

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)

OMB No. 1545-0047

2007Open to Public
Inspection

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

A For the 2007 calendar year, or tax year beginning **JUL 1, 2007** and ending **JUN 30, 2008****B** Check if
applicable

- ☐ Address
change
- ☐ Name
change
- ☐ Initial
return
- ☐ Termin-
ation
- ☐ Amend-
ed return
- ☐ Application
pending

Please
use IRS
label or
print or
type See
Specific
Instruc-
tions**C** Name of organization**PUBLIC TELEVISION 19, INC.**

Number and street (or P.O. box if mail is not delivered to street address)

125 EAST 31ST STREET

City or town, state or country, and ZIP + 4

KANSAS CITY, MO 64108**D** Employer identification number**23-7114952****E** Telephone number**816.756.3580****F** Accounting method ☐ Cash ☒ Accrual
☐ Other
(specify) ▶• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts
must attach a completed Schedule A (Form 990 or 990-EZ).**H** and **I** are not applicable to section 527 organizations**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes," enter number of affiliates ▶ **N/A****H(c)** Are all affiliates included? **N/A** ☐ Yes ☐ No
(If "No," attach a list)**H(d)** Is this a separate return filed by an or-
ganization covered by a group ruling? ☐ Yes ☒ No**I** Group Exemption Number ▶ **N/A****M** Check ☐ if the organization is not required to attach
Sch. B (Form 990, 990-EZ, or 990-PF)**G** Website ▶ **WWW.KCPT.ORG****J** Organization type (check only one) ☒ 501(c)(3) (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Check here ☐ if the organization is not a 509(a)(3) supporting organization and its gross
receipts are normally not more than \$25,000. A return is not required, but if the organization
chooses to file a return, be sure to file a complete return.**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **12,098,125.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
	a	Contributions to donor advised funds	1a			
	b	Direct public support (not included on line 1a)	1b	5,840,835.		
	c	Indirect public support (not included on line 1a)	1c			
	d	Government contributions (grants) (not included on line 1a)	1d			
	e	Total (add lines 1a through 1d) (cash \$ 5,840,835. noncash \$)	1e	5,840,835.		
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	1,889,515.		
	3	Membership dues and assessments	3	2,694,182.		
	4	Interest on savings and temporary cash investments	4	22,196.		
	5	Dividends and interest from securities	5			
Revenue	6 a	Gross rents SEE STATEMENT 1	6a	769,939.		
	b	Less: rental expenses	6b			
	c	Net rental income or (loss). Subtract line 6b from line 6a	6c	769,939.		
	7	Other investment income (describe ▶ BROADCAST ROYALTIES)	7	35,907.		
	8 a	Gross amount from sales of assets other than inventory	(A) Securities 8a	(B) Other		
	b	Less: cost or other basis and sales expenses	8b			
	c	Gain or (loss) (attach schedule)	8c			
	d	Net gain or (loss). Combine line 8c, columns (A) and (B)	8d			
	9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
	a	Gross revenue (not including \$ 192,500. of contributions reported on line 1b)	9a	746,022.		
b	Less: direct expenses other than fundraising expenses	9b	627,638.			
c	Net income or (loss) from special events. Subtract line 9b from line 9a	9c	118,384.			
Revenue	10 a	Gross sales of inventory, less returns and allowances	10a			
	b	Less: cost of goods sold	10b			
	c	Gross profit (or loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c			
	11	Other revenue (from Part VII, line 103)	11	99,529.		
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	11,470,487.		
	Expenses	13	Program services (from line 44, column (A))	13	5,460,307.	
		14	Management and general (from line 44, column (C))	14	1,650,640.	
		15	Fundraising (from line 44, column (D))	15	1,670,035.	
		16	Payments to affiliates (attach schedule)	16		
		17	Total expenses. Add lines 16 and 44, column (A)	17	8,780,982.	
Net Assets	18	Excess or (deficit) for the year. Subtract line 17 from line 12	18	2,689,505.		
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	5,903,096.		
	20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 3	20	<25,144.>		
	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	8,567,457.		

