

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2024

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2024 calendar year, or tax year beginning JUL 1, 2024 and ending JUN 30, 2025

Form header section containing organization name (KVIE, INC.), address (2030 W EL CAMINO AVENUE, SACRAMENTO, CA 95833), principal officer (DAVID LOWE), and identification numbers.

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, governance metrics, and financial data for 2024 and prior years.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature block form with fields for officer signature (DAVID LOWE), preparer name (JENNIFER Z IWATA), date (11/14/25), and PTIN (P01310188).

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [ ] No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE MISSION OF KVIE IS TO INSPIRE YOU TO EXPLORE THE WORLD AND CONNECT WITH YOUR COMMUNITY THROUGH THE INTEGRITY OF PUBLIC MEDIA.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 8,985,305. including grants of \$ ) (Revenue \$ 1,084,240.) BROADCASTING FROM CALIFORNIA'S CAPITAL, PBS KVIE IS A VALUABLE PART OF THE 16-COUNTY SACRAMENTO-STOCKTON-MODESTO TELEVISION MARKET. THE SERVICE ALSO EXTENDS TO ANOTHER 12 COUNTIES OUTSIDE THE DMA, SERVING VIEWERS IN 28 OF THE STATE'S 58 COUNTIES. PBS KVIE PROVIDES EDUCATIONAL PROGRAMMING AND SERVICES THROUGH TELEVISION, ONLINE CONTENT, AND LIVE ENGAGEMENT SCREENINGS AND EVENTS. AS A PBS STATION, PBS KVIE'S NATIONAL AND LOCAL PRODUCTIONS WORK TOGETHER TO ENGAGE THE MIND AND SPIRIT TO PROMOTE PERSONAL AND COMMUNITY GROWTH. AS THE ONLY LOCALLY OWNED AND MANAGED TELEVISION STATION IN THE 20TH LARGEST TELEVISION MARKET IN THE UNITED STATES, PBS KVIE REFLECTS THE COMMUNITY BACK TO ITSELF BY CONTINUED ON SCHEDULE O.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) AS AN EDUCATIONAL BROADCASTER, PBS KVIE IS KNOWN FOR ITS PBS KIDS OFFERINGS LIKE "SESAME STREET" AND "DANIEL TIGER'S NEIGHBORHOOD," PRESENTING 9,116 HOURS OF EDUCATIONAL CHILDREN'S PROGRAMMING ACROSS OUR MAIN HIGH-DEFINITION CHANNEL AND OUR 24-HOUR PBS KIDS CHANNEL IN FY25. EVERY DAY, CHILDREN ACROSS OUR REGION OF CALIFORNIA EMBARK ON AMAZING ADVENTURES AND MAKE NEW DISCOVERIES THROUGH PBS KIDS PROGRAMS ON PBS KVIE. THE NEW SERIES "CARL THE COLLECTOR" PREMIERED ON NOVEMBER 14, 2024. IT'S A NEW ANIMAGED SERIES FOR KIDS AGES 4-8 THAT FOLLOWS THE CONTINUED ON SCHEDULE O.

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) PBS KVIE ENGAGED OUR COMMUNITY THROUGH SEVERAL IN-PERSON SCREENINGS AND EVENTS IN FY25. KVIE HELD MULTIPLE PREVIEW SCREENINGS IN CONNECTION WITH NEW PROGRAMS. THE PREVIEW FOR "LEONARDO DA VINCI" BY KEN BURNS WAS HELD ON NOVEMBER 4, 2024, AT KVIE AND FEATURED A CONVERSATION WITH ARTIST JULIA COUZENS AND JAMES HOUSEFIELD, PH.D., ASSOCIATE PROFESSOR IN THE DEPARTMENT OF DESIGN AT UC DAVIS. THE PREVIEW SCREENING FOR "MISS AUSTEN ON MASTERPIECE" WAS HELD ON APRIL 27, 2025, AT THE CREST THEATER. IN ADDITION TO THE SCREENING, THE AFTERNOON FEATURED A JANE AUSTEN PHOTO CONTINUED ON SCHEDULE O.

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 8,985,305.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> 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? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> 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? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> 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? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	X	
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? .....	X	

**Note:** All Form 990 filers are required to complete Schedule O

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

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

	Yes	No
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....		
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee reporting, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (20), 1b (20), 2 (X), 3 (X), 4 (X), 5 (X), 6 (X), 7a (X), 7b (X), 8a (X), 8b (X), 9 (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a (X), 10b, 11a (X), 11b, 12a (X), 12b (X), 12c (X), 13 (X), 14 (X), 15a (X), 15b (X), 16a (X), 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 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
STACI ORLANDO-WATERS - (916) 641-3621
2030 WEST EL CAMINO AVE., SACRAMENTO, CA 95833

**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 the 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 organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DAVID LOWE PRESIDENT/GM	40.00			X			383,298.	0.	34,262.	
(2) STACI ORLANDO-WATERS CHIEF FINANCIAL OFFICER/ASSOC GM	40.00			X			202,610.	0.	25,443.	
(3) MICHAEL SANFORD ASSOCIATE GM EMERITUS	40.00					X	174,102.	0.	27,198.	
(4) BOB FITZHUGH DIRECTOR OF TECHNOLOGY	40.00					X	166,831.	0.	11,776.	
(5) ROSE FROLING HUMAN RESOURCES EXECUTIVE	40.00					X	149,037.	0.	11,404.	
(6) ROB STEWART EXECUTIVE PRODUCER/ONAIR TALENT	40.00					X	134,202.	0.	13,577.	
(7) COLLEEN SCHULMAN ASSOCIATE GM-PHILANTHROPY	40.00					X	126,077.	0.	15,136.	
(8) CYRIL SHAH CHAIR	1.00	X					0.	0.	0.	
(9) R. BROOKS WHITEHEAD VICE CHAIR	1.00	X					0.	0.	0.	
(10) DEBBIE YOLANDA MANNING SECRETARY	1.00	X					0.	0.	0.	
(11) KEN MENGES TREASURER	1.00	X					0.	0.	0.	
(12) PRAMILA KRIPLANI MEMBER AT LARGE	1.00	X					0.	0.	0.	
(13) DANA TOPOUSIS DIRECTOR	1.00	X					0.	0.	0.	
(14) VANESSA COIGOY DIRECTOR	1.00	X					0.	0.	0.	
(15) BETH MILLER DIRECTOR	1.00	X					0.	0.	0.	
(16) SUE SCOTLAND DIRECTOR	1.00	X					0.	0.	0.	
(17) JOSH PULLIAM DIRECTOR	1.00	X					0.	0.	0.	

