

Form 990
(Rev. January 2020)
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning OCT 1, 2019 **and ending** SEP 30, 2020

B Check if applicable:	C Name of organization KQED INC.	D Employer identification number 94-1241309
<input type="checkbox"/> Address change	Doing business as	E Telephone number (415) 864-2000
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2601 MARIPOSA STREET	
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code SAN FRANCISCO, CA 94110-1400	G Gross receipts \$ 174,981,007.
<input type="checkbox"/> Final return/terminated	F Name and address of principal officer: MICHAEL ISIP SAME AS C ABOVE	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Amended return		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
<input type="checkbox"/> Application pending	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	H(c) Group exemption number ▶
J Website: WWW.KQED.ORG		L Year of formation: 1954 M State of legal domicile: CA
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		

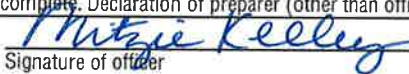

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>INFORM, INSPIRE, INVOLVE</u>	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	3 32
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 32
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5 599
	6	Total number of volunteers (estimate if necessary)	6 0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a 989,422.
	7b	Net unrelated business taxable income from Form 990-T, line 39	7b -3,227.

			Prior Year	Current Year
			Revenue	8
	9	Program service revenue (Part VIII, line 2g)	17,961,383.	13,396,601.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	9,722,479.	7,010,229.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	407,308.	543,016.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	121,484,926.	103,418,209.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	49,647,340.	51,989,987.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	1,565,353.	2,100,925.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 19,502,520.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	38,225,405.	37,897,776.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	89,438,098.	91,988,688.
	19	Revenue less expenses. Subtract line 18 from line 12	32,046,828.	11,429,521.
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	278,519,073.	304,837,195.
	21	Total liabilities (Part X, line 26)	21,372,480.	38,425,894.
	22	Net assets or fund balances. Subtract line 21 from line 20	257,146,593.	266,411,301.

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. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	▶ 	Date <u>8-13-21</u>			
	Signature of officer				
Paid Preparer Use Only	Print/Type preparer's name QI WEN LIANG	Preparer's signature 	Date 08/10/2021	Check if self-employed <input type="checkbox"/>	PTIN P01270238
	Firm's name ▶ GRANT THORNTON LLP	Firm's address ▶ 101 CALIFORNIA STREET, SUITE 2700 SAN FRANCISCO, CA 94111	Firm's EIN ▶ 36-6055558	Phone no. 415-986-3900	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. KQED INC.	Taxpayer identification number (TIN) 94-1241309
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 2601 MARIPOSA STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SAN FRANCISCO, CA 94110-1400	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

MITZIE KELLEY

- The books are in the care of ▶ **KQED CFO 2601 MARIPOSA STREET SAN - FRANCISCO, CA 94110**
Telephone No. ▶ **415-864-2000** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **AUGUST 16, 2021**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year _____ or
▶ tax year beginning **OCT 1, 2019**, and ending **SEP 30, 2020**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

COPY

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: SEE SCHEDULE O

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 \$ 25,085,071. including grants of \$) (Revenue \$ 1,986,768.) MULTIPLATFORM CONTENT - NEWS, ARTS AND SCIENCE: SEE SCHEDULE O

4b (Code:) (Expenses \$ 15,922,141. including grants of \$) (Revenue \$ 2,143,996.) TELEVISION: SEE SCHEDULE O

4c (Code:) (Expenses \$ 8,984,750. including grants of \$) (Revenue \$ 9,100,127.) FM RADIO: SEE SCHEDULE O

4d Other program services (Describe on Schedule O.) (Expenses \$ 10,079,256. including grants of \$) (Revenue \$ 165,710.)

4e Total program service expenses 60,071,218.

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 campaign activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, bond issues, and transactions.