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LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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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.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash \$ 0. noncash \$ 0.) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ 0. noncash \$ 0.) If this amount includes foreign grants, check here <input type="checkbox"/>				
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	483,661.	0.	483,661.	0.
25b Compensation of former officers, directors, key employees, etc. listed in Part V-B	0.	0.	0.	0.
25c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26 Salaries and wages of employees not included on lines 25a, b, and c	2,950,489.	1,971,549.	395,477.	583,463.
27 Pension plan contributions not included on lines 25a, b, and c	222,989.	145,180.	38,722.	39,087.
28 Employee benefits not included on lines 25a - 27	337,272.	202,717.	79,978.	54,577.
29 Payroll taxes	245,149.	140,087.	67,346.	37,716.
30 Professional fundraising fees				
31 Accounting fees				
32 Legal fees				
33 Supplies	39,329.	34,480.	1,812.	3,037.
34 Telephone	93,319.	49,589.	19,440.	24,290.
35 Postage and shipping	75,302.	20,808.	6,403.	48,091.
36 Occupancy				
37 Equipment rental and maintenance	145,783.	46,741.	93,360.	5,682.
38 Printing and publications	47,986.	440.		47,546.
39 Travel	40,272.	16,169.	17,686.	6,417.
40 Conferences, conventions, and meetings				
41 Interest	7,416.		7,416.	
42 Depreciation, depletion, etc. (attach schedule)	845,938.	673,871.	70,713.	101,354.
43 Other expenses not covered above (itemize)				
a				
b				
c				
d				
e				
f				
g SEE STATEMENT 4	3,246,077.	2,158,676.	368,626.	718,775.
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	8,780,982.	5,460,307.	1,650,640.	1,670,035.

Joint Costs. Check ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?

Yes ☐ No ☒

If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;

(iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments (See the instructions)

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.

What is the organization's primary exempt purpose? ► SEE STATEMENT 5

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

a PROGRAM ADMINISTRATION AND OPERATION

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐ 2,097,758.

b BROADCAST OPERATIONS

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐ 1,181,676.

c EDUCATIONAL AND INSTRUCTIONAL SERVICES

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐ 781,898.

d PRODUCTION FACILITIES

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐ 834,164.

e Other program services (attach schedule) SEE STATEMENT 6

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐ 564,811.

f Total of Program Service Expenses (should equal line 44, column (B), Program services) ► 5,460,307.

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Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non interest-bearing	276,571.	45	680,960.
	46 Savings and temporary cash investments	342,118.	46	425,868.
	47 a Accounts receivable	47a 542,374.		
	b Less: allowance for doubtful accounts	47b 15,000.	47c	527,374.
	48 a Pledges receivable	48a 1,730,662.		
	b Less: allowance for doubtful accounts	48b 36,986.	48c	1,693,676.
	49 Grants receivable		49	
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b	
	51 a Other notes and loans receivable	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	83,385.	53	63,399.
	54 a Investments - publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a	
	b Investments - other securities STMT 11 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	611,211.	54b	612,811.
55 a Investments - land, buildings, and equipment basis	55a			
b Less: accumulated depreciation	55b	55c		
56 Investments - other		56		
57 a Land, buildings, and equipment basis	57a 17,774,795.			
b Less: accumulated depreciation STMT 7	57b 10,845,247.	6,625,969.	57c	6,929,548.
58 Other assets, including program-related investments (describe SEE STATEMENT 8)	20,000.	58	128,498.	
59 Total assets (must equal line 74). Add lines 45 through 58	8,601,910.	59	11,062,134.	
Liabilities	60 Accounts payable and accrued expenses	616,851.	60	815,419.
	61 Grants payable		61	
	62 Deferred revenue	1,081,963.	62	1,029,258.
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities STMT 9	1,000,000.	64a	650,000.
	b Mortgages and other notes payable STMT 10		64b	
	65 Other liabilities (describe)		65	
66 Total liabilities. Add lines 60 through 65	2,698,814.	66	2,494,677.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	3,895,771.	67	4,496,827.
	68 Temporarily restricted	2,007,325.	68	4,070,630.
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	5,903,096.	73	8,567,457.
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	8,601,910.	74	11,062,134.	

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a Total revenue, gains, and other support per audited financial statements		a	13,392,297.
b Amounts included on line a but not on Part I, line 12			
1 Net unrealized gains on investments	b1	<25,144.>	
2 Donated services and use of facilities	b2	1,319,316.	
3 Recoveries of prior year grants	b3		
4 Other (specify) _____	b4		
Add lines b1 through b4		b	1,294,172.
c Subtract line b from line a		c	12,098,125.
d Amounts included on Part I, line 12, but not on line a:			
1 Investment expenses not included on Part I, line 6b	d1		
2 Other (specify). SPECIAL EVENT EXPENSES	d2	<627,638.>	
Add lines d1 and d2		d	<627,638.>
e Total revenue (Part I, line 12) Add lines c and d		e	11,470,487.

