashville, TN	Dir			
	0	0.	0.	0.
Peggy Warner	Dir			
Nashville, TN	Dir 0	0.	0.	0.
Byron Trauger		<u></u>		
Nashville, TN	Dir			
	0	0.	0.	0.
Sarah Knestrick	Dia			
Nashville, TN	Dir 0	0.	^	0.
	U	U.	0.	U.

Form 990, Page 4, Part V

List of Officers, Etc. Statement

Continued

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
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Total

392,313. 13,452. 4,782.

Form 990, Page 6, Part VII, Line 93

Program Service Revenue Stmt

	_	Inrelated ness income	Excluded by section 512, 513, or 514		.
	(A) Business code	(B) Amount	(C) Exclusn code	(D) Amount	(E) Related or exempt function income
Program service revenue:					
Tape Dubs					4,200.
AIT Grant Amortization					6,000.
Pledge event etc					20,000.
Advertising Participations					6,437.
Outreach Participations					11,058.
Use of Donate-A-Car spots					1,050.
Cable Royalties					4,548.

Total _____53,293.

Form 990, Page 6, Part VIII

Relationship of Activities to the Accomplishment of Exempt Purposes Statement

Line Number ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93c	Presentation fees offset the costs incurred by the station to
	bring quality programming to other public television stations.
93d	The station receives grants to produce some programming and
	other grants to assist teachers and others to better utilize
	programming broadcast by NPT

Schedule A, Part IV-A, Line 22

Other Income

Description	(a)	(b)	(c)	(d)	(e)
	2003	2002	2001	2000	Total

Schedule A, Part IV-A, Line 22

Other Income

Continued

Description	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
Other investment Other revenue	31,844.	2,624. 622.	3,897. 18,478.	124. 34,968.	38,489. 56,009.
Total	33,785.	3,246.	22,375.	35,092.	94,498.

Explanation Statement

Form/Line: Schedule A, Page 5, Part VI-B

Explanation of: Lobbying Activity by Nonelecting Public Charities

The amount of \$2,000 shown represents the estimated costs for postage etc. to contact legislators and other government officials concerning grants and/or appropriations and other matters directly affecting the station.

Form 990 p 1/Line 1a

Description	Amount
Memberships & Other Individual Donations Major Gifts	1,994,532.
General Foundation Support	62,500.
Underwriting of Broadcasts and Productions Equipment Refund/Grant	343,589.
Total	2,650,957.

Supporting Statement of:

Form 990 p 1/Line 1b

Description	Amount
Corporation for Public Broadcasting - CSG Corporation for Public Broadcasting - Interconnect Corporation for Public Broadcasting - Other	901,471. 18,174. 15,500.
Total	935,145.

Supporting Statement of:

Form 990 p 1/Line 1c

Description	Amount
State of Tennessee Various Local Governments Federal via PBS	430,797. 146,905. 71,437.
Total	649,139.

Supporting Statement of:

Form 990 p 1/Line 6a

Description	Amount
Office	11,669.
Spectrum	13,318.
Studio	15,215.
Equipment	4,290.

Total 44,492.

Form 990 p 1/Line 20

Description	Amount
Net Increase in Temporarily Restricted Assets Schedule K-1 ctivity Not Booked to General Ledger Rounding	19,000. -2,750. 6.
Total	16,256.

Supporting Statement of:

Form 990 p 2/Line 26 column (C)

Description	Amount
8001 8201 8302 Less Bass Less Brumbelow	268,397. 117,473. 51,368. -210,778. -78,307.
Total	148,153.

Supporting Statement of:

Form 990 p 2/Line 26 column (D)

	Description	Amount
7210		170,343.
7310		103,198.
Total		273 541

Supporting Statement of:

Form 990 p 2/Line 43 Column (B)-15

Description	Amount
A&S	25.
A&S Prod	100.
Educ	50.
NM	50.
Broad	0.
PI	0.

Total ______225.

Form 990 p 2/Line 43 Column (B)-17

Description	Amount
A&S	0.
Prod	2,830.
Educ	0.
NM	280.
Broad	0.
PI	1,855.
Total	4,965.

Supporting Statement of:

Form 990 p 2/Line 43 Column (B)-21

Description	Amount
A&S	0.
Prod	11,951.
Educ	8,765.
NM	0.
Broad	8,053.
PI	7,677.
Total	36,446.