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

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No checkboxes. Includes questions 2a through 16 regarding employee counts, tax returns, gross 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 (32), 1b (32), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS
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.
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

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) JOHN BOLAND FORMER PRESIDENT AND CEO	40.00 0.00						X	969,044.	0.	15,400.
(2) MICHAEL ISIP PRESIDENT AND CEO	55.00 0.00			X				454,025.	0.	39,545.
(3) SARAH SAWYER LOCAL MARKETING DIRECTOR	50.00 0.00					X		343,681.	0.	10,874.
(4) MICHAEL BLACK EXEC DIRECTOR MARKETING SPONSORSHIP	60.00 0.00					X		295,573.	0.	16,760.
(5) ELIZABETH SEIRMARCO LOCAL MARKETING DIRECTOR	55.00 0.00					X		259,914.	0.	45,374.
(6) MARIA MILLER CHIEF ADMIN OFFICER	50.00 0.00				X			255,812.	0.	43,356.
(7) HOLLY KERNAN CHIEF CONTENT OFFICER	50.00 0.00				X			263,216.	0.	32,257.
(8) MITZIE KELLEY CHIEF FINANCIAL OFFICER	46.00 0.00			X				258,837.	0.	27,268.
(9) LAUREEN CHANG LOCAL MARKETING DIRECTOR	60.00 0.00					X		257,244.	0.	27,005.
(10) WILLIAM LOWERY GENERAL COUNSEL & CORP SECRETARY	45.00 0.00			X				252,100.	0.	28,235.
(11) DELINDA MROWKA CHIEF AUDIENCE OFFICER	48.00 0.00				X			253,096.	0.	16,246.
(12) GEORGANNA KELLY VP DEVELOPMENT	55.00 0.00				X			243,137.	0.	24,766.
(13) JOHN REILLY EXEC DIRECTOR IT & ENTERPRISE SYST	50.00 0.00					X		244,866.	0.	21,015.
(14) JASON BRENNEMAN VP, CHIEF STAFF & SPECIAL OPS	48.00 0.00				X			213,708.	0.	29,483.
(15) TIM OLSON SR. VP, STRATEGIC DIGITAL PARTNERSHI	50.00 0.00				X			211,782.	0.	29,273.
(18) HANK BARRY BOARD CHAIR	10.00 0.00	X		X				0.	0.	0.
(19) ANNE AVIS COMMITTEE CHAIR	0.90 0.00	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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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			
(20) ALEXANDRA VAN HELDEN COMMITTEE CHAIR	0.90 0.00	X						0.	0.	0.
(21) BRIAN CHEU COMM. CHAIR/EXEC COMM/TREASURER	1.10 0.00	X		X				0.	0.	0.
(22) CAMILLA SMITH COMMITTEE CHAIR	0.90 0.00	X						0.	0.	0.
(23) JOHN BUOYMASTER (AS OF 01/20) EXEC COMMITTEE/COMMITTEE CHAIR	1.10 0.00	X						0.	0.	0.
(24) MEG GARLINGHOUSE COMMITTEE CHAIR/NOMINATING COMMITTEE	1.10 0.00	X						0.	0.	0.
(25) MIKE BLACH COMMITTEE CHAIR	0.90 0.00	X						0.	0.	0.
(26) NANCY SERRURIER COMM CHAIR/EXC COMM/SECRETARY	1.10 0.00	X		X				0.	0.	0.
(27) RAJ PHERWANI COMMITTEE CHAIR	0.90 0.00	X						0.	0.	0.
(28) SHADI ELKARRA COMMITTEE CHAIR/NOMINATING COMMITTEE	1.10 0.00	X						0.	0.	0.
1b Subtotal								4,776,035.	0.	406,857.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								4,776,035.	0.	406,857.

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 149

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 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
CAHILL CONTRACTORS LLC, 425 CALIFORNIA ST, SUITE 2200, SAN FRANCISCO, CA 94101	CONSTRUCTION SVCS	8,455,221.
ESHERICK HOMSEY DODGE & DAVIS ARCH. PIER 1 EMBARCADERO, SAN FRANCISCO, CA 94111	BUILDING DESIGN	3,020,386.
BECHTEL GROUP, INC. P.O. BOX 7700, GLENDALE, AZ 85312	SPACE RENTAL/SVCS	1,853,484.
ONE DIVERSIFIED, LLC 37 MARKET STREET, KENILWORTH, NJ 07033	INSTALLATION SVCS	1,744,154.
DSI VIDEO SYSTEMS, LLC 37 MARKET STREET, KENILWORTH, NJ 07033	INSTALLATION SVCS	1,512,065.