Part IV-B		Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
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a		Total expenses and losses per audited financial statements	a	10,727,936.
b		Amounts included on line a but not on Part I, line 17.		
1	b1	Donated services and use of facilities		1,319,316.
2	b2	Prior year adjustments reported on Part I, line 20		
3	b3	Losses reported on Part I, line 20		
4	b4	Other (specify). SPECIAL EVENT EXPENSES		627,638.
Add lines b1 through b4			b	1,946,954.
c		Subtract line b from line a	c	8,780,982.
d		Amounts included on Part I, line 17, but not on line a.		
1	d1	Investment expenses not included on Part I, line 6b		
2	d2	Other (specify)		
Add lines d1 and d2			d	0.
e		Total expenses (Part I, line 17) Add lines c and d	e	8,780,982.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated) (See the instructions)

[illegible]

Part V-A	Current Officers, Directors, Trustees, and Key Employees <i>(continued)</i>
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Yes	No
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- 75 a** Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings _____ ▶ **38**

b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) _____

c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization" _____

If "Yes," attach a statement that includes the information described in the instructions

d Does the organization have a written conflict of interest policy? _____

75b		X
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75c		X
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75d	X	
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Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

[illegible]

Part VI	Other Information <i>(See the instructions)</i>
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Yes	No
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- 76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change
- 77 Were any changes made in the organizing or governing documents but not reported to the IRS?
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?
b If "Yes," has it filed a tax return on **Form 990-T** for this year? N/A
- 79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement
- 80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?
b If "Yes," enter the name of the organization N/A
- _____ and check whether it is ☐ exempt or ☐ nonexempt
- 81 a Enter direct and indirect political expenditures (See line 81 instructions) 81a 0
- b Did the organization file **Form 1120-POL** for this year?

76		X
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77		X
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78a	X
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78b		
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79		X
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80a	X
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Part VI Other Information (continued)

		Yes	No
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)	82b	1,319,316.
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 a	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?	88a	X
b	If "Yes," complete Part IX		
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	X
89 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.		
b	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?	89b	X
c	If "Yes," attach a statement explaining each transaction		
c	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.		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90 a	List the states with which a copy of this return is filed ▶ MO		
b	Number of employees employed in the pay period that includes March 12, 2007	90b	78
91 a	The books are in care of ▶ KAREN BUTTON Telephone no. ▶ 816-756-3580		
	Located at ▶ 125 EAST 31ST STREET, KANSAS CITY, MISSOURI ZIP + 4 ▶ 64108		
b	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)?	91b	X
	If "Yes," enter the name of the foreign country ▶ N/A		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			

Part VI Other Information (continued)

Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States?

91c

X

If "Yes," enter the name of the foreign country **N/A**

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here

and enter the amount of tax-exempt interest received or accrued during the tax year

92

N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a FEES					1,160,047.
b EDUCATIONAL SERVICES					729,468.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					2,694,182.
95 Interest on savings and temporary cash investments			14	22,196.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property			16	769,939.	
98 Net rental income or (loss) from personal property					
99 Other investment income			15	35,907.	
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			01	118,384.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a VIDEO LIBRARY			01	15,054.	
b MISCELLANEOUS			01	16,975.	
c KC STUDIO MAGAZINE			01	67,500.	
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		1,045,955.	4,583,697.
105 Total (add line 104, columns (B), (D), and (E))					5,629,652.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	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)
93	PROVIDE INSTRUCTIONAL VIDEOS AND LITERATURE TO CHILDREN IN GRADES K-12 PROVIDE DISTANCE LEARNING TO COLLEGE STUDENTS; PROVIDE TEACHER DEVELOPMENT WORKSHOPS; ENCOURAGE READING BY PRE-SCHOOL CHILDREN.
94	MEMBERS DUES

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
N/A	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

☐ Yes☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). N/A

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- ----- -----			
b	----- ----- -----			
c	----- ----- -----			
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

Yes	No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- ----- -----			
b	----- ----- -----			
c	----- ----- -----			
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No

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.

Please Sign Here: *Susan M. Stanton* Signature of officer Date: *2-4-09*

Type or print name and title: *SUSAN M. STANTON - INTERIM CEO*

Paid Preparer's Use Only: Preparer's signature: *Connie Henderson* Date: *2/2/09* Check if self-employed: ☐ Preparer's SSN or PTIN (See Gen. Inst. X): *EIN*

Firm's name (or yours if self-employed), address, and ZIP + 4: *RSM MCGLADREY, INC.*
4801 MAIN STREET, SUITE 400
KANSAS CITY, MO 64112

Phone no.: *816-753-3000*

Form 990 (2007)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information—(See separate instructions.)