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) BRANDON PACE DIRECTOR	1.00	X					0.	0.	0.	
(19) BRADLEY CARROLL DIRECTOR	1.00	X					0.	0.	0.	
(20) DR. PRAVEEN PRASAD DIRECTOR	1.00	X					0.	0.	0.	
(21) ALEX CASTRO DIRECTOR	1.00	X					0.	0.	0.	
(22) DR. NKIRUKA CATHERINE OHAEGBU DIRECTOR	1.00	X					0.	0.	0.	
(23) PAUL MCCLURE DIRECTOR	1.00	X					0.	0.	0.	
(24) NANCY BRODOVSKY DIRECTOR	1.00	X					0.	0.	0.	
(25) COLLEEN SPITZ DIRECTOR	1.00	X					0.	0.	0.	
(26) JOYCE TERHAAR DIRECTOR	1.00	X					0.	0.	0.	
<b>1b Subtotal</b>							1,336,157.	0.	138,796.	
<b>c Total from continuation sheets to Part VII, Section A</b>							0.	0.	0.	
<b>d Total (add lines 1b and 1c)</b>							1,336,157.	0.	138,796.	

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 9

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

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PUBLIC BROADCASTING SERVICE 1225 S. CLARK ST., ARLINGTON, VA 22202	PROGRAMMING RIGHTS	2,593,447.
CDP - CONTRIBUTOR DEVELOPMNT PARTNERSHIP PO BOX 412299, BOSTON, MA 02241	MEMBERSHIP STRATEGY, DIRECT MAIL SERVICE	1,081,550.
PALMER KAZANJIAN WOHL HODSON, 2277 FAIR OAKS BLVD STE 455, SACRAMENTO, CA 95825	LEGAL SERVICES	175,300.
MSI MAILING SYSTEMS, 1464 ENTERPRISE BLVD, WEST SACRAMENTO, CA 95691	PRINTING & MAILING LARGE JOBS LIKE THE	165,982.
ACD DIRECT, PO BOX 30078 DEPT 613, SALT LAKE CITY, UT 84130	MEMBER & FUNDRAISING SUPPORT SERVICES	147,497.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 11

SEE PART VII, SECTION A CONTINUATION SHEETS



**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>	9,165,709.				
	<b>c</b> Fundraising events	<b>1c</b>	190,629.				
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	819,582.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	8,627,742.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 1,293,163.				
	<b>h Total.</b> Add lines 1a-1f		18,803,662.				
<b>Program Service Revenue</b>	<b>2 a</b> UNDERWRITING	<b>Business Code</b>	900099	706,721.	706,721.		
	<b>b</b> PROGRAM PRODUCTION		900099	312,860.	312,860.		
	<b>c</b> ADVERTISING		541800	42,680.		42,680.	
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f			1,062,261.			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			807,386.		807,386.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties			86,420.		86,420.	
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real	406,892.			
			(ii) Personal				
	<b>b</b> Less: rental expenses	<b>6b</b>		0.			
	<b>c</b> Rental income or (loss)	<b>6c</b>		406,892.			
	<b>d</b> Net rental income or (loss)			406,892.		406,892.	
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities	53,433,731.			
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>		44,610,166.			
	<b>c</b> Gain or (loss)	<b>7c</b>		8,823,565.			
<b>d</b> Net gain or (loss)			8,823,565.		8,823,565.		
<b>8 a</b> Gross income from fundraising events (not including \$ 190,629. of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>						
			36,512.				
<b>b</b> Less: direct expenses	<b>8b</b>		13,283.				
<b>c</b> Net income or (loss) from fundraising events			23,229.		23,229.		
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>						
<b>b</b> Less: direct expenses	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities							
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>		115.				
<b>b</b> Less: cost of goods sold	<b>10b</b>		4,943.				
<b>c</b> Net income or (loss) from sales of inventory			-4,828.	-4,828.			
<b>Miscellaneous Revenue</b>	<b>11 a</b> MISCELLANEOUS	<b>Business Code</b>	900099	69,487.	69,487.		
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d			69,487.			
<b>12 Total revenue.</b> See instructions			30,078,074.	1,084,240.	42,680.	10,147,492.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to 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, trustees, and key employees	666,540.	348,395.	167,041.	151,104.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,224,333.	2,193,133.	1,065,264.	965,936.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	212,135.	113,221.	56,019.	42,895.
9 Other employee benefits	353,037.	215,728.	61,088.	76,221.
10 Payroll taxes	376,934.	212,909.	83,638.	80,387.
11 Fees for services (nonemployees):				
a Management				
b Legal	851,343.	220,269.	616,194.	14,880.
c Accounting	52,750.		52,750.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	616,950.			616,950.
f Investment management fees	153,046.		153,046.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	1,047,156.	835,553.	9,459.	202,144.
12 Advertising and promotion	79,277.	51,249.		28,028.
13 Office expenses	712,293.	332,234.	59,295.	320,764.
14 Information technology	432,649.	131,057.	102,088.	199,504.
15 Royalties				
16 Occupancy	447,544.	227,677.	167,154.	52,713.
17 Travel	53,872.	30,886.	10,105.	12,881.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	203,380.	24,738.	37,935.	140,707.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	902,749.	763,436.	72,097.	67,216.
23 Insurance	132,738.	80,318.	26,798.	25,622.
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.)				
a <b>PROGRAM ACQUISITION</b>	2,826,576.	2,826,576.		
b <b>REPAIRS AND MAINTENANCE</b>	353,231.	236,267.	57,516.	59,448.
c <b>DIRECT MAIL</b>	181,276.			181,276.
d				
e All other expenses	176,773.	141,659.		35,114.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>15,056,582.</b>	<b>8,985,305.</b>	<b>2,797,487.</b>	<b>3,273,790.</b>
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	120,652.	<b>1</b>	177,924.
	<b>2</b> Savings and temporary cash investments .....	3,695,975.	<b>2</b>	17,451,334.
	<b>3</b> Pledges and grants receivable, net .....	54,554.	<b>3</b>	2,444,869.
	<b>4</b> Accounts receivable, net .....	72,025.	<b>4</b>	138,055.
	<b>5</b> Loans and other receivables from 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	290,380.	<b>9</b>	312,397.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 26,731,151.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 18,762,159.	7,077,419.	<b>10c</b> 7,968,992.
	<b>11</b> Investments - publicly traded securities .....	33,410,486.	<b>11</b>	24,748,088.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	115,363.	<b>15</b>	131,129.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	44,836,854.	<b>16</b>	53,372,788.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	936,710.	<b>17</b>	1,128,736.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	297,195.	<b>19</b>	449,161.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	1,233,905.	<b>26</b>	1,577,897.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	43,120,822.	<b>27</b>	50,984,077.
	<b>28</b> Net assets with donor restrictions .....	482,127.	<b>28</b>	810,814.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	43,602,949.	<b>32</b>	51,794,891.
<b>33</b> Total liabilities and net assets/fund balances .....	44,836,854.	<b>33</b>	53,372,788.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	30,078,074.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	15,056,582.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	15,021,492.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	43,602,949.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-6,829,550.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	51,794,891.