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 36

SEE PART VII, SECTION A CONTINUATION SHEETS

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 (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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			
(29) TOM CHAVEZ COMMITTEE CHAIR	0.90 0.00	X						0.	0.	0.
(30) EDWARD LICHTY EXECUTIVE COMMITTEE	0.90 0.00	X		X				0.	0.	0.
(31) JAIMIE STUDLEY EXECUTIVE COMMITTEE	0.90 0.00	X						0.	0.	0.
(32) SIMONE OTUS COXE EXECUTIVE COMMITTEE	0.90 0.00	X						0.	0.	0.
(33) STEVE BOCHNER EXECUTIVE COMMITTEE	0.90 0.00	X						0.	0.	0.
(34) JEN MCCLURE NOMINATING COMMITTEE	0.90 0.00	X						0.	0.	0.
(35) JULIA LOPEZ NOMINATING COMMITTEE	0.90 0.00	X						0.	0.	0.
(36) MARK PERRY NOMINATING COMMITTEE	0.90 0.00	X						0.	0.	0.
(37) NANCY FARESE NOMINATING COMMITTEE	0.90 0.00	X						0.	0.	0.
(38) SANJAY VASWANI NOMINATING COMMITTEE (AS OF 01/20)	0.90 0.00	X						0.	0.	0.
(39) ANNIE JEAN-BAPTISTE BOARD MEMBER (AS OF 01/20)	0.70 0.00	X						0.	0.	0.
(40) CARLA JAVITS BOARD MEMBER (AS OF 01/20)	0.70 0.00	X						0.	0.	0.
(41) JAMES CHAM BOARD MEMBER (AS OF 01/20)	0.70 0.00	X						0.	0.	0.
(42) JENNIFER CABALQUINTO BOARD MEMBER	0.70 0.00	X						0.	0.	0.
(43) KAREN EDWARDS BOARD MEMBER	0.70 0.00	X						0.	0.	0.
(44) LISA SOBRATO SONSINI BOARD MEMBER	0.70 0.00	X						0.	0.	0.
(45) MALLUN YEN BOARD MEMBER	0.70 0.00	X						0.	0.	0.
(46) MATTHEW ZINN BOARD MEMBER	0.70 0.00	X						0.	0.	0.
(47) NADIA ROUMANI BOARD MEMBER	0.70 0.00	X						0.	0.	0.
(48) NAVEEN CHOPRA BOARD MEMBER (AS OF 01/20)	0.70 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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 (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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			
(49) ROSELYNE SWIG BOARD MEMBER	0.70 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	7,846,751.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	74,621,612.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 3,930,192.				
	h Total. Add lines 1a-1f			82,468,363.			
Program Service Revenue	2 a UNDERWRITING	Business Code					
		515100	12,925,263.		989,422.	11,935,841.	
	b PROGRAM SALES	515100	311,999.	311,999.			
	c PRESENTING STATION FEE	515100	115,050.	115,050.			
	d SERVICE CONTRACTS	515100	27,289.	27,289.			
	e PRODUCTION REVENUE	515100	17,000.	17,000.			
	f All other program service revenue						
g Total. Add lines 2a-2f			13,396,601.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		4,911,985.			4,911,985.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		50,248.			50,248.	
	6 a Gross rents	6a	(i) Real	125,849.			
			(ii) Personal				
				0.			
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c	125,849.				
	d Net rental income or (loss)			125,849.		125,849.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	73,661,042.			
			(ii) Other				
				71,559,166.	3,632.		
				2,101,876.	-3,632.		
d Net gain or (loss)			2,098,244.		2,098,244.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
		b Less: direct expenses	8b				
		c Net income or (loss) from fundraising events					
9 a Gross income from gaming activities. See Part IV, line 19	9a						
		b Less: direct expenses	9b				
		c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	10a						
		b Less: cost of goods sold	10b				
		c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	11 a MISCELLANEOUS REVENUE	Business Code					
		900099	316,386.			316,386.	
	b LIST SALES	900099	50,533.			50,533.	
	c _____						
	d All other revenue						
e Total. Add lines 11a-11d			366,919.				
12 Total revenue. See instructions			103,418,209.	471,338.	989,422.	19,489,086.	

