**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2022 Open to Public Inspection

Department of the Treasury Internal Revenue Service

	For the	2022 calendar year, or tax year beginning , and ending												
<b>B</b> 0	Check if ap	oplicable: C Name of organization		D Employer	identification number									
	Address ch	nange GRAND VALLEY PUBLIC RADIO COMPANY												
Ħ,	Name cha	Doing business as KAFM RADIO		84-1	213380									
H	Name una	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone	number									
_	nitial retur													
	inal returnerminated	City or town, state or province, country, and ZIP or foreign postal code												
$\overline{}$		GRAND JUNCTION CO 81501		<b>G</b> Gross reco	eipts \$ 468,707									
$\exists'$	Amended	F Name and address of principal officer:			ubordinates? Yes X No									
	Application	pending MARIANNE GRIFFIN	H(a) Is this a gro	oup return for s	ubordinates? Yes X No									
		1310 UTE AVE	H(b) Are all sub	ordinates inclu	ded? Yes No									
		GRAND JUNCTION CO 81501	If "No,"	attach a list.	See instructions									
$\overline{}$	Tax-exem	pt status: <b>X</b> 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527	1											
	Website:	www.kafmcommunityradio.org	H(c) Group exer	mntion number										
			ear of formation: 1		M State of legal domicile: CO									
	art I	Summary	car or formation.		M State of legal domicile.									
		triafly describe the organization's mission or most significant activities:												
	' '	KAFM IS A MEMBER-SUPPORTED, VOLUNTEER-ORIENTED COMMUNITY												
ဥ္														
Governance		DEDICATED TO EXCELLENCE AND DIVERSITY IN MUSICAL, CULTURAL, AND PUBLIC SERVICE PROGRAMMING.												
Ş.														
မ		Check this box if the organization discontinued its operations or disposed of more than 25% of	its net assets.	1 1										
∞ ಶ		lumber of voting members of the governing body (Part VI, line 1a)			6									
es.		lumber of independent voting members of the governing body (Part VI, line 1b)			6									
Activities	<b>5</b> T	otal number of individuals employed in calendar year 2022 (Part V, line 2a)		. 5	7									
Act		otal number of volunteers (estimate if necessary)		. 6	225									
	<b>7a</b> T	otal unrelated business revenue from Part VIII, column (C), line 12		7a	0									
	b١	let unrelated business taxable income from Form 990-T, Part I, line 11		7b	0									
			Prior Yea		Current Year									
a	8 (	Contributions and grants (Part VIII, line 1h)		5,674	314,424									
Revenue		Program service revenue (Part VIII, line 2g)	11:	1,460	129,326									
ě		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)			0									
E	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,882	224									
	<b>12</b> T	otal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	569	9,016	443,974									
	13 (	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0									
	14 E	enefits paid to or for members (Part IX, column (A), line 4)			0									
က္က	<b>15</b> S	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	200	6,273	204,057									
xbenses	<b>16a</b> F	calaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)  Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  128,088			0									
<u>ē</u>	b T	otal fundraising expenses (Part IX, column (D), line 25) 128,088												
ம்		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	233	1,299	235,804									
	<b>18</b> T	otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	43'	7,572	439,861									
		Revenue less expenses. Subtract line 18 from line 12	133	1,444	4,113									
ces			Beginning of Cur		End of Year									
sets	<b>20</b> T	otal assets (Part X, line 16)		0,648	562,041									
Net Assets or Fund Balances	<b>21</b> T	otal liabilities (Part X, line 26)		2,928	200,208									
골프	<b>22</b> N	let assets or fund balances. Subtract line 21 from line 20	35'	7,720	361,833									
Pa	art II	Signature Block												
		alties of perjury, I declare that I have examined this return, including accompanying schedules and statements, a		my knowled	lge and belief, it is									
tru	e, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has a	ny knowledge.											
Sig	n	Signature of officer		Date										
Her	е	CYRENE JAGGER EXECUTIVE	DIRECTOR	2										
		Type or print name and title												
		Print/Type preparer's name Preparer's signature	Date	Check	if PTIN									
Paid	ı	Willy Corey, CPA	05/31	/23 self-emp	Dloyed P02130186									
Pre	oarer	Firm's name Soronen, Donley, Patterson CPA PC	' I	irm's EIN	84-1196239									
Use	Only	706 S 9th St # 1	<u> </u>	o EIIN										
	-	Firm's address Grand Junction, CO 81501-3736		hone no.	970-241-8346									
Mav	the IR	S discuss this return with the preparer shown above? See instructions			X Yes No									

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_		,,
_	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	_		x
7	"Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
8	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"	<b>-</b>		<u> </u>
0	complete Schedule D. Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	۰		
•	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	<u> </u>		
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D. Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			٦,
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	420	х	
<b>h</b>	Schedule D, Parts XI and XII	12a	Λ	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	- · · · ·		
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	,		x
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		$\overline{}$

•	onosition of residues continues		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		1.55	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	. 23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	04-		
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	. 24b		$\vdash$
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	.		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	.		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	. 27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			3,5
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	. 28b		<u> </u>
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the experience receive more than COE 000 in non-each contributions? If the a complete School de M	29	х	1
30	Did the organization receive more than \$25,000 in non-cash contributions? If Yes, complete Schedule M.  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	. 23		
00	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes,"	.		
	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	. 35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			l
	related organization? If "Yes," complete Schedule R, Part V, line 2	. 36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			- T
••	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	. 37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	38	х	
P	19? Note: All Form 990 filers are required to complete Schedule O.  art V Statements Regarding Other IRS Filings and Tax Compliance	30	1	
1 (	Check if Schedule O contains a response or note to any line in this Part V			
_	235 Constant C Committee a recoporate of ricto to dry and in the rate v		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	10		x

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (contin	nued)	_		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	7			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	s?		2b	Х	
3a						X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule C	)		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other actions and the calendar year.	uthority of	over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial a	account)	)?	4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Act	counts	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $\dots$			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	on?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	s or				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go	ods				
	and services provided to the payor?				X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					,,
	required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				37
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit cor					X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract					X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form					X
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					
Ü	sponsoring organization have excess business holdings at any time during the year?	i by iiie		8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?					
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which	1	Ī			
	the organization is licensed to issue qualified health plans					
С	Enter the amount of reserves on hand	13c				7-
14a						X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remunera	tion or				٦,
	excess parachute payment(s) during the year?			15		X
40	If "Yes," see instructions and file Form 4720, Schedule N.			40		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment in	ncome?		16		X
17	If "Yes," complete Form 4720, Schedule O.  Section 504(c)(21) organizations. Did the trust any disqualified or other person engage in any activity.	ioc				
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activity			17		
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?					
	ii roo, compicto i citti cocc.					

X

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

Sec	tion A. Governing Body and Management										
					Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	6								
	If there are material differences in voting rights among members of the governing body, or										
	if the governing body delegated broad authority to an executive committee or similar										
	committee, explain on Schedule O.										
b	Enter the number of voting members included on line 1a, above, who are independent	1b	6								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with										
	any other officer, director, trustee, or key employee?			2		X					
3	Did the organization delegate control over management duties customarily performed by or under the direct										
	supervision of officers, directors, trustees, or key employees to a management company or other person?			3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		X					
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?										
6	Did the organization have members or stockholders?			6	X						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint										
	one or more members of the governing body?			7a	X						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,										
	stockholders, or persons other than the governing body?			7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year b	y the f	ollowing:								
а	The governing body?			8a	X						
b	Each committee with authority to act on behalf of the governing body?			8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at										
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X					
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Inter	nal R	evenue Co	de.)							
					Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?			10a		X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,										
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	form?		11a	X						
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	conflic	ts?	12b	X						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"										
	describe on Schedule O how this was done			12c	X						
13	Did the organization have a written whistleblower policy?			13	Х						
14	Did the organization have a written document retention and destruction policy?			14	Х						
15	Did the process for determining compensation of the following persons include a review and approval by										
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official			15a	X						
b	Other officers or key employees of the organization			15b		X					
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement										
	with a taxable entity during the year?			16a		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its										
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the										
	organization's exempt status with respect to such arrangements?			16b							
	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed <b>None</b>										
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 1024-A) is a section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 1024-A) is a section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 1024-A) is a section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 1024-A) is a section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A).	on 501	(c)								
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.										
	Own website Another's website X Upon request Other (explain on Schedule O)										
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	policy,									
00	and financial statements available to the public during the tax year.										
20	State the name, address, and telephone number of the person who possesses the organization's books and records										
	HE ORGANIZATION 1310 UTE AVE RAND JUNCTION CO 8150	16	076	-24	1 . 0	201					
	RAND JUNCTION CO 8150	, 0	<u> </u>	<u>,                                    </u>	<u>0</u>	$\sigma \sigma \tau$					