**Part XII Financial Statements and Reporting**

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

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? _____ 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>b</b> Were the organization's financial statements audited by an independent accountant? _____ 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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
<b>3a</b> 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? _____		X
<b>b</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 _____		



**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	14,212,773.	14,208,856.	16,005,417.	13,843,113.	18,803,662.	77,073,821.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	14,212,773.	14,208,856.	16,005,417.	13,843,113.	18,803,662.	77,073,821.
<b>5</b> 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) .....						499,966.
<b>6 Public support.</b> Subtract line 5 from line 4.						76,573,855.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>7</b> Amounts from line 4 .....	14,212,773.	14,208,856.	16,005,417.	13,843,113.	18,803,662.	77,073,821.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	565,238.	448,395.	631,710.	853,046.	1,300,698.	3,799,087.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....	47,790.	45,969.	1,020.			94,779.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	24,785.	18,136.	45,779.	46,196.	69,487.	204,383.
<b>11 Total support.</b> Add lines 7 through 10						81,172,070.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	6,573,788.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	94.34 %
<b>15</b> Public support percentage from 2023 Schedule A, Part II, line 14 .....	<b>15</b>	95.05 %
<b>16a 33 1/3% support test - 2024.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2023.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2024.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2023.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

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.)

Section A. Public Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c 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 Total support. (Add lines 9, 10c, 11, and 12.)

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2023 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2023 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of 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**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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?		
<b>11a</b>		
<b>b</b> A family member of a person described on line 11a above?		
<b>11b</b>		
<b>c</b> 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 <b>Part VI</b> .		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> 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.		
<b>1</b>		
<b>2</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth 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?		
<b>1</b>		
<b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>2</b>		
<b>3</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> 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 <b>Part VI</b> 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.		
<b>2a</b>		
<b>b</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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> 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 <b>Part VI</b> .		
<b>3a</b>		
<b>b</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 <b>Part VI</b> the role played by the organization in this regard.		
<b>3b</b>		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions.  
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section 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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
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 greater amount, see instructions).	4	
5	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	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2024		
a	From 2019		
b	From 2020		
c	From 2021		
d	From 2022		
e	From 2023		
f	<b>Total</b> of lines 3a through 3e		
g	Applied to under distributions of prior years		
h	Applied to 2024 distributable amount		
i	Carryover from 2019 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2024 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2024 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	<b>Excess distributions carryover to 2025.</b> Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2020		
b	Excess from 2021		
c	Excess from 2022		
d	Excess from 2023		
e	Excess from 2024		

**Part VI** **Supplemental Information.** 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.)

**SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:**

**OTHER RELATED**

2020 AMOUNT: \$	24,785.
2021 AMOUNT: \$	18,136.
2022 AMOUNT: \$	45,779.
2023 AMOUNT: \$	46,196.
2024 AMOUNT: \$	69,487.

Schedule B (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

KVIE, INC.

Employer identification number

94-1421463

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 not 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

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... \$ \_\_\_\_\_

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 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 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization  <b>KVIE, INC.</b>	Employer identification number  <b>94-1421463</b>
---	---

**Part 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
<u>1</u>	<hr/> <hr/> <hr/>	\$ <u>2,455,109.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	<hr/> <hr/> <hr/>	\$ <u>1,162,000.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	<hr/> <hr/> <hr/>	\$ <u>799,457.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	<hr/> <hr/> <hr/>	\$ <u>596,218.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>KVIE, INC.</b>	Employer identification number  <b>94-1421463</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	IMPROVED LAND AND BROADCAST TOWER <hr/> <hr/> <hr/>	\$ 1,162,000.	06/30/25
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____

Name of organization  <b>KVIE, INC.</b>	Employer identification number  <b>94-1421463</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

**SCHEDULE C**  
**(Form 990)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2024**

Department of the Treasury  
Internal Revenue Service

**For Organizations Exempt From Income Tax Under Section 501(c) and Section 527**  
**Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.**  
**Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

**Open to Public Inspection**

**If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:**

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

**If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions), or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>KVIE, INC.</b>	Employer identification number (EIN) <b>94-1421463</b>
---	---

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ..... \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities ..... \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No
- 5 Enter the names, addresses, and EINs of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
<b>1 a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b> Other exempt purpose expenditures .....														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">IF the amount on line 1e, column (a) or (b), is:</th> <th>THEN the lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:	not over \$500,000	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000	\$1,000,000.		
IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:													
not over \$500,000	20% of the amount on line 1e.													
over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
over \$17,000,000	\$1,000,000.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
<b>2 a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers? .....		X	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..		X	
<b>c</b> Media advertisements? .....		X	
<b>d</b> Mailings to members, legislators, or the public? .....		X	
<b>e</b> Publications, or published or broadcast statements? .....		X	
<b>f</b> Grants to other organizations for lobbying purposes? .....		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....		X	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....		X	
<b>i</b> Other activities? .....	X		34,800.
<b>j</b> Total. Add lines 1c through 1i .....			34,800.
<b>2a</b> Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? .....		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

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

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

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

<b>1</b> Dues, assessments, and similar amounts from members .....	1	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid):		
<b>a</b> Current year .....	2a	
<b>b</b> Carryover from last year .....	2b	
<b>c</b> Total .....	2c	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	3	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? .....	4	
<b>5</b> Taxable amount of lobbying and political expenditures. See instructions .....	5	

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

PAID \$34,800 IN SERVICE FEE/DUES TO APTS ACTION, WHICH PROMOTES THE LEGISLATIVE AND REGULATORY INTERESTS OF NONCOMMERCIAL TV STATIONS AT THE NATIONAL LEVEL THROUGH DIRECT ADVOCACY AND GRASSROOTS CAMPAIGNS DESIGNED TO GARNER BIPARTISAN SUPPORT.