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	2,854,489.	566,364.	1,722,257.	565,868.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	531,587.		531,587.	
7 Other salaries and wages	35,827,607.	24,119,306.	4,707,147.	7,001,154.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,417,098.	888,160.	255,094.	273,844.
9 Other employee benefits	7,893,428.	5,056,259.	1,460,015.	1,377,154.
10 Payroll taxes	3,465,778.	2,172,161.	623,880.	669,737.
11 Fees for services (nonemployees):				
a Management				
b Legal	287,731.		281,503.	6,228.
c Accounting	100,029.		100,029.	
d Lobbying	61,590.	61,590.		
e Professional fundraising services. See Part IV, line 17	2,100,925.			2,100,925.
f Investment management fees	345,683.		345,683.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	3,000,802.	2,150,937.	278,838.	571,027.
12 Advertising and promotion	603,797.	502,076.	11,425.	90,296.
13 Office expenses	4,961,402.	1,951,841.	304,219.	2,705,342.
14 Information technology	2,514,412.	1,713,797.	310,843.	489,772.
15 Royalties	99,831.	99,801.		30.
16 Occupancy	5,069,253.	4,123,982.	444,607.	500,664.
17 Travel	298,153.	233,118.	26,164.	38,871.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	47,976.	30,823.	3,653.	13,500.
20 Interest	41,589.		41,589.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,492,857.	5,312,328.	661,468.	519,061.
23 Insurance	315,506.	201,955.	71,967.	41,584.
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 PROGRAM ACQUISITIONS &	9,999,987.	9,882,575.	85,134.	32,278.
b MEMBERSHIP & DONOR PREM	1,450,283.	40,000.	14.	1,410,269.
c AUDIENCE RESEARCH & AUD	887,965.	685,088.		202,877.
d NPM FEES	631,729.			631,729.
e All other expenses _____	687,201.	279,057.	147,834.	260,310.
25 Total functional expenses. Add lines 1 through 24e	91,988,688.	60,071,218.	12,414,950.	19,502,520.
26 Joint costs. 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
Assets	1 Cash - non-interest-bearing	900.	1	900.
	2 Savings and temporary cash investments	41,481,109.	2	73,945,731.
	3 Pledges and grants receivable, net	15,725,639.	3	14,763,825.
	4 Accounts receivable, net	3,240,203.	4	4,542,971.
	5 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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	272,984.	8	308,140.
	9 Prepaid expenses and deferred charges	2,522,289.	9	3,476,347.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 109,394,024.		
	b Less: accumulated depreciation	10b 34,391,323.		
	11 Investments - publicly traded securities	36,009,991.	10c	75,002,701.
	12 Investments - other securities. See Part IV, line 11	176,668,310.	11	130,346,371.
	13 Investments - program-related. See Part IV, line 11	538,168.	12	489,882.
	14 Intangible assets	0.	13	0.
	15 Other assets. See Part IV, line 11	2,000,207.	14	1,914,134.
16 Total assets. Add lines 1 through 15 (must equal line 33)	59,273.	15	46,193.	
	278,519,073.	16	304,837,195.	
Liabilities	17 Accounts payable and accrued expenses	12,493,853.	17	21,586,419.
	18 Grants payable		18	
	19 Deferred revenue	426,684.	19	711,772.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	8,451,943.	25	16,127,703.
	26 Total liabilities. Add lines 17 through 25	21,372,480.	26	38,425,894.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	187,048,430.	27	195,463,490.
	28 Net assets with donor restrictions	70,098,163.	28	70,947,811.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	257,146,593.	32	266,411,301.
33 Total liabilities and net assets/fund balances	278,519,073.	33	304,837,195.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	103,418,209.
2	Total expenses (must equal Part IX, column (A), line 25)	2	91,988,688.
3	Revenue less expenses. Subtract line 2 from line 1	3	11,429,521.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	257,146,593.
5	Net unrealized gains (losses) on investments	5	-2,162,329.
6	Donated services and use of facilities	6	-2,485.
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	266,411,301.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <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 in Schedule O.		
2a	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	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	
c	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	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	X	