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the orga	nization nor any	relat	ed o	rgani	zatio	n cor	npe	nsated any current officer, of	director, or trustee.	
(A) Name and title	(B)  Average hours per week (list any hours for related organizations below dotted line)	bo	x, unle ficer a	ess pe	ition more rson is	than or a both a both Highest compensated	an	(D)  Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E)  Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) CYRENE JAGGER  EXECUTIVE DIRECTOR (2) LINDA CALLAHAN	40.00				ヘノ		<u> </u>	<b>P</b> 52/241	0	0
VICE PRESIDENT	0.00	X		Х				0	0	0
(3) JULIA COFFEY  BOARD MEMBER	2.00	x						0	0	0
(4) SOPHIA GIANFRANC SECRETARY	2.00 0.00	x		x				0	0	0
(5) DAKOTAH GRETT BOARD MEMBER	2.00 0.00	x						0	0	0
(6) MARIANNE GRIFFIN	2.00	x		x				0	0	0
(7) SUE HAYES	2.00	x		x				0	0	0
TREASURER (8)	0.00	A		A				0	0	
(9)										
(10)										
(11)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
	(A) Name and title	(B) Average hours per week	of	Position (do not check more than on box, unless person is both a officer and a director/trustee					( <b>D</b> )  Reportable  compensation  from the	(E) Reportable compensation from related	(F) Estimated of oth compens		er ation	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	<ey employee<="" td=""><td>Highest compensated employee</td><td>Former</td><td>organization (W-2/ 1099-MISC/ 1099-NEC)</td><td>organizations (W-2/ 1099-MISC/ 1099-NEC)</td><td></td><td>from ti ganizatio ed orga</td><td></td><td><b>;</b></td></ey>	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)		from ti ganizatio ed orga		<b>;</b>
						ノ	(		)PY					
1b	Subtotal								52,241					
c d	Total from continuation shee Total (add lines 1b and 1c)								52,241					
2	Total number of individuals (increportable compensation from	luding but not lim	nited	to th	nose	listed	d abo	ove)		00,000 of			I	
3	Did the organization list any <b>for</b> employee on line 1a? <i>If</i> "Yes,"	mer officer, direc	ctor,	trust	tee, l	key e	emplo	yee,	, or highest compensated			3	Yes	No X
4	For any individual listed on line organization and related organization and related organization	1a, is the sum of zations greater the	of rep han	ortal \$150	ble c ),000	ompo	ensat 'Yes,'	tion a " con	and other compensation fror mplete Schedule J for such			4		x
5	Did any person listed on line 1	a receive or accr	ue c	ompe	ensa	tion f	rom	any	unrelated organization or inc	dividual		_		х
Sect	for services rendered to the orgion B. Independent Contractor		:S, C	отр	iele .	SCHE	auie	J 101	r sucri persori			5		Λ
1	Complete this table for your five compensation from the organization													
		(A) business address								(B) ion of services		Cor	(C) mpensatio	on
2	Total number of independent or received more than \$100,000 c							ose	listed above) who	0				

Form 990 (2022) GRAND VALLEY PUBLIC RADIO COMPANY 84-1213380 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) (A) (B) Related or exempt (D) Revenue excluded Unrelated function revenue business revenue from tax under sections 512-514 1a Federated campaigns ..... 1a **b** Membership dues ..... 1b c Fundraising events ..... 1c **d** Related organizations ..... 1d e Government grants (contributions) 88,982 **f** All other contributions, gifts, grants, 225,442 and similar amounts not included above . . . . . . . 1f g Noncash contributions included in 67,550 lines 1a-1f ..... 1<u>g</u> h Total. Add lines 1a-1f. 314,424 Business Code UNDERWRITING 515100 110,408 110,408 Program Service 711190 18,918 18,918 f All other program service revenue ..... 129,326 g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties ..... (ii) Personal 6a Gross rents 6a **b** Less: rental expenses 6b c Rental inc. or (loss) d Net rental income or (loss) **7a** Gross amount from (i) Securities (ii) Other sales of assets other than inventory 7a Revenue **b** Less: cost or other basis and sales exps. 7b c Gain or (loss) 7с d Net gain or (loss) ..... **8a** Gross income from fundraising events (not including \$ ..... of contributions reported on line 24,868 1c). See Part IV, line 18 **b** Less: direct expenses ..... 24,733 135 135 c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 ...... **b** Less: direct expenses ..... 9b c Net income or (loss) from gaming activities . 10a Gross sales of inventory, less returns and allowances 10a **b** Less: cost of goods sold ...... 10b c Net income or (loss) from sales of inventory **Business Code** liscellaneous Revenue 89 89 11a OTHER INCOME

89

129,415

443,974

135

d All other revenue

Total. Add lines 11a-11d . . . .

Total revenue. See instructions .

Pa	rt IX Statement of Functional Ex	xpenses			J .
Sect	ion 501(c)(3) and 501(c)(4) organizations must c			ete column (A).	
	Check if Schedule O contains a resp	1			
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
•	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
3	trustees, and key employees	52,241	33,957	5,224	13,060
6	Compensation not included above to disqualified	3=7===	33,733	3,	
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	137,474	81,959	5,267	50,248
8	Pension plan accruals and contributions (include		-	-	
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	14,342	8,763	793	4,786
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	32,562	3,504	27,144	1,914
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
40	(A) amount, list line 11g expenses on Schedule O.)	30,607	F 000	10 607	6 000
12	Advertising and promotion	17,459	5,000 10,096	19,607 1,821	6,000 5,542
13	Office expenses	9,649	6,040	1,609	2,000
14 15	Information technology	9,049	0,040	1,009	2,000
16	Royalties	17,647	11,716	843	5,088
17	Occupancy Travel	17,017	11/110	015	3,000
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	6,661	4,070	368	2,223
21	Payments to affiliates		_		
22	Depreciation, depletion, and amortization	18,480	11,291	1,022	6,167
23	Insurance	9,107	5,565	504	3,038
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	RADIO ROOM	23,166	10 -10	23,166	
b	PROGRAMMING	18,512	18,512		11 00-
C	SUPPLIES	11,291		11 000	11,291
d	MEMBERSHIPS AND DUES	11,030	C C01	11,030	16 824
e	All other expenses	29,633	6,601	6,301	16,731
25 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	439,861	207,074	104,699	128,088
20	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
	1011011111g 301 70 2 (130 730-720)	1			

Form 990 (2022) GRAND VZ
Part X Balance Sheet

				<b>(A)</b> Beginning of year		(B) End of year
1	Cash—non-interest-bearing			228,042	1	204,923
2	Savings and temporary cash investments				2	
3	Pledges and grants receivable, net		· · · · · · · · · · · · · · · · · · ·		3	
4	Accounts receivable, net			15,285	4	19,833
5	Loans and other receivables from any current or former					
	trustee, key employee, creator or founder, substantial co	ntributor, or 3	5%			
	controlled entity or family member of any of these persor				5	
6	Loans and other receivables from other disqualified pers					
	under section 4958(f)(1)), and persons described in section			6		
7	Notes and loans receivable, net				7	
8	Inventories for sale or use	· · · · · · · · · · · · · · · · · · ·	31,000	8	31,000	
9	Prepaid expenses and deferred charges			2,793	9	8,008
108	<b>a</b> Land, buildings, and equipment: cost or other			_		
	basis. Complete Part VI of Schedule D	10a	661,117			
l b	Less: accumulated depreciation	400	362,840	293,528	10c	298,277
11	Investments—publicly traded securities			_	11	
12	Investments—other securities. See Part IV, line 11				12	
13	Investments—program-related. See Part IV, line 11			13		
14	Intangible assets		l		14	
15	Other assets. See Part IV, line 11				15	
16	Total assets. Add lines 1 through 15 (must equal line 33			570,648	16	562,041
17	Accounts payable and accrued expenses	•		13,932	17	16,138
18	Grants payable				18	•
19	Deferred revenue		29,129	19	29,296	
20	Tax-exempt bond liabilities		-	20	•	
21	Escrow or custodial account liability. Complete Part IV	<b>/</b>		21		
22	Loans and other payables to any current or former office					
	trustee, key employee, creator or founder, substantial co		5%			
	controlled entity or family member of any of these persor				22	
23				169,867	23	154,774
24	Unsecured notes and loans payable to unrelated third pa			, , ,	24	
25	Other liabilities (including federal income tax, payables to					
	parties, and other liabilities not included on lines 17-24).		t X			
	of Schedule D	oop.oto . a.			25	
26				212,928	26	200,208
<del>  _ `</del>	Organizations that follow FASB ASC 958, check here					
	and complete lines 27, 28, 32, and 33.	- Ш				
27				350,573	27	338,154
27 28				7,147	28	23,679
	Organizations that do not follow FASB ASC 958, che		1	,		- 7
	and complete lines 29 through 33.	_	1			
29	Capital stock or trust principal, or current funds			29		
30	Paid-in or capital surplus, or land, building, or equipment				30	
31	Retained earnings, endowment, accumulated income, or				31	
32	Total and needs on final belowers			357,720	32	361,833
33	Total liabilities and net assets/fund balances			570,648	33	562,041

Form **990** (2022)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4	43,	974
2	Total expenses (must equal Part IX, column (A), line 25)	2	4.		861
3	Revenue less expenses. Subtract line 2 from line 1	3			<u> 113</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3	57 <b>,</b> '	720
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	3	61,8	833
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2022)

#### **SCHEDULE A**

(Form 990)

### **Public Charity Status and Public Support**

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 or Form 990-EZ.

Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number GRAND VALLEY PUBLIC RADIO COMPANY 84-1213380

The	orga	nization is not a	a private foundation because	it is: (For lines 1 through 12, che	eck only o	ne box.)						
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2		A school desc	cribed in section 170(b)(1)(A	A)(ii). (Attach Schedule E (Form	990).)							
3		A hospital or	a cooperative hospital service	e organization described in sect	ion 170(b	)(1)(A)(iii)	).					
4		A medical res	search organization operated	in conjunction with a hospital de	scribed in	section	170(b)(1)(A)(iii). Enter the hosp	pital's name,				
		city, and state	<b>:</b> :									
5		An organization	on operated for the benefit of	a college or university owned or	operated	by a gove	ernmental unit described in					
	section 170(b)(1)(A)(iv). (Complete Part II.)											
6												
7	An organization that normally receives a substantial part of its support from a governmental unit or from the general public											
	$\equiv$	described in section 170(b)(1)(A)(vi). (Complete Part II.)										
8	Ш	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)										
9		An agricultura	al research organization descri	ribed in section 170(b)(1)(A)(ix	) operated	l in conjur	nction with a land-grant college					
		or university of	or a non-land-grant college of	agriculture (see instructions). Er	nter the na	me, city,	and state of the college or					
		university:										
10	Ш	•	•	more than 33 1/3% of its suppor								
		•	-	t functions, subject to certain ex- I unrelated business taxable inco		. ,						
				1975. See <b>section 509(a)(2).</b> (			i i tax) iioiii busiiiesses					
11				clusively to test for public safety			(a)(4).					
12	П	ŭ	•	clusively for the benefit of, to pe			` , ` ,	of				
	ш	one or more	publicly supported organizatio	ns described in section 509(a)	1) or sect	on 509(a	a)(2). See section 509(a)(3).	Check				
		the box on lin	es 12a through 12d that desc	cribes the type of supporting orga	anization a	ind compl	ete lines 12e, 12f, and 12g.					
	а	Type I. A	supporting organization oper	rated, supervised or controlled b	y its supp	orted org	anization(s), typically by giving					
			• ,, ,	er to regularly appoint or elect a		f the direc	ctors or trustees of the					
		一 … `		mplete Part IV, Sections A and								
	b			ervised or controlled in connection			• ,,,					
			•	ng organization vested in the same	me persor	ns that co	ntrol or manage the supported					
	_		on(s). You must complete I	upporting organization operated i	in connect	ion with	and functionally integrated with					
	С			ructions). <b>You must complete F</b>								
	d	$\overline{}$	• ,,,,	. A supporting organization opera				3)				
				organization generally must satisf				,				
		requireme	ent (see instructions). You m	ust complete Part IV, Sections	A and D	, and Par	rt V.					
	е			ved a written determination from			Type I, Type II, Type III					
				-functionally integrated supportin	g organiza	ation.						
	f		nber of supported organizatio									
	g		ollowing information about the	.,,	1 (1 )		I	<u> </u>				
(		ne of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–10		organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see				
	0.	ga <u></u>		above (see instructions))		ment?	instructions)	instructions)				
					Yes	No						
(A)												
(B)												
(C)												
(D)		<u> </u>										
(E)												
Tota	I											
F		mark Dadmetter	A at Nation and the Instruction	an for Form 000 or 000 F7				Cabadula A (Farm 000) 2022				

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support					•	
Caler	dar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	342,259	364,911	448,658	406,341	314,424	1,876,593
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	342,259	364,911	448,658	406,341	314,424	1,876,593
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						1,876,593
Sec	tion B. Total Support			<u>.</u>			-
Caler	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	342,259	364,911	448,658	406,341	314,424	1,876,593
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on			γ	10,555		10,555
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	7,022		143	39,660		46,825
11	<b>Total support.</b> Add lines 7 through 10						1,933,973
12	Gross receipts from related activities, etc. (	see instructions)				12	241,202
13	First 5 years. If the Form 990 is for the org						
	organization, check this box and stop here						
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2022 (line 6,	column (f) divided b	y line 11, column (	f))		14	97.03%
15	Public support percentage from 2021 Scheo	lule A, Part II, line 1	14			15	96.08%
16a	33 1/3% support test—2022. If the organiz	zation did not check	the box on line 13	, and line 14 is 33 1	/3% or more, chec	k this	
	box and stop here. The organization qualifi	es as a publicly sup	pported organizatio	n			X
b	33 1/3% support test—2021. If the organize	zation did not check	a box on line 13 o				
	this box and <b>stop here.</b> The organization q						
17a	10%-facts-and-circumstances test—202						
	10% or more, and if the organization meets	the facts-and-circu	mstances test, che	ck this box and <b>sto</b>	p here. Explain in		
	Part VI how the organization meets the fact	s-and-circumstance	s test. The organiz	ation qualifies as a	publicly supported		
	organization						
b	10%-facts-and-circumstances test—202	1. If the organization	n did not check a b	ox on line 13, 16a,	16b, or 17a, and lir	ne	
	15 is 10% or more, and if the organization	meets the facts-and	-circumstances tes	t, check this box and	d <b>stop here.</b> Expla	ain	
	in Part VI how the organization meets the f	acts-and-circumstan	ices test. The orga	nization qualifies as	a publicly supporte	ed	
	organization						
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b,	17a, or 17b, check t	this box and see		
	instructions						L

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	, ,		, <b>1</b>	•	,	
Caler	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	<b>Public support.</b> (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 2022	(f) Total
9	Amounts from line 6	(5) 25.5		(0) 020	(4) 202 :	(0) 2022	(.)
10a	Gross income from interest, dividends,						
IVa	payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the organization, check this box and stop here	_					·
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2022 (line 8,	• •		(f))		15	%
16	Public support percentage from 2021 Sched	dule A, Part III, line	: 15			16	%
	tion D. Computation of Investme						· · · · · · · · · · · · · · · · · · ·
17	Investment income percentage for 2022 (lin			column (f))		17	%
18	Investment income percentage from 2021		I II.a. 47			140	%
19a	33 1/3% support tests—2022. If the organ	nization did not che					
	17 is not more than 33 1/3%, check this box		= -				Ц
b	33 1/3% support tests—2021. If the organ						
	line 18 is not more than 33 1/3%, check this		_				
20	<b>Private foundation.</b> If the organization did	not check a box of	n line 14, 19a, or 1	9b, check this box	and see instructions	3	

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#### Part IV **Supporting Organizations**

(Complete only if you checked a box on line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

1	Are all of the organization's supported organizations listed by name in the organization's governing
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by
	class or purpose, describe the designation. If historic and continuing relationship, explain.

- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign b supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- Did the organization add, substitute, or remove any supported organization g the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? С
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
	3b		
	_		
	3с		
	4a		
	Tu		
	4b		
	4c		
	-10		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
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GRAND VALLEY PUBLIC RADIO COMPANY

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		1
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the lifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions)	ions).		
2	Activities Test. Answer lines 2a and 2b below.	. [	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Schedu	le A (Form 990) 2022 GRAND VALLEY PUBLIC RADIO CC	MPA	NY 84-12133	380 Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nizati	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 2			
	instructions. All other Type III non-functionally integrated supporting organizations must co	mplete	e Sections A through E.	
Sect	ion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3_	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for gleater amount see instructions).	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally integrated Typ	e III sı	upporting organization	

Schedule A (Form 990) 2022

(see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Secti	ion D – Distributions				Current Year	
1	Amounts paid to supported organizations to accomplish exempt purposes	3		1		
2	Amounts paid to perform activity that directly furthers exempt purposes of					
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purposes of support	ed organizations		3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required—provide details	s in Part VI)		5		
6	Other distributions (describe in Part VI). See instructions.			6		
	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the organization	n is responsive		8		
	(provide details in Part VI). See instructions.					
9	Distributable amount for 2022 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount	/a\	(ii)	10	/iii\	
Socti	ion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions		(iii) Distributable	
Secu	on E - Distribution Allocations (see Instructions)	Excess Distributions	Pre-2022	•	Amount for 2022	
1	Distributable amount for 2022 from Section C. line 6		F16-2022		Amount for 2022	
	Underdistributions, if any, for years prior to 2022					
-	(reasonable cause required–explain in Part VI). See					
	instructions.					
3	Excess distributions carryover, if any, to 2022					
а	From 2017					
b	From 2018					
	From 2019					
	From 2020					
е	From 2021					
f	Total of lines 3a through 3e					
	Applied to underdistributions of prior years					
	Applied to 2022 distributable amount					
<u>i</u>	Carryover from 2017 not applied (see instructions)					
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2022 from					
	Section D, line 7: \$					
	Applied to underdistributions of prior years					
	Applied to 2022 distributable amount  Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2022, if					
J	any. Subtract lines 3g and 4a from line 2. For result					
	greater than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2022. Subtract lines 3h					
•	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2023. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
a	Excess from 2018					
b	Excess from 2019					
С	Excess from 2020					
d	Excess from 2021					
е	Excess from 2022					

Schedule A (Form 990) 2022

Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Part I	I, Line 10 - Other Income Detail
	\$ 46,825
	COPY
•	
•	
•	

# Schedule B (Form 990)

**Schedule of Contributors** 

2022

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

**2022** 

OMB No. 1545-0047

Name of the organization

GRAND VALLEY PUBLIC RADIO COMPANY

84-1213380

Organization type (check one):								
Filers of:		Section:						
Form 990	or 990-EZ	X 501(c)( 3 ) (enter number) organization						
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation						
		527 political organization						
Form 990	)-PF	501(c)(3) exempt private foundation						
		4947(a)(1) nonexempt charitable trust treated as a private foundation						
		501(c)(3) taxable private foundation						
Note: Or instruction	nly a section 501(c)(7), ns.	vered by the <b>General Rule</b> or a <b>Special Rule</b> . (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See						
c	For an organization filing	ig Form 990, 990-EZ, or 990-PF hat received, during the year, contributions totaling \$5,000 roperty) from any one contributor. Complete Parts I and II. See instructions for determining a libutions.						
Special	Rules							
r	regulations under section 16b, and that received f	scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % support test of the ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or from any one contributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000; or in (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
c	contributor, during the y iterary, or educational p	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering ead of the contributor name and address), II, and III.						
	contributor, during the y contributions totaled mo during the year for an e General Rule applies t	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, contributions exclusively for religious, charitable, etc., purposes, but no such ore than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the to this organization because it received nonexclusively religious, charitable, etc., contributions during the year \$						
must and	swer "No" on Part IV, lir	sn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it ne 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line the filing requirements of Schedule B (Form 990).						

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

Schedule B (Form 990) (2022)

GRAND VALLEY PUBLIC RADIO COMPANY

Employer identification number 84-1213380

Part I	art I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	CORPORATION FOR PUBLIC BROADCASTING 401 9TH STREET WASHINGTON DC 20004	\$ 88,982	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	PETER ROBINSON 1310 UTE AVENUE GRAND JUNCTION CO 81501	\$ 25,191	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a)	(b)	(c)	(d)			
3	MARLA PAYTON LEGACY 1310 UTE AVENUE  GRAND JUNCTION  0 81501	Total contributions 45,607	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Name, auuress, anu zir + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			

# SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

#### **Supplemental Financial Statements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

2022 Open to Public

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

GRAND VALLEY PUBLIC RADIO COMPANY 84-1213380 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year \_\_\_\_\_ Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) 3 Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included 2c d Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ..... 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X .

Part III Organizations Maintaining			reasures, o	r Other Simil	ar Asse	ts (contin		age <b>L</b>
3 Using the organization's acquisition, accession, collection items (check all that apply):	and other records,	check any of the follo	wing that make	significant use of	its	•		
a Public exhibition	d 🗌	Loan or exchange pr	ogram					
b Scholarly research		Other						
c Preservation for future generations								
4 Provide a description of the organization's colle	ctions and explain h	now they further the c	rganization's ex	empt purpose in	Part			
XIII.								
<b>5</b> During the year, did the organization solicit or rassets to be sold to raise funds rather than to be		•	•			Пу	′es	No
Part IV Escrow and Custodial Arra		it of the organization	o conconorr			'	<u> </u>	
Complete if the organization a 990, Part X, line 21.	_	on Form 990, P	art IV, line 9	, or reported a	n amoui	nt on Forn	n	
1a Is the organization an agent, trustee, custodian	or other intermedia	ry for contributions or	other assets ne	ot				
included on Form 990, Part X?						🗌 Y	'es	No
<b>b</b> If "Yes," explain the arrangement in Part XIII an								
						Amou	nt	
c Beginning balance					1c			
d Additions during the year					1d			
e Distributions during the year					1e			
f Ending balance					1f			
2a Did the organization include an amount on Form							es_	No
b If "Yes," explain the arrangement in Part XIII. C	heck here if the exp	lanation has been pro	ovided on Part	XIII				
Part V Endowment Funds.	1.607			•				
Complete if the organization a						.		
	(a) Current year	(b) Prior year	(c) Two yea	irs back (d) Ti	ree years bad	ck (e) Fo	our years	back
1a Beginning of year balance								
<b>b</b> Contributions			lacksquare					
c Net investment earnings, gains, and losses		UL	I					
d Grants or scholarships								
e Other expenditures for facilities and								
programs								
f Administrative expenses								
g End of year balance								
2 Provide the estimated percentage of the current	•	(line 1g, column (a)) I	neld as:					
<b>a</b> Board designated or quasi-endowment	%							
<b>b</b> Permanent endowment %								
c Term endowment %								
The percentages on lines 2a, 2b, and 2c should	l equal 100%.							
3a Are there endowment funds not in the possessi	on of the organization	on that are held and	administered for	the				
organization by:							Yes	No
(i) Unrelated organizations						3a(i)	1	
(ii) Related organizations						3a(ii)		
<b>b</b> If "Yes" on line 3a(ii), are the related organization	ons listed as require	d on Schedule R?				3b		
4 Describe in Part XIII the intended uses of the o	rganization's endow	ment funds.						
Part VI Land, Buildings, and Equip								
Complete if the organization a	answered "Yes"	on Form 990, Pa	art IV, line 1	1a. See Form	990, Pa	rt X, line 1	0.	
Description of property	(a) Cost or other b	pasis (b) Cost of	r other basis	(c) Accumulate	ed	(d) Boo	k value	
	(investment)	(c	ther)	depreciation				
<b>1a</b> Land			40,018					018
<b>b</b> Buildings			460,661	229	,276	2	:31 <u>,</u>	385
c Leasehold improvements								
<b>d</b> Equipment			135,895		,250			645
e Other			24,543	9	,314			229
Total. Add lines 1a through 1e. (Column (d) must equ	al Form 990, Part λ	K, column (B), line 10	c.)		<u></u>	2	<u> 198</u>	277

Part VII	Investments – Other Securities.	Form 000 Dort IV lin	20 14h Cao Farm 000 Da	art V line 10
	Complete if the organization answered "Yes" on I			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-yea	
(4) Fire it			Cost of end-of-year	market value
(1) Financial				
	ld equity interests			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
,	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.			
	Complete if the organization answered "Yes" on I	Form 990, Part IV, lir	<u>ne 11c. See Form 990, Pa</u>	rt X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of	valuation:
			Cost or end-of-year	r market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 13.			
Part IX	Other Assets.	000 Dart IV liv	44-l O F 000 P-	ort V. Born 45
	Complete if the organization answered "Yes" on I	Form 990, Part IV, III	ie 11d. See Form 990, Pa	
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on I	Form 990, Part IV, Iir	ne 11e or 11f.See Form 9	990, Part X,
	line 25.			
1.	(a) Description of liability			(b) Book value
(1) Federal	income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	a (h) must equal Form 000 Part V and (P) line 25 )			
	n (b) must equal Form 990, Part X, col. (B) line 25.)	ato to the ergenization's fin	annial statements that renert- the	2
∠. Liability for	uncertain tax positions. In Part XIII, provide the text of the footnot	ble to the organization's fir	ianciai statements that reports th	e