**SCHEDULE D**  
**(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization

**KVIE, INC.**

Employer identification number

**94-1421463**

**Part I 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
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 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? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
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? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 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

2 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 .....	2b
c Number of conservation easements on a certified historic structure included on line 2a .....	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year \_\_\_\_\_

4 Number of states where property subject to conservation easement is located \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \_\_\_\_\_

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

Yes  No

9 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 ..... \$ \_\_\_\_\_

2 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 ..... \$ \_\_\_\_\_

b Assets included in Form 990, Part X ..... \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange program
  - e**  Other \_\_\_\_\_
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance             | <b>1c</b> |
| <b>d</b> Additions during the year     | <b>1d</b> |
| <b>e</b> Distributions during the year | <b>1e</b> |
| <b>f</b> Ending balance                | <b>1f</b> |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

**Part V Endowment Funds** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	427,573.	423,573.	423,573.	423,573.	421,273.
<b>b</b> Contributions	5,000.	4,000.			2,300.
<b>c</b> Net investment earnings, gains, and losses					170,228.
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs					170,228.
<b>f</b> Administrative expenses					
<b>g</b> End of year balance	432,573.	427,573.	423,573.	423,573.	423,573.

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment \_\_\_\_\_ %
  - b** Permanent endowment 100.0000 %
  - c** Term endowment \_\_\_\_\_ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes                      | No                                  |
|---|--------------------------|-------------------------------------|
| <b>(i)</b> Unrelated organizations?   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>(ii)</b> Related organizations?  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>b</b> If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | <input type="checkbox"/> | <input type="checkbox"/>            |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land		3,483,128.		3,483,128.
<b>b</b> Buildings		9,511,528.	8,023,679.	1,487,849.
<b>c</b> Leasehold improvements		427,713.	410,474.	17,239.
<b>d</b> Equipment		12,986,319.	10,063,686.	2,922,633.
<b>e</b> Other		322,463.	264,320.	58,143.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				7,968,992.

**Part VII Investments - Other Securities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other .....		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

**Part IX Other Assets**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, col. (B))	

**Part X Other Liabilities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 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)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B))	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the 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 ...

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	23,791,527.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a	-6,829,550.	
	b Donated services and use of facilities	2b	677,823.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d	2e	-6,151,727.	
3	Subtract line 2e from line 1		3	29,943,254.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	153,046.	
	b Other (Describe in Part XIII.)	4b	-18,226.	
	c Add lines 4a and 4b	4c	134,820.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	30,078,074.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	15,599,585.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a	677,823.	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d	18,226.	
	e Add lines 2a through 2d	2e	696,049.	
3	Subtract line 2e from line 1		3	14,903,536.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	153,046.	
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c	153,046.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	15,056,582.

**Part XIII Supplemental Information**

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

**PART V, LINE 4:**

THIS FUND SHALL BE USED AS A PERMANENT SOURCE OF SUPPORT FOR THE ONGOING OPERATIONS OF KVIE, OR IN THE EVENT OF ITS DEMISE, BY ITS SUCCESSOR, OR IF THERE IS NO SUCCESSOR, BY ANOTHER PUBLIC BROADCASTER SEEN OR HEARD IN THE SACRAMENTO AREA WHICH SHALL BE SELECTED BY THE OUTGOING KVIE BOARD OF DIRECTORS. KVIE IS PERMITTED TO WITHDRAW UP TO 5% PER YEAR FOR OPERATIONS AS LONG AS THE BALANCE DOES NOT FALL BELOW THE CORPUS.

**PART X, LINE 2:**

KVIE HAS APPLIED THE ACCOUNTING PRINCIPLES RELATED TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT THERE IS NO MATERIAL IMPACT ON THE FINANCIAL STATEMENTS.

**PART XI, LINE 4B - OTHER ADJUSTMENTS:**

FUNDRAISING EVENT EXPENSES	-13,283.
COST OF GOODS SOLD	-4,943.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-18,226.

**PART XII, LINE 2D - OTHER ADJUSTMENTS:**

FUNDRAISING EVENT EXPENSES	13,283.
COST OF GOODS SOLD	4,943.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	18,226.





**Part II 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 (add col. (a) through col. (c))
		ART AUCTION (event type)	(event type)	NONE (total number)	
Revenue	<b>1</b> Gross receipts .....	227,141.			227,141.
	<b>2</b> Less: Contributions .....	190,629.			190,629.
	<b>3</b> Gross income (line 1 minus line 2) .....	36,512.			36,512.
Direct Expenses	<b>4</b> Cash prizes .....	1,600.			1,600.
	<b>5</b> Noncash prizes .....				
	<b>6</b> Rent/facility costs .....	1,203.			1,203.
	<b>7</b> Food and beverages .....	9,630.			9,630.
	<b>8</b> Entertainment .....	850.			850.
	<b>9</b> Other direct expenses .....				
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) .....				13,283.
<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) .....				23,229.	

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	<b>1</b> Gross revenue .....				
Direct Expenses	<b>2</b> Cash prizes .....				
	<b>3</b> Noncash prizes .....				
	<b>4</b> Rent/facility costs .....				
	<b>5</b> Other direct expenses .....				
	<b>6</b> Volunteer labor .....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) .....				
	<b>8</b> Net gaming income summary. Subtract line 7 from line 1, column (d) .....				

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
**a** Is the organization licensed to conduct gaming activities in each of these states?  Yes  No  
**b** If "No," explain: \_\_\_\_\_

**10a** Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No  
**b** If "Yes," explain: \_\_\_\_\_

- 11** Does the organization conduct gaming activities with nonmembers?  Yes  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  No
- 13** Indicate the percentage of gaming activity conducted in:
 

<b>a</b> The organization's facility	<b>13a</b>	%
<b>b</b> An outside facility	<b>13b</b>	%
- 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 amount of gaming revenue retained by the third party \$ \_\_\_\_\_
- c** If "Yes," enter the name and address of 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:

- a** 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 \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:**

(I) NAME OF FUNDRAISER: CONTRIBUTOR DEVELOPMENT PARTNERSHIP

(I) ADDRESS OF FUNDRAISER: PO BOX 412299, BOSTON, MA 02241

(I) NAME OF FUNDRAISER: CHARITABLE AUTO RESOURCES

(I) ADDRESS OF FUNDRAISER: 4669 MURPHY CANYON ROAD, SUITE 100, SAN DIEGO, CA 92123

**PART I, LINE 2B, COLUMN (V):**

**KVIE RECEIVES SEPARATE INVOICES FOR EACH OF THESE FUNDRAISING EXPENSES. ALL FLAT RATE CHARGES FOR SERVICES AND TECH FEES ARE COMPARED WITH THE CONTRACTS. ALL OTHER CHARGES ARE PASS THRU EXPENSES THAT ARE EVALUATED FOR REASONABLENESS USING TREND ANALYSIS AND RESPONSE RATES.**

**THE CONTRACT WITH CONTRIBUTOR DEVELOPMENT PARTNERSHIP INCLUDES TECHNOLOGY FEES (\$199,384), PAPER/PRINTING/POSTAGE/ENVELOPES (\$342,588), CREDIT CARD**

**Part IV** Supplemental Information (continued)

FEES (\$46,719), AND ADVERTISING (\$22,263).