Form 990 (2019)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization KQED INC.	Employer identification number 94-1241309
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	63,108,662.	65,525,980.	66,991,558.	93,393,756.	82,468,363.	371,488,319.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	63,108,662.	65,525,980.	66,991,558.	93,393,756.	82,468,363.	371,488,319.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						10,508,728.
6 Public support. Subtract line 5 from line 4.						360,979,591.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	63,108,662.	65,525,980.	66,991,558.	93,393,756.	82,468,363.	371,488,319.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,868,313.	2,051,247.	3,547,699.	4,863,855.	5,088,082.	17,419,196.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	128,182.	95,583,054.	349,378.	228,530.	366,919.	96,656,063.
11 Total support. Add lines 7 through 10						485,563,578.
12 Gross receipts from related activities, etc. (see instructions)					12	76,879,266.
13 First five 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	74.34 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	75.89 %
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2018. 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 stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2019. 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 stop here. 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 10% -facts-and-circumstances test - 2018. 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 stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. 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

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five 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

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2019. 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 - 2018. 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 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>		
2 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>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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>		
c 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>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
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>		
c 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>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) 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 Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 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>		
7 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 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a 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 Did one or more disqualified persons (as defined in 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>		
c Did a disqualified person (as defined in 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>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
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
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the 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?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a 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? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a 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? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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	Adjusted Net Income (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	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% 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 .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<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).		

Schedule A (Form 990 or 990-EZ) 2019

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	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

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:

PARKING REVENUE

2015 AMOUNT: \$ 128,182.

2016 AMOUNT: \$ 123,945.

2017 AMOUNT: \$ 119,428.

2018 AMOUNT: \$ 96,874.

2019 AMOUNT: \$ 0.

SPECTRUM AUCTION

2015 AMOUNT: \$ 0.

2016 AMOUNT: \$ 95,459,109.

2017 AMOUNT: \$ 0.

2018 AMOUNT: \$ 0.

2019 AMOUNT: \$ 0.

MISCELLANEOUS REVENUE

2015 AMOUNT: \$ 0.

2016 AMOUNT: \$ 0.

2017 AMOUNT: \$ 210,493.

2018 AMOUNT: \$ 123,152.

2019 AMOUNT: \$ 316,386.

LIST SALE

2015 AMOUNT: \$ 0.

2016 AMOUNT: \$ 0.

2017 AMOUNT: \$ 19,457.

2018 AMOUNT: \$ 8,504.

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.)

2019 AMOUNT: \$ 50,533.

Multiple horizontal lines for supplemental information.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2019

Name of the organization

KQED INC.

Employer identification number

94-1241309

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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 or 990-EZ), 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, 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, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).

Name of organization KQED INC.	Employer identification number 94-1241309
---------------------------------------	--

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
1	<hr/> <hr/> <hr/>	\$ 6,601,787.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 2,050,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization KQED INC.	Employer identification number 94-1241309
---------------------------------------	--

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
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization KQED INC.	Employer identification number 94-1241309
---------------------------------------	--

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
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2019

Open to Public Inspection

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 for instructions and the latest information.**

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

If 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 <p style="text-align: center;">KQED INC.</p>	Employer identification number <p style="text-align: center;">94-1241309</p>
--	---

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 employer identification number (EIN) 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-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. **Schedule C (Form 990 or 990-EZ) 2019**

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.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">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:	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:	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.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	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?														