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

OMB No 1545-0047

2007

Name of the organization

PUBLIC TELEVISION 19, INC.

Employer identification number

23 7114952

Part I

Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
JEFF EVANS 125 E 31ST ST. KANSAS CITY MO 64108	VP TECHNOLOGY 40.00	73,801.	11,893.	
BONNIE RABICOFF 125 E 31ST ST. KANSAS CITY MO 64108	VP DEVELOPMENT 40.00	85,038.	12,818.	
KATHY CHAPIN 125 E 31ST ST. KANSAS CITY MO 64108	SALES ASSOCIATE 40.00	64,234.	13,688.	
DAN LAUVER 125 E 31ST ST. KANSAS CITY MO 64108	DIR ENGINEER/PLANT 40.00	64,470.	11,567.	
MICHAEL ZELLER 125 E 31ST ST. KANSAS CITY MO 64108	VP EDUC SERV 40.00	114,530.	11,384.	
Total number of other employees paid over \$50,000 ▶	0			

Part II-A

Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the 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
UNITED HEALTH CARE DEPT CH 1051, PALLATINE, IL 60055	HEALTH INSURANCE PROVIDER	353,705.
JOHNSTON FISS INSURANCE 5225 WEST 75TH ST #200, SHAWNEE MISSION, KS 66208	LIABILITY INSURANCE PROVIDE	70,056.
Total number of others receiving over \$50,000 for professional services ▶	0	

Part II-B

Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
PBS 14400 COLLECTIONS CENTER DR, CHICAGO, IL 60693	PROGRAMMING & MEMBERSHIP	1087152.
TOWNSEND COMMUNICATIONS 20 E. GREGORY, KANSAS CITY, MO 64113	PRINTING SERVICES	68,106.
UNITED HEATING & COOLING 301 DUCK ROAD, GRANDVIEW, MO 64030	A/C & FURNACE REPAIRS	58,403.
Total number of other contractors receiving over \$50,000 for other services ▶	0	

Part III Statements About Activities (See page 2 of the instructions)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ <u>11,348.</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) VI-B, LINE I	<u>1</u>	<u>X</u>
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?	<u>2a</u>	<u>X</u>
b Lending of money or other extension of credit?	<u>2b</u>	<u>X</u>
c Furnishing of goods, services, or facilities?	<u>2c</u>	<u>X</u>
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990	<u>2d</u>	<u>X</u>
e Transfer of any part of its income or assets?	<u>2e</u>	<u>X</u>
3 a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	<u>3a</u>	<u>X</u>
b Did the organization have a section 403(b) annuity plan for its employees?	<u>3b</u>	<u>X</u>
c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	<u>3c</u>	<u>X</u>
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	<u>3d</u>	<u>X</u>
4 a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	<u>4a</u>	<u>X</u>
b Did the organization make any taxable distributions under section 4966?	<u>4b</u>	<u>N/A</u>
c Did the organization make a distribution to a donor, donor advisor, or related person?	<u>4c</u>	<u>N/A</u>
d Enter the total number of donor advised funds owned at the end of the tax year	►	<u>N/A</u>
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	►	<u>N/A</u>
f Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	►	<u>0.</u>
g Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year	►	<u>0.</u>

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions.)I certify that the organization is not a private foundation because it is: (Please check only **ONE** 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 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state **▶** _____
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
☐ Type I ☐ Type II ☐ Type III-Functionally Integrated ☐ Type III-Other

Provide the following information about the supported organizations (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total ▶					

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the 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 the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	2,933,338.	2,805,726.	2,586,265.	2,831,764.	11,157,093.
16 Membership fees received	2,530,231.	2,462,018.	2,423,307.	2,524,011.	9,939,567.
17 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	2,339,358.	2,063,664.	1,999,459.	2,335,147.	8,737,628.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	922,465.	988,480.	728,541.	585,892.	3,225,378.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
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 capital assets					
23 Total of lines 15 through 22	8,725,392.	8,319,888.	7,737,572.	8,276,814.	33,059,666.
24 Line 23 minus line 17	6,386,034.	6,256,224.	5,738,113.	5,941,667.	24,322,038.
25 Enter 1% of line 23	87,254.	83,199.	77,376.	82,768.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 486,441.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 0.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 24,322,038.
d Add: Amounts from column (e) for lines. 18 3,225,378. 19					26d 3,225,378.
22 26b					26e 21,096,660.
e Public support (line 26c minus line 26d total)					26f 86.7389%
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
(2006) (2005) (2004) (2003)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A					
(2006) (2005) (2004) (2003)					
c Add: Amounts from column (e) for lines: 15 16					27c N/A
17 20 21					27d N/A
d Add: Line 27a total and line 27b total					27e N/A
e Public support (line 27c total minus line 27d total)					27f N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27g N/A %
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27h N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, 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.