PART I, LINE 2B, COLUMN (IV)

WE ARE ESTIMATING THE AMOUNT OF GROSS RECEIPTS GENERATED BY THE CONTRIBUTOR DEVELOPMENT PARTNERSHIP (\$7,967,424) FOR THE 6/30/25 FISCAL YEAR. CONTRIBUTOR DEVELOPMENT PARTNERSHIP CONSULTED ON THE CONTENT OF KVIE'S DIRECT MAIL CAMPAIGN LETTERS AND THEN USED A THIRD PARTY PRINTING COMPANY TO GET THOSE LETTERS PRINTED AND MAILED. KVIE MAILED HUNDREDS OF THOUSANDS OF LETTERS AND THERE IS NO WAY TO TRACK WHICH CONTRIBUTIONS CAME IN AS A DIRECT RESULT OF THE CONTENT OF THOSE LETTERS, WHICH PARTNER'S LETTER, WHICH SPOT RAN ON AIR, WHICH PRINT AD WAS PRINTED IN THE GUIDE, OR WHICH EMAIL, TEXT OR SOCIAL BLAST WAS DONE BY KVIE.

**SCHEDULE J  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees  
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
Attach to Form 990.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public  
Inspection

Name of the organization

**KVIE, INC.**

Employer identification number

**94-1421463**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |   |
|--|---|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use          |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence          |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef)        |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee          | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
<b>1b</b>	X	
<b>2</b>	X	
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) (Rev. 12-2024)

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DAVID LOWE PRESIDENT/GM	(i)	325,698.	57,600.	0.	22,505.	11,757.	417,560.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) STACI ORLANDO-WATERS CHIEF FINANCIAL OFFICER/ASSOC GM	(i)	172,610.	30,000.	0.	13,284.	12,159.	228,053.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MICHAEL SANFORD ASSOCIATE GM EMERITUS	(i)	151,602.	22,500.	0.	11,394.	15,804.	201,300.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) BOB FITZHUGH DIRECTOR OF TECHNOLOGY	(i)	154,831.	12,000.	0.	10,752.	1,024.	178,607.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ROSE FROLING HUMAN RESOURCES EXECUTIVE	(i)	130,287.	18,750.	0.	9,870.	1,534.	160,441.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

**PART I, LINE 1A:**

HEALTH CLUB SUBSIDY TO DAVID LOWE, STACI ORLANDO, ROSE FROLING. SOCIAL CLUB DUES TO DAVID LOWE. HEALTH CLUB SUBSIDY IS TREATED AS TAXABLE COMPENSATION. SOCIAL CLUB DUES ARE NOT TAXABLE COMPENSATION TO THE EMPLOYEE BECAUSE MEMBERSHIP IS REQUIRED AS PART OF HIS JOB DUTIES.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2024**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **KVIE, INC.** Employer identification number **94-1421463**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art	X	276	0.	FAIR MARKET VALUE
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	9,479	89,961.	FAIR MARKET VALUE
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				
15 Real estate - Residential				
16 Real estate - Commercial	X	1	912,000.	APPRAISAL
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				
25 Other ( <u>BROADCAST TOWER</u> )	X	1	250,000.	APPRAISAL
26 Other ( <u>EVENT TICKETS</u> )	X	556	41,202.	FAIR MARKET VALUE
27 Other ( )				
28 Other ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** 8

	Yes	No
30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 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.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2024

**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):  
TICKETS ARE THE NUMBER OF TICKETS PROVIDED. SECURITIES IS THE ACTUAL NUMBER OF INDIVIDUAL SHARES. ARTWORK IS THE NUMBER OF INDIVIDUAL PIECES DONATED TO US TO USE IN OUR ART AUCTION.

SCHEDULE M, PART I, LINE 32B:  
KVIE USES CHARITABLE ADULT RIDES AND SERVICES (CARS) TO PROCESS AND SELL VEHICLE DONATIONS. IF A DONOR DONATED REAL PROPERTY THEN KVIE WOULD USE A REALTOR TO SELL IT. WE USE AN ART GALLERY TO SELL ART DONATIONS THAT AREN'T SUITABLE FOR USE IN OUR OWN ART AUCTION. WE WOULD USE A LOCAL AUCTION HOUSE TO SELL RARE AND/OR EXPENSIVE COLLECTIBLES.

**SCHEDULE O  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**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.  
Attach to Form 990 or Form 990-EZ.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization <b>KVIE, INC.</b>	Employer identification number <b>94-1421463</b>
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**FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:  
THROUGH THE INTEGRITY OF PUBLIC MEDIA.**

**FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:**  
CREATING AND PRESENTING PROGRAMS ABOUT ITS PAST, PRESENT AND FUTURE,  
PROVIDING A SPRINGBOARD FOR ENGAGEMENT, DISCUSSION AND LIFE-LONG  
LEARNING. PBS KVIE EXPANDED ITS PRODUCTIONS TO INCLUDE MORE KEY LOCAL  
SERVICES, INCLUDING NEW LOCAL PROGRAMS IN THE AREAS OF ARTS, EDUCATION,  
ENVIRONMENT, LOCAL HISTORY, HEALTH, CIVIC ISSUES, AND REGIONAL  
LIFESTYLE. THROUGH NEW AND ENGAGING CONTENT, PBS KVIE'S ONLINE  
AUDIENCES GREW ON KVIE.ORG, KVIEKIDS.ORG, AND THROUGH NEW SOCIAL MEDIA  
OUTLETS. PBS KVIE ALSO CONTINUED TO WORK ON STRENGTHENING ITS FINANCIAL  
POSITION. PBS KVIE CONTINUED EDUCATION TO SERVE FAMILIES THROUGH  
EDUCATIONAL, COMMERCIAL-FREE CHILDREN'S PROGRAMMING. PBS KVIE'S LOCAL  
SERVICES DEEPLY IMPACTED THE GREATER SACRAMENTO REGION. THE YOUNGEST  
VIEWERS LEARNED THEIR ABC'S AND 123'S THROUGH THE STATION'S ON-AIR  
PROGRAMMING FOR PRESCHOOLERS AND FREE ONLINE AND ON-DEMAND CHILDREN'S  
CONTENT. RECENTLY TRANSPLANTED RESIDENTS LEARNED THE RICH HISTORY OF  
THEIR NEW COMMUNITY THROUGH PBS KVIE PROGRAMMING, BOTH ON-AIR AND  
ONLINE. AND LONGTIME RESIDENTS EXPLORED MORE IN-DEPTH ISSUES THAT  
IMPACT EVERYONE.