Yes 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.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f 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)).

	(a)		(b)
	Yes	No	Amount
<i>For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.</i>			
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		6,598.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		61,590.
i Other activities?		X	
j Total. Add lines 1c through 1i			68,188.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

THE DIRECTOR OF EXTERNAL AFFAIRS FOR KQED SILICON VALLEY ATTENDED THE

APTS SUMMIT IN WASHINGTON, D.C. AND MET WITH LEGISLATORS TO DISCUSS

FEDERAL FUNDING FOR PUBLIC MEDIA.

Part IV Supplemental Information (continued)

DIRECT CONTACT:

MEETINGS WERE HELD WITH SENATORS AND CONGRESSIONAL REPRESENTATIVES WHO

REPRESENT KQED'S SERVICE AREA TO DISCUSS THE IMPORTANCE OF CONTINUED

FUNDING FOR CORPORATION FOR PUBLIC BROADCASTING, READY TO LEARN, AND

INTERCONNECTION.

RALLIES, DEMONSTRATIONS, SEMINARS, CONVENTIONS, SPEECHES OR OTHER

MEANS:

KQED IS A DUES-PAYING MEMBER OF THE ASSOCIATION OF AMERICA'S PUBLIC

TELEVISION STATIONS (APTS).

THE ASSOCIATION OF PUBLIC TELEVISION STATIONS (APTS) IS A NONPROFIT

MEMBERSHIP ORGANIZATION ESTABLISHED IN 1979. THE MISSION OF APTS IS TO

CONDUCT IN-CONCERT WITH MEMBER STATIONS ADVOCACY, PLANNING, RESEARCH

AND COMMUNICATIONS ACTIVITIES IN ORDER TO ACHIEVE STRONG AND

FINANCIALLY SOUND NONCOMMERCIAL TELEVISION AND ADVANCED DIGITAL

SERVICES FOR THE AMERICAN PEOPLE. APTS PROVIDES CONSISTENT LEADERSHIP

AND INFORMATION THAT HELPS THEIR MEMBERS BETTER ACCOMPLISH THEIR OWN

MISSIONS AND GOALS. APTS PROMOTES THE LEGISLATIVE AND REGULATORY

INTERESTS OF NONCOMMERCIAL TELEVISION STATIONS AT THE NATIONAL LEVEL

THROUGH DIRECT ADVOCACY, AND GRASS-TOPS AND GRASSROOTS CAMPAIGNS TO

GARNER CONGRESSIONAL SUPPORT.

DURING THE TAX YEAR ENDING SEPTEMBER 30, 2020, KQED PAID \$61,590 OF

DUES TO APTS AND SENT ONE PAID EMPLOYEE TO ATTEND THE ANNUAL APTS

CONFERENCE.

SCHEDULE D
(Form 990)

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 for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization KQED INC. **Employer identification number** 94-1241309

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 in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, 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?

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 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2019

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 |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 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 on 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
1a Beginning of year balance	151,303,737.	148,596,443.	140,424,425.	61,227,599.	56,616,773.
b Contributions	5,309,590.	4,074,454.	4,682,857.	74,220,046.	1,575,445.
c Net investment earnings, gains, and losses	4,093,095.	6,580,559.	6,521,054.	7,839,899.	5,712,519.
d Grants or scholarships					
e Other expenditures for facilities and programs	45,060,775.	7,947,719.	3,031,893.	2,863,119.	2,677,138.
f Administrative expenses					
g End of year balance	115,645,647.	151,303,737.	148,596,443.	140,424,425.	61,227,599.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 73.05 %
 - b Permanent endowment 17.11 %
 - c Term endowment 9.84 %
- 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 |
|---|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 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
1a Land		1,269,691.		1,269,691.
b Buildings		15,423,033.	7,262,355.	8,160,678.
c Leasehold improvements		3,897,856.	2,491,048.	1,406,808.
d Equipment		42,965,667.	24,637,920.	18,327,747.
e Other		45,837,777.		45,837,777.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				75,002,701.