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

Page 4

Pa	Reconciliation of Revenue per Audited Financial S Complete if the organization answered "Yes" on Form		•	urn.	
1	Total revenue, gains, and other support per audited financial statements			1	468,707
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			•	1007101
	Net unrealized gains (losses) on investments	2a			
h	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	468,707
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)		-24,733		
	Add lines 4a and 4b		-	4c	-24,733
5		· · · · · · · · · · · · · · · · · · ·		5	443,974
Pa	art XII Reconciliation of Expenses per Audited Financial			eturn	
	Complete if the organization answered "Yes" on Form				
1	Total expenses and losses per audited financial statements			1	464,594
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				-
а	Donated services and use of facilities	2a			
	Prior year adjustments				
	Other losses				
	Other (Describe in Part XIII.)		24,733		
	Add lines 2a through 2d		_	2e	24,733
3	Subtract line 2e from line 1			3	439,861
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line_7b	4a			
b	Other (Describe in Part XIII.)	46			
	Add lines 4a and 4b	PY		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part Line 18			5	439,861
Pa	art XIII Supplemental Information.				
; Pa	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XI, Line 4b - Revenue Amounts Incl	provide any additional info	ormation.		
	PECIAL EVENT EXPENSES		\$		-24,733
	art XII, Line 2d - Expense Amounts Inc	luded in Fin	ancials -		
	PECIAL EVENT EXPENSES	14464 111 1111	_		24,733

GRAND VALLEY PUBLIC RADIO COMPANY

Schedule D (Fo					RADIO	COMPANY	84-1213380	Page <b>5</b>
Part XIII	Supplementa	l Inform	nation (conti	inued)				
						ÞΥ		

#### SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the
organization entered more than \$15,000 on Form 990-EZ, line 6a.

u Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

u Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

GRAND VALLEY PUBLI	C RADIO (	COMP	ANY	•	84-12133	
Part I Fundraising Activities. Complete if						
Form 990-EZ filers are not required t	o complete thi	s part				
1 Indicate whether the organization raised funds through ar	ny of the following	activitie	s. Ch	eck all that apply.		
Mail solicitations e Solicitation of non-government grants						
<b>b</b> Internet and email solicitations	f Solicitation	of go	vernm	ent grants		
c Phone solicitations	g Special fu	ndraisir	ng eve	ents		
d In-person solicitations						
2a Did the organization have a written or oral agreement with or key employees listed in Form 990, Part VII) or entity in	th any individual (i n connection with p	ncludin profess	g officional f	ers, directors, trustees, undraising services?		Yes No
b If "Yes," list the 10 highest paid individuals or entities (fur compensated at least \$5,000 by the organization.	ndraisers) pursuant			nts under which the fundra	iser is to be	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	raise custo cont	id fund- r have ody or rol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
		<b>)</b>    -		Y		
4	<b>U</b>	4				
7						
5						
6						
7						
8	1					
9						
0						
otal						
List all states in which the organization is registered or lic registration or licensing.	ensed to solicit co	ntributio	ons or	has been notified it is exe	empt from	

GRAND VALLEY PUBLIC RADIO COMPANY 84-1213380 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events FUND RAISING EV None (add col. (a) through col. (c)) (event type) (event type) (total number) Revenue 1 Gross receipts 24,868 24,868 2 Less: Contributions 3 Gross income (line 1 minus 24,868 24,868 line 2) 4 Cash prizes ..... 5 Noncash prizes ...... 6 Rent/facility costs ..... Direct Expenses 7 Food and beverages 8 Entertainment ..... 24,733 24,733 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answe 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes ..... **Direct Expenses** 3 Noncash prizes ..... 4 Rent/facility costs ...... 5 Other direct expenses 6 Volunteer labor ..... No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: Is the organization licensed to conduct gaming activities in each of these states? If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Sche	dule G (Form 990) 2022 GRAND VALLEY PUBLIC RADIO COMPANY 84-1213380			Page	<b>3</b>
11	Does the organization conduct gaming activities with nonmembers?		Yes	П	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity			=	
	formed to administer charitable gaming?		Yes	Ш	No
13	Indicate the percentage of gaming activity conducted in:				
а	The organization's facility	13a			<u>%_</u>
b	An outside facility	13b		'	<u>%_</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:				
	Name				
	Address				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes		No
b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the			_	
С	amount of gaming revenue retained by the third party \$				
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation \$				
	Description of services provided				
	Director/officer Employee Independent contractor				
17	Mandatory distributions:				
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to				
	retain the state gaming license?		Yes		No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or				
	spent in the organization's own exempt activities during the tax year \$				
Pa	<b>Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (iii) an Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional inform See instructions.		d		

#### SCHEDULE M (Form 990)

#### **Noncash Contributions**

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Open To Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection Employer identification number

		LEY F	UBLIC RADIO	COMPANY	84-	1213380		
Pa	rt I Types of Property							
		(a) Check if applicable	<b>(b)</b> Number of contributions or items contributed	(c)  Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) d of determining contribution amounts		
1	Art — Works of art			January Company				
2	Art — Historical treasures							
3	Art — Fractional interests							
4	Books and publications							
5	Clothing and household							
6	goods Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded							
10	Securities — Closely held stock							
11	Securities — Partnership, LLC,							
	or trust interests							
12	Securities — Miscellaneous							
13	Qualified conservation							
	contribution — Historic							
	structures							
14	Qualified conservation							
	contribution — Other			JP Y				
15	Real estate — Residential							
16	Real estate — Commercial							
17	Real estate — Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts			47 77				
25	Other ()	X	1	67,550				
26	Other ()							
27	Other ()							
28	Other (							
29	Number of Forms 8283 received by the	U	,					
	which the organization completed For	m 8283, P	art V, Donee Acknowledg	gement [	29		Yes	No
200	During the year did the expeniention	raaaii.a bu	acatribution only property	renewted in Dowt I lines 4 th	vo. rah		162	NO
30a	During the year, did the organization at 28, that it must hold for at least 3 year	-		·	•			
	•			•		200		Х
h	used for exempt purposes for the ent		period?			30a		Λ
b 31	If "Yes," describe the arrangement in Does the organization have a gift acc		diay that requires the revi	ow of any ponetandard				
31	ŭ		•	•		31	х	
32a	contributions?  Does the organization hire or use thir	d narties o	r related organizations to	solicit process or sell popo	 rash		42	
JŁa	· ·	•	· ·	• •		32a		х
b	contributions?  If "Yes," describe in Part II.					32d		
33	•	ount in coli	ımn (c) for a type of pror	perty for which column (a) is	checked.			
	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,  describe in Part II.							

# SCHEDULE O (Form 990)

## Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization

Name of the organization

Name of the organization

GRAND VALLEY PUBLIC RADIO COMPANY

Employer identification number 84-1213380

Form 990, Part VI, Line 6 - Classes of Members or Stockholders
MEMBERS ARE THOSE WHO FINANCIALLY SUPPORT THE ORGANIZATION.
Form 990, Part VI, Line 7a - Election of Members and Their Rights
THE BOARD IS ELECTED BY THE MEMBERS.
Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
990 IS CIRCULATED AMONG THE BOARD MEMBERS FOR REVIEW.
Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy  BOARD MEMBERS SIGN A CONFLICT OF INTEREST STATEMENT ANNUALY.
Form 990, Part VI, Line 15a - Compensation Process for Top Official
EXECUTIVE DIRECTOR COMPENSATION IS SET BY THE BOARD.
Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
UPON REQUEST

## 4562

Internal Revenue Service Name(s) shown on return

#### **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

OMB No. 1545-0172

Go to www.irs.gov/Form4562 for instructions and the latest information. Identifying number

179

GRAND VALLEY PUBLIC RADIO COMPANY 84-1213380 Business or activity to which this form relates Indirect Depreciation Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1,080,000 1 Maximum amount (see instructions) Total cost of section 179 property placed in service (see instructions) 2 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,700,000 3 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . 5 (a) Description of property (b) Cost (business use only) 6 Listed property. Enter the amount from line 29 7 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 9 Carryover of disallowed deduction from line 13 of your 2021 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 Carryover of disallowed deduction to 2023. Add lines 9 and 10, less line 12. 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year. See instructions Property subject to section 168(f)(1) election 15 15 18,479 Other depreciation (including ACRS) MACRS Depreciation (Don't include listed property. See instructions.) Section A MACRS deductions for assets placed in service in tax years beginning before 2022 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2022 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use (e) Convention (f) Method (a) Depreciation deduction only-see instructions) service 19a 3-year property b 5-year property С 7-year property 10-year property 15-year property е 20-year property 25-year property S/I 25 vrs. Residential rental 27.5 yrs. MM S/L 27.5 yrs. property MM S/L MM 39 yrs. S/L i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12-year 12 yrs. S/I 30-year MM S/I 30 yrs. 40-year MM 40 yrs. Part IV **Summary** (See instructions.) Listed property. Enter amount from line 28 ...... 21 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 18,479 here and on the appropriate lines of your return. Partnerships and S corporations—see instructions .... For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