IN FY25, WE PRODUCED 15 STUDIO SACRAMENTO EPISODES THAT FEATURED  
LEADERS AND ORGANIZATIONS IN OUR COMMUNITIES. IN TWO SEPARATE EPISODES,  
SCOTT SYPHAX HELD ONE-ON-ONE CONVERSATIONS REGARDING THE CRISIS IN THE  
MIDDLE EAST WITH SACRAMENTO MAYOR DARRELL STEINBERG AND WITH BASIM  
ELKARRA OF CAIR SACRAMENTO VALLEY/CENTRAL CA, EACH SHARING THEIR  
PERSPECTIVES ON THE HISTORY OF THE REGION, THE CURRENT CRISIS, AND THE  
FUTURE MOVING FORWARD. OTHER EPISODES INCLUDED DISCUSSIONS ABOUT  
HOMELESSNESS AND PUBLIC POLICY, THE ECONOMIC OUTLOOK FOR THE REGION,  
WHO WILL BE THE NEXT MAYOR OF SACRAMENTO AND THE ISSUES THEY WILL FACE,  
AND WHAT TO EXPECT IN BUSINESS, RECREATION, AND ARTS IN 2024. GUESTS  
INCLUDED CONGRESSMAN DR. AMI BERA, CONGRESSMAN TOM MCCLINTOCK, FORMER  
SACRAMENTO CITY COUNCILMEMBER JEFF HARRIS, SACRAMENTO COUNTY DISTRICT  
ATTORNEY THIEN HO, THE SACRAMENTO BEE'S CALIFORNIA OPINION EDITOR  
MARCOS BRETN, AND SANJAY VARSHNEY OF GOLDSTONE WEALTH MANAGEMENT.

IN FY25, KVIE ARTS SHOWCASE CONTINUED TO CELEBRATE DIVERSE VOICES AND  
THEIR CREATIVE EXPRESSIONS. WE HIGHLIGHTED THE WORK OF WORLD-RENOWNED  
ARTIST MEHRI YAZDANI, WHOSE TEXTURED, HISTORY-RICH PAINTINGS REFLECT  
HER CULTURAL HERITAGE AND PERSONAL EXPERIENCES; HALIFU OSUMARE, A  
LEGENDARY DANCER, SCHOLAR, AND CHOREOGRAPHER, WHOSE WORK DEMONSTRATES  
DANCE AS A POWERFUL FORM OF KNOWLEDGE, IDENTITY, AND SELF EXPRESSION;  
SACRAMENTO-BASED ARTIST FEI FEI LIN, WHO CAPTIVATES AUDIENCES WITH HER  
ART THAT CHALLENGES EXPECTATIONS AND CONFRONTS LIFE'S COMPLEX TRUTHS.  
WE SHARED THE ART OF STORYTELLING BY WILLIAM TRAN OF CAPITAL  
STORYTELLING, WHO HELPS PROMOTE STORYTELLING AS A VITAL COMMUNITY  
BUILDING TOOL. WE ALSO LOOKED INTO THE LIFE AND ART OF SACRAMENTO-BORN  
ARTIST TEE SANDIFER, WHO WAS NAMED A FORBES LIST 50 CULTURE CHAMPION  
AND WORKS TO EXPAND THE REACH OF ART ACCESS FOR YOUTH.

**ROB ON THE ROAD CONTINUES TO INSPIRE AND UPLIFT NORTHERN CALIFORNIANS**

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) (Rev. 12-2024)

Name of the organization KVIE, INC.	Employer identification number 94-1421463
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WHILE SERVING AS A CORNERSTONE FOR SHARING OUR REGION'S NARRATIVES THROUGH INSIGHTFUL INTERVIEWS AND STORIES. IN FY25, WE DELIVERED 12 NEW HALF-HOUR EPISODES ALONGSIDE 17 SEGMENTS FOR BROADCAST AND ONLINE PLATFORMS. ONE EPISODE EXPLORED THE SACRAMENTO LOCOMOTIVE WORKS, INVITING PBS KVIE VIEWERS TO DISCOVER THE RICH RAILROAD HISTORY TUCKED AWAY INSIDE HISTORIC WAREHOUSES. VIEWERS WERE TREATED TO A BEHIND-THE-SCENES EXPERIENCE ON SACRAMENTO'S ICONIC TOWER BRIDGE; IN ANOTHER, ROB VISITED THE OLDEST CHINESE RESTAURANT IN THE US IN WOODLAND. OUR EPISODES SPOTLIGHTED CHANGE MAKERS AND INNOVATORS IN OUR COMMUNITY AS PART OF OUR ONGOING FUNDED INITIATIVE, ROB ON THE ROAD: REGION RISING. NOTABLE FIGURES INCLUDED SACRAMENTO POLICE CHIEF KATHY LESTER, SACRAMENTO FIRE CHIEF CHRIS COSTAMAGNA, AND WELLSPACE CEO JONATHAN PORTEUS, CREATING A UNIQUE PARTNERSHIP TO REENGINEER SACRAMENTO'S RESPONSE TO THE MENTAL HEALTH CRISIS; CIVIL RIGHTS AND FARM LABOR MOVEMENT LEADER DOLORES HUERTA; RUGBY CHAMP AND MOTIVATIONAL SPEAKER ROBERT PAYLOR ON LIFE OVERCOMING PARAPLEGIA; CALIFORNIA CEO JOSH FRYDAY ON THE LIFE-CHANGING IMPACT ON SERVING OTHERS IN TIMES OF NEED; VOICE OF THE YOUTH CEO BERRY ACCIUS ON HIS MISSION TO LEAD THE YOUTH OF THE REGION; HOLLYWOOD FILM PRODUCER AND ROBERT CRAIG FILMS CEO JENNIFER STOLO ON MAKING HER PASSION PROJECT "NO ADDRESS" FILMED IN SACRAMENTO CHRONICLING THE LIFE OF PEOPLE EXPERIENCING HOMELESSNESS; AND AN EXIT INTERVIEW WITH LIAL JONES OF THE CROCKER ART MUSEUM AND HOW HER ROLE AS THE MORT AND MARCY FRIEDMAN CEO AND DIRECTOR SHAPED THE STATE OF ARTS IN NORTHERN CALIFORNIA TODAY.