Supporting Statement of:

Form 990 p 2/Other Program Service Exp

Description	Amount
Engineering (Broadcast)	963,204.
Less In-Kind Support	-281,500.
Public Information (Promotion)	315,417.
Total	997,121.

Supporting Statement of:

Form 990 p 3/Line 46, column (A)

Description	Amount
AmSouth	1,565,096.
Bank of America	1,000.
First Tennessee	1,000.
Union Planters	18,618.
E*Trade Securities Money Market Fund	1,052.

Total 1,586,766.

Form 990 p 3/Line 46, column (B)

Description	Amount
AmSouth	247,833.
Bank of America	947,481.
First Tennessee	122,551.
Union Planters	19,158.
E*Trade MMF	1,052.
Total	1,338,075.

Supporting Statement of:

Form 990 p 3/Line 53, column (B)

Description	Amount
Club Write Kids, Net	43,000.
Prepaid Insurance	7,032.
Supplies on Hand	4,769.
Other Prepaid Expenses	4,356.
Total	59,157.

Supporting Statement of:

Form 990 p 4/Part IV-A, Line d(2)

Description	Amount
PBS NDI K-1 Major Market Group K-1	-398. 3,142.
Total	2,744.

Supporting Statement of:

Form 990 p 4/Part V, Column (D)-16

Description	Amount
Insurance 12 x (55.93+644.97+59.10-300.00) 403(b) contributions	5,520.
Total	5,520.

Form 990 p 6/Line 97b(D)

Description	Amount
Office	11,669.
Spectrum	13,318.
Studio	15,215.
Equipment	4,290.
Total	44,492.

Supporting Statement of:

Form 990 p 6/Line 99(D)

Description	Amount
PBS - NDI K-1	-398.
Major Market Group K-1	3,142.
Gain/Loss on Beneficial Interest	2,485.
Gain/Loss on Investments	2,197.
Total	7,426.

Supporting Statement of:

Sch. A, 990 p 3/Line 17-a

Description	Amount
Program Service Revenues Gross Rents	576,502. 33,278.
Total	609 780

Supporting Statement of:

Sch. A, 990 p 3/Line 17-b

Amount
348,197.
34,480.

Total _____382,677.

Sch. A, 990 p 3/Line 15-c

Description	Amount
From Prior Year Return:	2,384,344.
Less Accounts Receivable @ Year-End	-327,625.
Plus Beginning Accounts Receivable	738,876.
Total	2,795,595.

Supporting Statement of:

Sch. A, 990 p 3/Line 17-c

Description	Amount
Program Service Revenue Gross Rents	168,216. 53,238.
Auctions and Special Events	144,511.
Total	365,965.

Supporting Statement of:

Sch. A, 990 p 3/Line 20-c

Description	Amount
Metro Schools/Government	1,543,269.
State of Tennessee	498,315.
СРВ	787,397.
PTFP	62,136.
Total	2,891,117.

Supporting Statement of:

Sch. A, 990 p 3/Line 15-d

Description	Amount
From Prior Year Return	2,320,045.
Less Accounts Receivable @ Year-End	-738,876.
Plus Beginning Accounts Receivable	204,375.
Plus Temp Restricted A/R @ Year-End AIT	30,000.
Plus Temp Restricted A/R @ Year-End Memorial	375,000.

Total 2,190,544.

Sch. A, 990 p 3/Line 17-d

Description	Amount
Program Service Revenue	179,686.
Gross Rents	30,045.
Auctions and Special Events	202,858.
Total	412,589.

Supporting Statement of:

Sch. A, 990 p 3/Line 20-d

Description	Amount
Metro Schools & Government	2,070,843.
State of Tennessee	498,315.
Federal - CPB	745,545.
Federal - PTFP	153,805.
Total	3,468,508.

Nashville Public Television Proposed By-Laws Amendment to Establish Emeritus Members

Change Article V, Section 5.3 (Advisory Members) of the NPT By-Laws to Section <u>5.3a</u>, and create Section <u>5.3b</u> as follows:

<u>Section 5.3b Emeritus Members</u>. The Board of Directors may elect non-voting emeritus members. Emeritus members shall serve at the pleasure of the Board of Directors and shall advise and counsel the Board of Directors on appropriate matters.

NOTE: The proposed NPT by-laws amendment above was approved by the NPT board of directors at the November 9, 2005 board meeting.