# Federal Asset Report Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Prior  1 2 3 4 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 24 25 26 27 28 29 30 31	Prior MACRS:  1 ANTENNA PARAFLECTOR SCALA 2 SINE SYSTEMS RP-8 RELAY PANEL 3 66800-052 PWR DIVIDER SCALA 4 APHEX 320A A 6 (2) ANDREW VFX-NMNM-3 JUMPER 7 AUDIOARTS R-60-12/8 STERIO CONSO: 8 AUDIOARTS DMP 60 DUAL MIC PEAM 9 (3) OC WHITE 51900 BOOM RISER/ARM 10 DENON TU1500RD TURNER WITH RAC 11 MIDDLE ATLANTIC RK 20 EQUUIPMEN 12 (2) JBL 4206 MONITOR SPEAKER 13 SYMETRIX 420 POWER AMP 14 HENRY MATCHBOX 15 HENRY SUPERLAY 16 (2) STEREO PHONE PREAMP 17 (2) POWER SUPPLY 18 (3) STUDIO MICROPHONE 19 (4) UTILITY SHELVES 20 PIONEER CD PLAYER 21 200 FT AIDEN 16 CABLE 22 CONNECTORS, PLUGSM PLATESM ETC 24 8 DESKS 25 47 CHAIRS 26 29 TABLES 27 2 BOOK SHELVES 28 8 FILE CABINETS 29 20 LP/CD RACKS 30 UNITEL PHONE SYSTEM		628 276 142 988 82 4,234 257 297 262 83 278 288 139 178 152 20 867 93 360 98 550 1,175 540 175 450 2,000 4,000 206		628 276 142 988 82 4,234 257 297 262 83 278 288 139 178 152 20 867 93 209 360 98 550 1,175 540 175 4,000 4,000	7 HY 200DB	628 276 142 988 82 4,234 257 297 262 83 278 288 139 178 152 20 867 93 209 360 98 550 1,175 540 175 4,000 4,000 200	
32 33 34 35 36 37 38 39 40 41 42 43 45 46 47 84	8 LAMPS 12 BULLETIN/WHITE BOARDS AUDIOCARTS R-60-18 STEREO CONSO (2) TECHNICS SL 1200 TURNTABLE (4) SHURE SM-7 MICROPHONE SYMETRIC 420 POWER AMP JBL 4206 MONITOR SPEAKER (4) AKG K240M HEADPHONE (2) MIDDLE ATLANTIC RK 16 EQUIP R. INSTALLATION - HARDWARE SHIPPING DON MUSSELL - INSTALLATION JOSEPH KONICEK - INSTALLATION DIGITAL RECORDER - STUDIO D ZZOUNDS AUDIO EQUIPMENT - STUDI AUDIO EQUIPMENT - STUDIO D 100 WATT TRANSMITTER CROWN FRONT DOOR KEYPAD SYSTEM	6/30/01 6/30/01 6/30/01 6/30/01 6/30/04	200 2,200 9,100 1,639 286 252 312 137 1,195 388 2,698 1,303 479 600 1,287 4,496 1,157 47,782	<b>PY</b>	200 2,200 9,100 1,232 1,639 286 252 312 137 1,195 388 2,698 1,303 239 300 643 4,496 578	7 HY 200DB	200 2,200 9,100 1,232 1,639 286 252 312 137 1,195 388 2,698 1,303 479 600 1,287 4,496 1,157 47,782	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Other 5 44 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64	CONSTRUCTION - 1310 UTE DENON DNC615 CD PLAYER 98656-G501 6810-1R-EF-DA88.10 ENDEC EAS ENCODER/DECODER NAUTEL VS1-EIA 1300WATT FM TRAN RFS CABLEWAVES ADP20-C DEHYDR. CABLING, ATTACHMENTS AND FREIG BEXT STL 10 WATT 960 MHZ TRANSM BEXT LDR STL 960 MHZ RECEIVER OPTIMOD-8300 FM AUDIO PROCESSEI LEA SP100-120/240SP SURGE SUPRESSINSTALL ANTENNA - REX INDUSTRIES AF225 FM RECEIVER ELECTRICAL UPGRADE - AMP-PRO INSTALLATION - DATAVIX CABLEWAVE SALES TAX INSTALLATION - DATAVIX	10/05/11 10/05/11 10/05/11 10/05/11 10/05/11 10/05/11	63 4,245 897 15,308 2,085 7,140 1,207 2,770 2,595 2,425 4,696 469 3,500 545 514 1,611 138 811 2,236		63 4,245 897 15,308 2,085 7,140 1,207 2,770 2,595 2,425 4,696 469 3,500 545 514 1,611 138 811 2,236	7 MO S/L 10 MO S/L 7 MO S/L 7 MO S/L 10 MO S/L 10 MO S/L 7 MO S/L 10 MO S/L	63 2,292 897 15,308 2,085 7,140 1,207 2,770 2,595 2,425 4,696 469 3,500 545 514 1,611 138 811 2,236	0 109 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

# Federal Asset Report Form 990, Page 1

		Б.,		D 0	Б.			
Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
65	AUTOMEDIA ASSOCIATES - EQUIPME		2,278	<u> 70 170 Donao</u>	2,278	7 MO S/L	2,278	0
	EQUIPMENT	2/01/13	2,278 866		866		2,278 772	87
67	WHEATSTONE INO39549	2/14/13	513		513		457	52
68	SECURITY CAMERA	3/01/13	699		699		617	70
69	COMPUTER UPGRADE FOR BOOTH	4/03/13	679		679	10 MO S/L	594	68
	BSW - SENNHEISER AND MIDD ATLAN		135		135	10 MO S/L	117	13
	DENON CD PLAYER	7/05/13	329		329		280	33
72	SIMIAN	8/16/13	2,672		2,672		2,249	267
73 74	AUTOMATION COMPUTER PARTS	8/20/13 8/29/13	659 236			10 MO S/L 10 MO S/L	555 198	66 24
	NETGEAR PROSAFE ETHERNET DISTRIBUTION AMPLIFIER	10/18/13	250 366			10 MO S/L 10 MO S/L	302	24 37
	PROFANITY DELAY	12/31/13	1,612		1,612		1,303	162
77	PALISADE TRANSLATOR	3/31/16	11,551		,	10 MO S/L	6,738	1,155
78	TELEPHONE SYSTEM - COMMWEST	12/15/16	9,261		9,261	5 MO S/L	9,261	0
79	FURNITURE - UMETCO	12/15/16	3,200		3,200	10 MO S/L	1,627	320
	RADIO ROOM LIGHTING	11/01/17	2,250		2,250		938	225
	STAND-ALONE HEATING & AC	7/17/19	7,600			15 MO S/L	1,267	506
	CHAIRS FOR RADIO ROOM	9/28/19	3,157		3,157		491	210
83	WORKSTATION COMPUTERS	10/11/19	1,800		1,800	5 MO S/L	810	360
85 94	(4) DELL POWEREDGE 850 COMPUTER CONSTRUCTION 1310 UTE #2	2/25/11 6/30/02	2,080 6,912		2,080	5 MO S/L 39 MO S/L	2,080	0 177
	AUDITORIUM	6/30/02	439				3,462 218	11
	5 HEATERS/COOLERS	6/30/02	18,500			39 MO S/L	9,110	474
97	1310 UTE BUILDING	6/30/02	245,828		245,828	39 MO S/L	121,599	6,303
	AUDITORIUM	6/30/03	1,450		,	39 MO S/L	689	37
99	CONSTRUCTION - 1310 UTE	6/30/03	1,025				486	26
	DUCTWORK 1310 UTE	6/30/03	8,000			39 MO S/L	3,803	205
	CONTRIBUTED LABOR - CONSTRUCTI		7,500		7,500	3 MO S/L	7,500	0
	CONTRIBUTED LABOR - CONSTRUCTION		5,000		- ,		2,377	128
	SOLAR ELECTRIC SYSTEM	3/31/08	10,243		10,243	20 MO S/L	7,084	513
	LANDSCAPING LANDSCAPING - 2009	12/31/08 1/01/09	61,770		61,770 20,368	39 MO S/L 39 MO S/L	21,877	1,584 522
	LABOR REMODEL	7/13/13	20,368 8,746			10 MO S/L	6,790 7,434	875
	MATERIAS STUDIO REMODEL	12/20/13	7.622		17,622	10 MO S/L 10 MO S/L	14,245	1,762
	REMODEL	3/31/16	5,887		5,887	10 MO S/L	3,434	589
	BUILDING IMPROVEMENTS - TERRY I		3,000		,	15 MO S/L	917	200
111	BARNES ELECTRIC	8/28/19	5,000		,	40 MO S/L	302	125
	1310 UTE - LAND	6/30/02	40,018		40,018	7 Land	0	0
	LOAN FEES - NEW MORTGAGE	1/14/19	6,547		6,547		893	297
	HVAC	11/10/21	11,053		11,053		123	737
	5 EA. OFFICE CHAIRS, 2 EA. GUEST CH		6,313		6,313	7 MO S/L	0	150
116 117	Studio D Remodel HVAC, FLOORING, ELECTRIC	12/31/22 12/31/22	5,694 11,222		5,694 11,222		$0 \\ 0$	$0 \\ 0$
117		12/31/22 _		-		20 MO 3/L		
	Total Other Depreciation	_	613,335	-	613,335		296,579	18,479
	Total ACRS and Other Deprec	iation	613,335		613,335		296,579	18,479
	Total ACKS and Other Depret	=	013,333	=	013,333			10,47
	Grand Totals		661,117		659,354		344,361	18,479
	Less: Dispositions and Transfer	s	0		0		0	0
	Less: Start-up/Org Expense	_	0	_	0		0	0
	<b>Net Grand Totals</b>	=	661,117	-	659,354		344,361	18,479