IN FY25, WE PRODUCED OR ACQUIRED 8 VIEWFINDER EPISODES, WHICH EXPLORED CIVIL RIGHTS, HISTORY, NATURE, ENVIRONMENTAL CHALLENGES, AND OTHER KEY TOPICS THROUGHOUT OUR DIVERSE REGION. HIGHLIGHTS INCLUDED A PROGRAM ON A NATIONWIDE CAMPAIGN TO CREATE AND SEND HANDMADE TEXTILE SQUARES ADVOCATING PEACE AND COOPERATION TO EVERY MEMBER OF CONGRESS; A CELEBRATION OF THE ABALONE SHELL IN THE CULTURE AND HISTORY OF NATIVE AMERICAN TRIBES ON CALIFORNIA'S NORTH COAST; A NEW EFFORT ORIGINATING IN THE SACRAMENTO REGION TO ENCOURAGE VETERANS TO WRITE LETTERS TO ALLEVIATE THEIR STRUGGLES WITH PTSD; THE HISTORY OF THE REMARKABLE ARTS PROGRAM AT UC DAVIS AND ITS MANY NOTEWORTHY TEACHES AND GRADUATES; A LOOK AT THE DEVASTATING EFFECTS OF STROKE AND ONE LOCAL MAN'S JOURNEY TOWARDS HEALING; AND VARIOUS EPISODES EXPLORING THE AMERICAN WEST, INCLUDING PINNACLES NATIONAL PARK, AMERICA'S NEWEST, LOCATED IN CALIFORNIA. IN FY26, WE WILL PRODUCE AT LEAST TWO NEW VIEWFINDER EPISODES ON LOCAL TOPICS AND WILL CONTINUE TO SEEK THE ACQUISITION OF AT LEAST SIX MORE.

IN FY25, WE BEGAN PRODUCTION ON THE SIXTH SEASON OF INSIDE CALIFORNIA EDUCATION, A STATEWIDE SERIES OF HALF-HOUR EPISODES FOCUSING ON THE STATE'S PUBLIC EDUCATION SYSTEM. PARTICULAR FOCUS CONTINUES TO BE ON IMPORTANT TOPICS LIKE THE NEED TO MONITOR AND RESTRICT THE USE OF CELL PHONES IN CLASSROOMS; HOW THE STATEWIDE MANDATE FOR EHTNIC STUDIES CLASSES IS BEING FULFILLED; HOW ONE SCHOOL DISTRICT HONORED AN IMPORTANT CALIFORNIA CIVIL RIGHTS EDUCATION COURT RULING; HOW A NEW COMMUNITY COLLEGE IS EDUCATING UNDERSERVED STUDENTS; HOW CHILDREN OF US SERVICEMEN AND WOMEN ARE GETTING EXTRA HELP; AND HOW AVIATION TRAINING IS HELPING STUDENTS REACH NEW HEIGHTS. THE SERIES CONTINUES TO BE WELL-RECEIVED BY OTHER CALIFORNIA STATIONS AND BY GENERAL VIEWERS AND STAKEHOLDERS IN CALIFORNIA EDUCATION. FOR SEASON 6, ABOUT \$480K IN FUNDING WAS RECEIVED FOR EIGHT NEW K-12 AND COMMUNITY COLLEGE PROGRAMS, TWO OF WHICH AIRED ON PBS KVIE IN FY25.

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IN FY25, PBS KVIE PRODUCED TEN ALL-NEW EPISODES OF AMERICA'S HEARTLAND AND THEY AIRED LOCALLY AND ON MORE THAN 88% OF ALL PBS STATIONS ACROSS THE U.S. THIS SEASON, MANY STORIES HIGHLIGHTED SMALL CALIFORNIA FARMERS FROM A VARIETY OF BACKGROUNDS, MANY GROWING CROPS FAVORED BY DIVERSE CONSUMERS. SINCE ITS LAUNCH IN 2005, EPISODES HAVE AIRED MORE THAN 500,000 TIMES THROUGHOUT THE PBS SYSTEM.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:  
EVERYDAY ADVENTURES OF CARL, A WARM-HEARTED AUSTISTIC RACCOON WHO ENJOYS COLLECTING THINGS AND LOVES HIS FRIENDS AND FAMILY IN FUZZYTOWN. CARL PAYS EXTRAORDINARILY CLOSE ATTENTION TO DETAIL AND COMES UP WITH UNIQUE IDEAS THAT OTHERS MIGHT NOT CONSIDER.

KVIE HOSTED BE MY NEIGHBOR DAY ON APRIL 5, 2025. INSPIRED BY "DANIEL TIGER'S NEIGHBORHOOD" AND PRESENTED IN PARTNERSHIP WITH FRED ROGERS PRODUCTIONS, THE DAY CELEBRATED KINDNESS AND THE IMPORTANCE OF BEING A CARING NEIGHBOR. THROUGHOUT THE EVENT, GUESTS WERE ABLE TO MEET DANIEL TIGER, COMPLETE HANDS-ON CRAFTS, PARTICIPATE IN A COMMUNITY ACT OF KINDNESS, MEET LOCAL FIRST RESPONDERS, AND MORE.

IN FY25, WE ALSO PARTNERED WITH THE CALIFORNIA ART EDUCATION ASSOCIATION TO HOST THE ANNUAL YOUTH ART MONTH ART SHOWCASE FROM FEBRUARY 11 - 28, ALONG WITH THE AWARDS CEREMONY ON MARCH 1. YOUTH ART MONTH CELEBRATES THE VISUAL ARTS AND RAISES AWARENESS FOR THE IMPORTANCE OF ART EDUCATION. MORE THAN 80 ARTWORKS FROM TALENTED K-12 NORTHERN CALIFORNIA STUDENTS WERE SELECTED AND DISPLAYED IN THE ENLOW AND MELENA OSE COMMUNITY ROOM.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:  
ZONE, COMPLIMENTARY SCONES AND COOKIES, AND SPECIAL GUESTS FROM THE JANE AUSTEN SOCIETY OF NORTH AMERICA - GREATER SACRAMENTO REGION.

IN ADDITION, SCREENING PARTIES WERE HELD TO CELEBRATE THE RETURN OF "ALL CREATURES GREAT AND SMALL ON MASTERPIECE." IN FY 25, WE HELD SCREENINGS IN MODESTO AT THE GALLO CENTER FOR THE ARTS ON DECEMBER 4, 2024, AND IN SACRAMENTO AT THE CREST THEATER ON DECEMBER 15, 2024. THE SCREENING PARTIES FEATURED TRIVIA AND PHOTOS OF GUESTS' PETS ON THE BIG SCREEN BEFORE THE SCREENING.