NONE

Part V Private School Questionnaire (See page 9 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 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	
30 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, and scholarships?	30	
31 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? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	31	
<hr/>		
<hr/>		
<hr/>		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
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?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	32d	
<hr/>		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	33h	
<hr/>		
<hr/>		
34 a 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? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35 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	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check ☐ a ☐ if the organization belongs to an affiliated group.Check ☐ b ☐ if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred.)			
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table -		
If the amount on line 40 is -		The lobbying nontaxable amount is -	
Not over \$500,000		20% of the amount on line 40	
Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000	
Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000	
Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000	
Over \$17,000,000		\$1,000,000	
41		41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract 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 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 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period					N/A
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total	
45	Lobbying nontaxable amount					0.
46	Lobbying ceiling amount (150% of line 45(e))					0.
47	Total lobbying expenditures					0.
48	Grassroots nontaxable amount					0.
49	Grassroots ceiling amount (150% of line 48(e))					0.
50	Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the 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:

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h)

Yes	No	Amount
	X	
	X	
	X	
	X	
	X	
X		11,348.
	X	
	X	
		11,348.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Program Service Accomplishments

Form 990, Part III

K-12 Media Services

Educators have long known that children learn better when they can interact with their subject material through a variety of senses, and most children are highly visual learners. This is why for nearly forty years KCPT has provided instructional video services to Kansas City area schools. Our two digital video collections, Learn360 and PowerMediaPlus are delivered over the Internet which means that precise moments from any one of these 23,000 video clips (20 seconds showing water molecules transitioning into a solid, for example) is readily available to a teacher or a student at a moment's notice. More than 40 school districts comprising over 1,000 buildings housing 121,000 K-12 students and 6,000 teachers are served. KCPT staff also trains some 600 teachers per year in a variety of strategies for integrating brief video clips into their lesson plans.

OutReach- Public & Cultural Affairs

We feature quality national PBS favorites like Great Performances at the Met and Masterpiece Mystery, as well as the NewsHour with Jim Lehrer, and Antiques Roadshow. Local shows include Kansas City Week in Review, local media looks at community issues; RUCKUS panel highlighting people, events & issues; Rare Visions & Roadside Revelations highlights folk art and attractions. KC Science, Inc. current issues impacting science education. Call-in special features, "Foreclosed" the Housing Crisis & "Liquid Assets" Our Aging Sewer's. 10-J:History of the Federal Reserve, "Celebration at the Station" at Union Station with the KC Symphony; "Meet the Past" at the Kansas City Library; "Uniquely Kansas City" an arts program showcases music, theater, dance, & visual arts. Coming in Jan. 2009 "Check, Please!" panel of local diners reviewing restaurants

Early Education: KCPT Reads and KCPT Kids

Young children who are read to and who own their own books are more likely to enjoy learning to read, become regular readers themselves and perform better in school and in life. This is why in 1998 the station established KCPT Reads, a program to provide books and parent-literacy training through early education centers serving disadvantaged children. The program has grown and KCPT Reads now distributes approximately 4,000 books each month to children through our 30 partner sites. For most of these children, this is their only source for print material in the house. KCPT Reads has a waiting list of 3,800 children. KCPT Kids is the station's broadcast efforts to help prepare children to succeed in school. Elements include. ·8.5 hours of educational, non- violent, commercial-free PBS children's programming each weekday. ·3 hours each Saturday morning of bi-lingual (Spanish) programming. ·Broadcast interstitial spots modeling parenting skills that contribute to development.

KCPT Community Marketing

As the largest public media service in the Kansas City region, KCPT possesses an array of production & distribution capacities which the station is increasingly using to lead social marketing campaigns in partnership with fellow not-for profits and foundations. KCPT employs skilled professionals including: writers, editors, videographers, a media buyer, graphics and technical people and educators. Strong positive relationships with other local media including the Kansas City Star, KCUR public radio, Time Warner and Comcast cable companies, The Call, Dos Mundos and Carter broadcasting. KCPT has a broadcast signal with a weekly cumulative audience of 452,000 households as measured by Nielsen Ratings. KCPT is increasingly combining these assets to lead multi-media social marketing campaigns.