# Bonus Depreciation Report Form 990, Page 1

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
45	DIGITAL RECORDER - STUDIO D	6/30/04	479		0	0	240	239
46	ZZOUNDS AUDIO EQUIPMENT - STUDIC	6/30/04	600		0	0	300	300
47	AUDIO EQUIPMENT - STUDIO D	6/30/04	1,287		0	0	644	643
102	FRONT DOOR KEYPAD SYSTEM	6/30/04	1,157		0	0	579	578
114	HVAC	11/10/21	11,053		0	0	0	11,053
		_						
	Gr	and Total	14,576		0	0	1,763	12,813



# Depreciation Adjustment Report All Business Activities

						AMT
						Adjustments/
Form	Unit	<u>Asset</u>	Description	Tax	AMT	Preferences

There are no assets that meet the criteria of this report



# Future Depreciation Report FYE: 12/31/23 Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
Prior M	ACRS:				
Prior M  1 2 3 4 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40	ANTENNA PARAFLECTOR SCALA SINE SYSTEMS RP-8 RELAY PANEL 66800-052 PWR DIVIDER SCALA APHEX 320A A (2) ANDREW VFX-NMNM-3 JUMPER AUDIOARTS R-60-12/8 STERIO CONSOLE AUDIOARTS DMP 60 DUAL MIC PEAMP CA (3) OC WHITE 51900 BOOM RISER/ARM DENON TU1500RD TURNER WITH RACKLN MIDDLE ATLANTIC RK 20 EQUUIPMENT R (2) JBL 4206 MONITOR SPEAKER SYMETRIX 420 POWER AMP HENRY MATCHBOX HENRY SUPERLAY (2) STEREO PHONE PREAMP (2) POWER SUPPLY (3) STUDIO MICROPHONE (4) UTILITY SHELVES PIONEER CD PLAYER 200 FT AIDEN 16 CABLE CONNECTORS, PLUGSM PLATESM ETC. 8 DESKS 47 CHAIRS 29 TABLES 2 BOOK SHELVES 8 FILE CABINETS 20 LP/CD RACKS UNITEL PHONE SYSTEM 8 LAMPS 12 BULLETIN/WHITE BOARDS AUDIOCARTS R-60-18 STEREO CONSOLES (2) TECHNICS SL 1200 TURNTABLE (4) SHURE SM-7 MICROPHONE SYMETRIC 420 POWER AMP JBL 4206 MONITOR SPEAKER (4) AKG K240M HEADPHONE (2) MIDDLE ATLANTIC RK 16 EQUIP RACK INSTALLATION - HARDWARE	11/06/98 11/10/98 11/11/98 11/11/98 11/12/98 11/13/98 1/05/99 1/05/99 1/05/99 1/05/99 1/05/99 1/05/99 1/05/99 1/11/99 1/11/99 1/11/99 1/11/99 2/02/99 2/02/99 2/02/99 6/30/01	628 276 142 988 82 4,234 257 297 262 83 278 288 139 178 152 20 867 93 209 360 98 550 1,175 540 175 450 2,000 4,600 2,000 1,232 1,639 286 252 312 137 1,195		
41 42 43 45 46 47 84 102	SHIPPING DON MUSSELL - INSTALLATION JOSEPH KONICEK - INSTALLATION DIGITAL RECORDER - STUDIO D ZZOUNDS AUDIO EQUIPMENT - STUDIO D AUDIO EQUIPMENT - STUDIO D 100 WATT TRANSMITTER CROWN FRONT DOOR KEYPAD SYSTEM  Depreciation:	6/30/01 6/30/01 6/30/01 6/30/04 6/30/04 6/30/04 11/02/98 6/30/04	388 2,698 1,303 479 600 1,287 4,496 1,157 47,782	0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0
5 44 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62	ANDREW F1-PNMNM -3 JUMPER CONSTRUCTION - 1310 UTE DENON DNC615 CD PLAYER 98656-G501 6810-1R-EF-DA88.10 ENDEC EAS ENCODER/DECODER NAUTEL VS1-EIA 1300WATT FM TRANSMI RFS CABLEWAVES ADP20-C DEHYDRATO CABLING, ATTACHMENTS AND FREIGHT BEXT STL 10 WATT 960 MHZ TRANSMITTE BEXT LDR STL 960 MHZ RECEIVER OPTIMOD-8300 FM AUDIO PROCESSER LEA SP100-120/240SP SURGE SUPRESSOR INSTALL ANTENNA - REX INDUSTRIES AF225 FM RECEIVER ELECTRICAL UPGRADE - AMP-PRO INSTALLATION - DATAVIX CABLEWAVE SALES TAX	10/05/11 10/05/11	63 4,245 897 15,308 2,085 7,140 1,207 2,770 2,595 2,425 4,696 469 3,500 545 514 1,611	0 108 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0

# Future Depreciation Report FYE: 12/31/23 Form 990, Page 1

		Date In			
<u>Asset</u>	Description	Service	Cost	Tax	AMT
63	INSTALLATION - DATAVIX	12/27/11	811	0	0
64	80 CHAIRS - RADIO ROOM	10/25/12	2,236	0	0
65	AUTOMEDIA ASSOCIATES - EQUIPMENT	2/01/13	2,278	0	0
66	EQUIPMENT	2/14/13	866	7	0
67	WHEATSTONE INO39549	2/14/13	513	4	Ö
68	SECURITY CAMERA	3/01/13	699	12	Ö
69	COMPUTER UPGRADE FOR BOOTH	4/03/13	679	17	0
70	BSW - SENNHEISER AND MIDD ATLANTIC	5/20/13	135	5	0
71	DENON CD PLAYER	7/05/13	329	16	Ö
72	SIMIAN	8/16/13	2.672	156	Ö
73	AUTOMATION COMPUTER PARTS	8/20/13	659	38	Ö
74	NETGEAR PROSAFE ETHERNET	8/29/13	236	14	Ö
75	DISTRIBUTION AMPLIFIER	10/18/13	366	27	Ö
76	PROFANITY DELAY	12/31/13	1.612	147	ő
77	PALISADE TRANSLATOR	3/31/16	11,551	1,155	ŏ
78	TELEPHONE SYSTEM - COMMWEST	12/15/16	9.261	0	ő
79	FURNITURE - UMETCO	12/15/16	3,200	320	ő
80	RADIO ROOM LIGHTING	11/01/17	2,250	225	ŏ
81	STAND-ALONE HEATING & AC	7/17/19	7,600	507	ŏ
82	CHAIRS FOR RADIO ROOM	9/28/19	3.157	211	ő
83	WORKSTATION COMPUTERS	10/11/19	1,800	360	ő
85	(4) DELL POWEREDGE 850 COMPUTERS	2/25/11	2,080	0	ő
94	CONSTRUCTION 1310 UTE #2	6/30/02	6,912	178	ő
95	AUDITORIUM	6/30/02	439	11	ő
96	5 HEATERS/COOLERS	6/30/02	18,500	475	ő
97	1310 UTE BUILDING	6/30/02	245,828	6,303	ő
98	AUDITORIUM	6/30/03	1,450	37	0
99	CONSTRUCTION - 1310 UTE	6/30/03	1,025	26	0
100	DUCTWORK 1310 UTE	6/30/03	8,000	205	0
101	CONTRIBUTED LABOR - CONSTRUCTION (		7,500	0	ő
103	CONTRIBUTED LABOR - CONSTRUCTION -	6/30/04	5.000	128	0
104	SOLAR ELECTRIC SYSTEM	3/31/08	10.243	512	ő
105	LANDSCAPING	12/31/08	61.7/0	1,584	ő
106	LANDSCAPING - 2009	1/01/09	20,368	522	0
107	LABOR REMODEL	7/13/13	8,746	437	0
107	MATERIAS STUDIO REMODEL	12/20/13	17.622	1,615	0
109	REMODEL	3/31/16	5,887	588	ő
110	BUILDING IMPROVEMENTS - TERRY BRO'	6/30/17	3,000	200	0
111	BARNES ELECTRIC	8/28/19	5,000	125	ő
112	1310 UTE - LAND	6/30/02	40,018	0	ő
113	LOAN FEES - NEW MORTGAGE	1/14/19	6,547	298	ő
114	HVAC	11/10/21	11,053	737	0
115	5 EA. OFFICE CHAIRS, 2 EA. GUEST CHAIR		6,313	902	0
116	Studio D Remodel	12/31/22	5,694	569	0
117	HVAC, FLOORING, ELECTRIC	12/31/22	11,222	561	0
117	Total Other Depreciation	12/31/22	613,335	19,342	0
	Tomi Onei Depreciation			17,512	
	Total ACRS and Other Depreciation		613,335	19,342	0
	Grand Totals		661,117	19,342	0