AS PART OF OUR INAUGURAL STUDIO SERIES, WE ALSO WELCOMED TRAVEL EXPERT RICK STEVES FOR AN EVENING LECTURE AT KVIE ON JANUARY 27, 2025. GUESTS GOT TO HEAR TIPS AND STORIES TO HELP PLAN THEIR OWN UPCOMING TRIPS TO EUROPE. IN ADDITION, COMEDIAN JACK GALLAGHER TOOK TO THE STAGE ON MAY 18, 2025. AUDIENCE MEMBERS GOT TO HEAR ABOUT JACK'S EXPERIENCE AS A NATIONALLY RECOGNIZED STANDUP COMIC, HIS STORIES FROM THE ROAD, FILM, AND TELEVISION ROLES, HIS EXTENSIVE WRITING CAREER, AND CURRENT PROJECTS.

FORM 990, PART VI, SECTION A, LINE 6:  
THE ORGANIZATION DOES HAVE MEMBERS. A QUORUM IS REQUIRED TO ELECT BOARD MEMBERS, WHICH WOULD REQUIRE OVER 6,000 MEMBERS BE IN ATTENDANCE AT THE ANNUAL MEETING. THIS DOESN'T HAPPEN SO MEMBERS DO NOT TYPICALLY ELECT INDIVIDUALS TO THE GOVERNING BODY.

FORM 990, PART VI, SECTION A, LINE 7A:

Name of the organization KVIE, INC.	Employer identification number 94-1421463
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MEMBERS MAY ONLY ELECT INDIVIDUALS TO THE GOVERNING BODY IN THE UNLIKELY EVENT THAT THE NOMINATING COMMITTEE PUTS FORTH MORE CANDIDATES THAN OPENINGS ARE AVAILABLE ON THE BOARD.

FORM 990, PART VI, SECTION A, LINE 7B:  
CERTAIN DECISIONS BY LAW, SUCH AS THE VOTE TO DISSOLVE THE CORPORATION, OR THE THE VOTE TO ELECT BOARD MEMBERS UNDER CERTAIN CIRCUMSTANCES, ARE LIMITED TO THE MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11B:  
THE FORM 990 WILL BE REVIEWED BY THE CEO AND CFO OF THE ORGANIZATION PRIOR TO FILING. ALL BOARD MEMBERS WILL RECEIVE A DRAFT COPY ONCE THE RETURN IS REVIEWED AND BE GIVEN THE OPPORTUNITY TO COMMENT AND ASK QUESTIONS BEFORE IT IS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:  
BOARD MEMBERS, PRESIDENT/GENERAL MANAGER AND THE CFO ALL REVIEW AND SIGN OFF ON THE CONFLICT OF INTEREST POLICY EACH YEAR, TYPICALLY DURING THE NOVEMBER BOARD MEETING. IF CONFLICTS ARE NOTED, A WRITTEN STATEMENT IS REQUIRED FROM THE INDIVIDUAL AND THESE STATEMENTS ARE MAINTAINED BY THE ORGANIZATION. NO CONFLICTS HAVE BEEN DISCLOSED AS OF THIS TIME

FORM 990, PART VI, SECTION B, LINE 15:  
THE PRESIDENT/GM'S COMPENSATION IS REVIEWED BY THE EXECUTIVE COMMITTEE AND COMPARED WITH SALARY SURVEYS FOR SIMILARLY-SIZED MARKETS, AND OTHER ORGANIZATIONS WITHIN THE SAME MARKET. CHANGES TO COMPENSATION ARE PERFORMANCE-BASED. THIS PROCESS WAS LAST UNDERTAKEN IN 2025.

THE CFO'S COMPENSATION WAS REVIEWED BY THE EXECUTIVE COMMITTEE AND COMPARED WITH SALARY SURVEYS FOR SIMILARLY-SIZED MARKETS. THIS PROCESS WAS LAST UNDERTAKEN IN 2025.

FORM 990, PART VI, SECTION C, LINE 18:  
IT IS ALSO REQUIRED TO BE POSTED ON THE WEBSITE OF BIG DAY OF GIVING TO PARTICIPATE IN THAT FUNDRAISER. IT IS AVAILABLE ON GUIDESTAR, PROPUBLICA, AND SIMILAR WEBSITES. THE IRS ALSO POSTS 990S ON ITS WEBSITE.

FORM 990, PART VI, SECTION C, LINE 19:  
THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. MANY OF THE ORGANIZATION'S POLICIES AND FINANCIAL REPORTS, INCLUDING THE AUDITED FINANCIALS, ARE ALSO AVAILABLE ON KVIE'S WEBSITE.

FORM 990, PART XII, LINE 2C:  
THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE FINANCIAL STATEMENT AUDIT, AND THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

**SCHEDULE R  
(Form 990)**

(Rev. January 2025)

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization **KVIE, INC.** Employer identification number **94-1421463**

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
KVIE REAL PROPERTY HOLDINGS LLC 2030 W EL CAMINO AVE SACRAMENTO, CA 95833	HOLDING TITLE TO PROPERTY FOR KVIE, INC.	CALIFORNIA	1,162,000.	1,347,000.	KVIE, INC.

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) (Rev. 1-2025)



**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity .....	<b>1a</b>	
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	<b>1b</b>	
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	<b>1c</b>	
<b>d</b> Loans or loan guarantees to or for related organization(s) .....	<b>1d</b>	
<b>e</b> Loans or loan guarantees by related organization(s) .....	<b>1e</b>	
<b>f</b> Dividends from related organization(s) .....	<b>1f</b>	
<b>g</b> Sale of assets to related organization(s) .....	<b>1g</b>	
<b>h</b> Purchase of assets from related organization(s) .....	<b>1h</b>	
<b>i</b> Exchange of assets with related organization(s) .....	<b>1i</b>	
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....	<b>1j</b>	
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....	<b>1k</b>	
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	<b>1l</b>	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....	<b>1m</b>	
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	<b>1n</b>	
<b>o</b> Sharing of paid employees with related organization(s) .....	<b>1o</b>	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....	<b>1p</b>	
<b>q</b> Reimbursement paid by related organization(s) for expenses .....	<b>1q</b>	
<b>r</b> Other transfer of cash or property to related organization(s) .....	<b>1r</b>	
<b>s</b> Other transfer of cash or property from related organization(s) .....	<b>1s</b>	

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			



**Part VII** Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

**PART I COLUMN A**

KVIE REAL PROPERTY HOLDINGS LLC'S CA ENTITY NUMBER IS 202026210731.