KC REACH

KC REACH is an alliance between KCPT and seven accredited post-secondary institutions: Johnson County Community College, Kansas City Kansas Community College, Metropolitan Community Colleges, Northwest Missouri State University, Park University, University of Central Missouri and Washburn University. KC REACH is a one-stop center for online learning to help people find the online degree or school program best suited to help them achieve their goals. The KC REACH mission is to improve the quality and scope of time-flexible distance learning options available to non-traditional students in the Kansas City region. KCPT coordinates the overall effort, promotes online learning to the area's adult learners and leads the Quality REACH peer-review program designed to improve the quality of online instruction.

FORM 990	RENTAL INCOME	STATEMENT	1
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KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
RENTAL PROPERTY	1	769,939.
TOTAL TO FORM 990, PART I, LINE 6A		769,939.

FORM 990	SPECIAL EVENTS AND ACTIVITIES	STATEMENT	2
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DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME OR (LOSS)
AUCTION	483,372.		483,372.	469,366.	14,006.
WOMEN'S HEALTH SEMINAR	80,000.	80,000.		0.	0.
DINNER EVENTS	359,924.	105,000.	254,924.	155,648.	99,276.
OYSTER ROYSTER	7,198.	7,198.		1,177.	<1,177.>
OTHER SPECIAL EVENTS	8,028.	302.	7,726.	1,447.	6,279.
TO FM 990, PART I, LINE 9	938,522.	192,500.	746,022.	627,638.	118,384.

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	3
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DESCRIPTION	AMOUNT
UNREALIZED LOSS ON INVESTMENTS	<48,744.>
CHANGE IN VALUE OF INTEREST HELD BY OTHERS	23,600.
TOTAL TO FORM 990, PART I, LINE 20	<25,144.>

FORM 990	OTHER EXPENSES	STATEMENT	4
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DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
PROFESSIONAL SERVICES	270,958.	67,606.	116,442.	86,910.
VEHICLE REPAIR AND MAINTENANACE	2,321.	2,321.		
MEMBERSHIP SERVICES	223,487.	177,290.	46,197.	

PUBLIC TELEVISION 19, INC.

23-7114952

UTILITIES	196,437.	65,766.	78,875.	51,796.
INSURANCE EXPENSE	60,540.	33,711.	10,317.	16,512.
DUES & SUBSCRIPTIONS	41,128.	36,385.	4,241.	502.
PREMIUMS	459,073.			459,073.
MISCELLANEOUS				
EXPENSES	50,313.	6,327.	37,809.	6,177.
TAXES - INCOME &				
PROPERTY	1,669.		1,669.	
OFFICE SUPPLIES	0.			
PROGRAM FEES	1,073,444.	1,073,444.		
ADVERTISING EXPENSE	38,756.	38,756.		
SPECIAL PROJECTS	663,168.	657,070.	1,500.	4,598.
ACCOUNTS RECEIVABLE				
WRITE-OFF	15,000.		15,000.	
DIRECT MAIL EXPENSE	93,207.			93,207.
CAPITAL EXPENSE	4,004.		4,004.	
DEBT SERVICE	52,572.		52,572.	
TOTAL TO FM 990, LN 43	3,246,077.	2,158,676.	368,626.	718,775.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 5
PART III

EXPLANATION

TO BROADCAST EDUCATIONAL PROGRAMMING, PRODUCE AND DISTRIBUTE INSTRUCTIONAL TELEVISION PROGRAMS TO KANSAS AND MISSOURI SCHOOLS, AND TO PROVIDE EDUCATIONAL ACTIVITIES AND LITERATURE TO BE USED IN CONJUNCTION WITH PROGRAMMING.

FORM 990 OTHER PROGRAM SERVICES STATEMENT 6

DESCRIPTION OF OTHER PROGRAM SERVICES	GRANTS AND ALLOCATIONS	EXPENSES
PROMOTIONS	0.	564,811.
TOTAL TO FORM 990, PART III, LINE E		564,811.

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	7
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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LAND & IMPROVEMENTS	418,584.	54,658.	363,926.
BUILDINGS	7,352,087.	3,396,202.	3,955,885.
BROADCAST EQUIPMENT	8,943,577.	6,396,775.	2,546,802.
TRANSMISSION TOWER	108,735.	102,862.	5,873.
FURNITURE & FIXTURES	951,812.	894,750.	57,062.
TOTAL TO FORM 990, PART IV, LN 57	17,774,795.	10,845,247.	6,929,548.