### Form **990**

### **Event Income and Deduction Worksheet**

Name

GRAND VALLEY PUBLIC RADIO COMPANY

Description FUND RAISING EVENTS

Taxpayer Identification Number

2022

84-1213380

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:			Expense Details - Indirect Expense:
1. Gross receipts or sales	1.	24,868	Advertising and promotion
2. Advertising income			Office
3. Circulation income			Printing/publication/postage
4. Other income			Info technology/Maintenance
5. Returns and allowances			Royalties & License Fees
6. Contributions received	6.		Occupancy/Real Estate Taxes
7. Total revenue. Add lines 1 through	6 7.	24,868	Travel & Repairs
8. Cost of Goods Sold			Travel/entertainment (officials)
9. Employment Expense			Conferences/meetings
10. Fees for services			Interest
11. Indirect Expense			Insurance
12. Depreciation Expense			Total Indirect Expense
13. Exempt Activity Expense			
14. Fundraising Expense		24,733	Expense Details - Depreciation Expense:
15. Total expenses. Add lines 8 through			On investment property
16. Net Income/Loss. Line 7 minus Lin			On non-investment property
To. Net moone, Loss. Line 7 minus Lin			On non-investment property  Amortization
			Depletion
Expense Details - Cost of Goods Sol	d:		Total Depreciation Expense
Beginning inventory			
Purchases			Expense Details - Exempt Activity Expense:
Labor			Repairs and Maintenance
Section 263A costs			Bad debts
Other costs			Taxes/licenses
Ending inventory			Charitable contributions
Total Cost of Goods Sold			Dividend recd deductions
			Readership costs
Expense Details - Employment Expe	nse:		Other expenses
Compensation of officers			Total Exempt Activity Expense
Other salaries and wages			
Pension plan contributions			Expense Details - Fundraising Expense:
Other employee benefits			Cash prizes
Payroll taxes			Non-cash prizes
Payroll taxes  Total Employment Expense			Non-cash prizes
Total Employment Expense			Rent and facility costs
Expanse Details - Food for Convince			Food & beverages (Part II only)
Expense Details - Fees for Services:			Entertainment (Part II only) Other direct expenses 24,733
Management			
Legal			Total Fundraising Expense 24,733
Accounting	· · · · · · · · · · · · · · · · · · ·		
Lobbying			
Professional fundraising	·····		
Investment management			
Other Total Fees for Services		_	
	· · · · · · · · · · · · · · · · · · ·	_	
Information is indicated for use on	Form 990-T, Sc	hedule A:	Allocation of Expense to Program Service Accomplishments:
Schedule A, UBIT Activity Code	Seq #		First
Part V, Debt Financing			Second
Part VI, Controlled Org Incom	ne		Third
Part VII, Investments for C(7)			All other
Part VIII, Exploited Activities			
Part IX, Advertising Income			

Form **990** 

# Two Year Comparison Report

2021 & 2022

For calendar year 2022, or tax year beginning

, ending

Name Taxpayer Identification Number

C	AND VALLEY PUBLIC RADIO COMPANY 84-1213380				
			2021	2022	Differences
	1. Contributions, gifts, grants	1.	187,243	225,442	38,199
	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3.	258,431	88,982	-169,449
n e	4. Program service revenue	4.	111,460	129,326	17,866
_	5. Investment income	5.			
>	6. Proceeds from tax exempt bonds	6.			
Re	7. Net gain or (loss) from sale of assets other than inventory	7.			
	8. Net income or (loss) from fundraising events	8.	11,555	135	-11,420
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11.	327	89	
	12. Total revenue. Add lines 1 through 11	12.	569,016	443,974	-125,042
	13. Grants and similar amounts paid	13.			
	14. Benefits paid to or for members	14.			
S	<b>15.</b> Compensation of officers, directors, trustees, etc.	15.	50,035	52,241	
s	<b>16.</b> Salaries, other compensation, and employee benefits	16.	156,238	151,816	-4,422
e	17. Professional fundraising fees	17.			
χ O	18. Other professional fees	18.	37 <b>,</b> 575	32,562	
Ш	19. Occupancy, rent, utilities, and maintenance	19.	12,701	17,647	
	20. Depreciation and Depletion	20.	20,817	18,480	
	21. Other expenses	21.	160,206	167,115	6,909
	22. Total expenses. Add lines 13 through 21	22.	437,572	439,861	
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	131,444	4,113	
	24. Total exempt revenue	24.	569,016	443,974	-125,042
	25. Total unrelated revenue	25.			
ö	26. Total excludable revenue	26.	123,342	129,550	
nat	27. Total assets	27.	570,648	562,041	
Information	28. Total liabilities	28.	212,928	200,208	
	<b>29.</b> Retained earnings	29.	357,720	361,833	4,113
the	<b>30.</b> Number of voting members of governing body	30.	9	6	
ŏ	<b>31.</b> Number of independent voting members of governing body	31.	9	6	
	32. Number of employees	32.	7	7	
	33. Number of volunteers	33.	225	225	

Form <b>990</b>	Tax Return History	2022
	,	

Name

GRAND VALLEY PUBLIC RADIO COMPANY

Employer Identification Number 84-1213380

	2018	2019	2020	2021	2022	2023
Contributions, gifts, grants				445,674	314,424	
Membership dues						
Program service revenue				111,460	129,326	
Capital gain or loss						
Investment income						
Fundraising revenue (income/loss)				11,555	135	
Gaming revenue (income/loss)						
Other revenue				327	89	
Total revenue				569,016	443,974	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.				50,035	52,241	
Other compensation				156,238	151,816	
Professional fees				37,575	32,562	
Occupancy costs			PY	12,701	17,647	
Depreciation and depletion				20,817	18,480	
Other expenses				160,206	167,115	
Total expenses				437,572	439,861	
Excess or (Deficit)				131,444	4,113	
_				F.CO. 01.C	442 054	
Total exempt revenue				569,016	443,974	
Total unrelated revenue				102 240	100 550	
Total excludable revenue				123,342	129,550	
Total Assets				570,648	562,041	
Total Liabilities				212,928	200,208	
Net Fund Balances				357,720	361,833	

# **Federal Statements**

## Form 990, Part IX, Line 24e - All Other Expenses

Description	E	Total xpenses	Program Service	agement & General	 Fund Raising	
OFF-AIR FUNDRAISING	\$	8,289	\$	\$ 650	\$ 8,289	
BANK FEES		4,671		653	4,018	
REPAIRS AND MAINTENANCE		4,530	2,265	755	1,510	
STAFF&MEMBER APPRECIATION		4,344	176	2,843	1,325	
WEBSITE		3,968	3,968			
MISCELLANEOUS		3,547	192	2,050	1,305	
BAD DEBTS		284		 	 284	
Total	\$	29,633	\$ 6,601	\$ 6,301	\$ 16,731	

84-1213380 Federal State	ments
Schedule A, Part II,	<u>Line 1(e)</u>
Description	Amount
FUND DRIVES AND CONTRIBUTIONS CONTRIBUTED GOODS AND SERVICES CORPORATION FOR PUBLIC BROADCASTING	\$ 87,094 67,550
Corporation for public broadcasting  Cash Contribution  PETER ROBINSON	88,982
Cash Contribution MARLA PAYTON LEGACY	25,191
Cash Contribution	45,607
Total	\$ 314,424
Schedule A, Part II,	Line 9(e)
Description	Amount
FUND RAISING EVENTS Less: Deductions	\$ 135 -1,000
Total	\$865
Schedule A, Part II, Line 1	2 - Current year
Description	Amount

UNDERWRITING CONCERTS

OTHER INCOME

Total

110,408

129,415

18,918

89