FORM 990	OTHER ASSETS	STATEMENT	8
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DESCRIPTION	BEGINNING OF YEAR	END OF YEAR
BOND ISSUANCE COSTS	132,050.	132,050.
LESS: ACCUMULATED AMORTIZATION	<112,050.>	<115,383.>
DEFERRED LEASE	0.	111,831.
TOTAL TO FORM 990, PART IV, LINE 58	20,000.	128,498.

FORM 990	TAX-EXEMPT BOND LIABILITIES OUTSTANDING	STATEMENT	9
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PURPOSE OF ISSUE

FINANCE CAPITAL EXPENDITURES

USE BY THIRD PARTY	UNEXPENDED BOND PROCEEDS	AMOUNT OF ISSUE OUTSTANDING
<u>NO</u>	0.	650,000.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64A

650,000.

FORM 990

OTHER NOTES AND LOANS PAYABLE

STATEMENT 10

LENDER'S NAME

TERMS OF REPAYMENT

COMMERCE BANK

ON MATURITY

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
10/30/03	11/30/07	300,000.	.00%

SECURITY PROVIDED BY BORROWER

PURPOSE OF LOAN

LINE OF CREDIT

PROVIDE CASH FOR OPERATING
PURPOSE

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION

FMV OF CONSIDERATION	BALANCE DUE
0.	0.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B

FORM 990

OTHER SECURITIES

STATEMENT 11

SECURITY DESCRIPTION

COST/FMV

OTHER
SECURITIESASSETS HELD BY THE GREATER KANSAS CITY COMMUNITY
FOUNDATION

FMV

612,811.

TO FORM 990, LINE 54B, COL B

612,811.

FORM 990 PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS, STATEMENT 12
TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
VICTOR HOGSTROM 125 EAST 31ST STREET KANSAS CITY, MO 64108	PRESIDENT/CEO 40.00	329,876.	31,556.	0.
TRACY MCFERRIN FOSTER P.O. BOX 419580-#323 KANSAS CITY, MO 64141-6580	VICE-CHAIRMAN 0.00	0.	0.	0.
LARRY HAWKS 5350 COLLEGE BOULEVARD OVERLAND PARK, KS 66211	IMMEDIATE PAST CHAIRMAN 0.00	0.	0.	0.
WALTER L. COFER 2555 GRAND KANSAS CITY, MO 64108	DIRECTOR 0.00	0.	0.	0.
SUE ANN FAGERBERG 188 HILLCREST WEST LAKE QUIVIRA, KS 66217-8730	DIRECTOR 0.00	0.	0.	0.
DAVID J. FRANCIS 6431 SAGAMORE RD. MISSION HILLS, KS 66208	DIRECTOR 0.00	0.	0.	0.
STEVE GREEN 4801 ROCKHILL ROAD KANSAS CITY, MO 64110	DIRECTOR 0.00	0.	0.	0.
GREGORY GLORE 12805 OAKMONT DR. KANSAS CITY, MO 64145	DIRECTOR 0.00	0.	0.	0.
BILL GREINER 1010 GRAND BLVD., BOX 419692 KANSAS CITY, MO 64141	DIRECTOR 0.00	0.	0.	0.
ALLAN V. HALLQUIST 4801 MAIN STREET, SUITE 1000 KANSAS CITY, MO 64112	DIRECTOR 0.00	0.	0.	0.
SUSIE HEDDENS 2201 STRATFORD SHAWNEE MISSION, KS 66208	DIRECTOR 0.00	0.	0.	0.

JASON M. MESCHKE 7101 COLLEGE BOULEVARD, SUITE 550 OVERLAND PARK, KS 66210-1891	CHAIRMAN 0.00	0.	0.	0.
GWYN PRENTICE 1025 W. 55TH ST. KANSAS CITY, MO 64113	DIRECTOR 0.00	0.	0.	0.
ANN REGNIER 3400 WEST 119TH STREET LEAWOOD, KS 66209	SECRETARY 0.00	0.	0.	0.
GREGORY A. REID 10990 ROE AVENUE OVERLAND PARK, KS 66211	DIRECTOR 0.00	0.	0.	0.
FRED L. SGROI 1200 MAIN STREET, SUITE 3500 KANSAS CITY, MO 64105-2100	DIRECTOR 0.00	0.	0.	0.
ROBERT J. VAN MAREN 2200 SOUTH 138TH STREET BONNER SPRINGS, KS 66012	DIRECTOR 0.00	0.	0.	0.
CRYSTAL WHITMORE 17004 E. 44TH STREET SOUTH INDEPENDENCE, MO 64055	DIRECTOR 0.00	0.	0.	0.
PETER YELORDA P.O. BOX 419169 KANSAS CITY, MO 64141	TREASURER 0.00	0.	0.	0.
KAREN BUTTON 125 E. 31ST ST. KANSAS CITY, MO 64108	CFO 40.00	76,812.	13,536.	0.
JONATHAN ANGRIST 6632 WENONGA ROAD MISSION HILLS, KS 66208	DIRECTOR 0.00	0.	0.	0.
DAVID BANKS 7301 MISSION RD SHAWNEE MISSION, KS 66208	DIRECTOR 0.00	0.	0.	0.
PAM BERNEKING 800 W. 47TH ST. KANSAS CITY, MO 64112	DIRECTOR 0.00	0.	0.	0.
TERRY A. CALAWAY 12345 COLLEGE BLVD. OVERLAND PARK, KS 66210	DIRECTOR 0.00	0.	0.	0.

WILLIAM COUGHLIN 4801 MAIN ST., STE. 500 KANSAS CITY, MO 64112	DIRECTOR 0.00	0.	0.	0.
JULIE M. EDGE 6825 CHEROKEE LANE MISSION HILLS, KS 66208	DIRECTOR 0.00	0.	0.	0.
LAFAYETTE FORD 1200 MAIN ST. MO8-060-12-13 KANSAS CITY, MO 64105	DIRECTOR 0.00	0.	0.	0.
STEVE FURGASON 600 SPRINT PARWAY - MAILSTOP KSOPHP03-3B671 OVERLAND PARK, KS 66251	DIRECTOR 0.00	0.	0.	0.
DORANNE HUDSON 412 W. 49TH TERR. KANSAS CITY, MO 64112	DIRECTOR 0.00	0.	0.	0.
MARK V. LACY 1100 WALNUT, STE. 3300 KANSAS CITY, MO 64106	DIRECTOR 0.00	0.	0.	0.
MIKE LADDIN 6045 MARTWAY, SUITE 108 MISSION, KS 66202	DIRECTOR 0.00	0.	0.	0.
CAROL MARINOVICH 2405 GRAND BLVD., #700 KANSAS CITY, MO 64108	DIRECTOR 0.00	0.	0.	0.
DON MONTAGUE 4601 MADISON AVENUE KANSAS CITY, MO 64112	DIRECTOR 0.00	0.	0.	0.
SHANI TATE ROSS 1407 GRAND BOULEVARD KANSAS CITY, MO 64106	DIRECTOR 0.00	0.	0.	0.
BECKY TILDEN 11201 RENNER BLVD. LENEXA, KS 66219	DIRECTOR 0.00	0.	0.	0.
OSCAR TSHIBANDA 2300 MAIN, #900 KANSAS CITY, MO 64108	DIRECTOR 0.00	0.	0.	0.
BILL WHITE 6200 SPRINT PARKWAY OVERLAND PARK, KS 66251	DIRECTOR 0.00	0.	0.	0.

PUBLIC TELEVISION 19, INC.

23-7114952

BERNARD WILSON	DIRECTOR			
1111 MAIN STREET	0.00	0.	0.	0.
KANSAS CITY, MO 64105				

FRANK MARSHALL	CFO			
125 E. 31ST STREET	40.00	28,415.	3,466.	0.
KANSAS CITY, MO 64108				

TOTALS INCLUDED ON FORM 990, PART V-A		<u>435,103.</u>	<u>48,558.</u>	<u>0.</u>
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**Application for Extension of Time To File an
Exempt Organization Return**

OMB No. 1545-1709

▶ File 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 Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization	Employer identification number
	PUBLIC TELEVISION 19, INC.	23-7114952
	Number, street, and room or suite no. If a P.O. box, see instructions. 125 EAST 31ST STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. KANSAS CITY, MO 64108	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- ▶ The books are in the care of **KAREN BUTTON**

Telephone No ▶ **816-756-3580**

FAX No ▶

- ▶ If the organization does not have an office or place of business in the United States, check this box ☐
- ▶ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2009**, to file the exempt organization return for the organization named above. The extension is for the organization's return for
- ▶ ☐ calendar year _____ or
- ▶ ☒ tax year beginning **JUL 1, 2007**, and ending **JUN 30, 2008**

- 2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 4-2008)