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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

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)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

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) PPP LOAN	8,116,900.
(3) LIAB. TO BENEFICIARIES OF CHARITABLE GIFT	
(4) ANNUITIES & TRUST	3,973,922.
(5) DEFERRED COMPENSATION OBLIGATIONS	2,234,423.
(6) ACCRUED BROADCAST RIGHTS	1,499,253.
(7) DEFERRED RENT LIABILITY	266,290.
(8) ACCRUED INTEREST	36,915.
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	16,127,703.

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	101,843,732.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-2,162,329.	
b	Donated services and use of facilities	2b	915,180.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	-1,247,149.
3	Subtract line 2e from line 1		3	103,090,881.
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	345,683.	
b	Other (Describe in Part XIII.)	4b	-18,355.	
c	Add lines 4a and 4b		4c	327,328.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	103,418,209.

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	92,579,025.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	917,665.	
b	Prior year adjustments	2b		
c	Other losses	2c	14,723.	
d	Other (Describe in Part XIII.)	2d	3,632.	
e	Add lines 2a through 2d		2e	936,020.
3	Subtract line 2e from line 1		3	91,643,005.
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	345,683.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	345,683.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	91,988,688.

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:

INTENDED USE OF ENDOWMENT FUNDS

THE ORGANIZATION'S PRIMARY LONG-TERM MANAGEMENT OBJECTIVE IS TO PROVIDE

GENERAL SUPPORT IN MEETING THE NEEDS OF KQED PROVIDED THAT A DONOR MAKING

A CONTRIBUTION TO THE PERMANENT ENDOWMENT MAY IMPOSE SPECIFIC USE

RESTRICTIONS ON THE DONOR'S CONTRIBUTION.

PART X, LINE 1:

THE CORPORATION WAS GRANTED A LOAN (THE "LOAN") FROM COMMUNITY

REINVESTMENT FUND, INC. IN THE AGGREGATE AMOUNT OF \$8,116,900, PURSUANT TO

THE PAYCHECK PROTECTION PROGRAM (THE "PPP") UNDER THE CORONAVIRUS AID,

RELIEF AND ECONOMIC SECURITY ACT ("CARES ACT"). UNDER THE TERMS OF THE

Part XIII Supplemental Information (continued)

PPP, CERTAIN AMOUNTS OF THE LOAN MAY BE FORGIVEN IF CERTAIN CRITERIA ARE

MET. ON OCTOBER 22, 2020, THE CORPORATION APPLIED FOR FULL FORGIVENESS OF

THE LOAN.

PART X, LINE 2:

LIABILITY FOR UNCERTAIN TAX POSITIONS

THE CORPORATION FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR

UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX

RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITIONS AND

MEASUREMENT. THIS GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM AN

UNCERTAIN TAX POSITION CAN ONLY BE RECOGNIZED IN THE FINANCIAL STATEMENTS

IF THE POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION

WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX

POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT

REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED.

THE CORPORATION IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3)

OF THE INTERNAL REVENUE CODE, THOUGH IT IS SUBJECT TO TAX ON INCOME

UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED

BY THE INTERNAL REVENUE CODE. THE CORPORATION HAS ALSO BEEN RECOGNIZED BY

THE FRANCHISE TAX BOARD AS AN ORGANIZATION THAT IS EXEMPT FROM INCOME TAX

PURSUANT TO CALIFORNIA REVENUE AND TAX CODE SECTION 23701D ON ITS INCOME

OTHER THAN THE UNRELATED BUSINESS INCOME. THE CORPORATION HAS PROCESSES

PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS; TO

IDENTIFY AND REPORT UNRELATED INCOME; TO DETERMINE ITS FILING AND TAX

OBLIGATIONS IN JURISDICTIONS FOR WHICH IT WAS NEXUS; AND TO IDENTIFY AND

EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. THE

CORPORATION HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX

Part XIII Supplemental Information (continued)

POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL

STATEMENTS.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

LOSS ON INVESTMENTS RECLASSIFIED FROM EXPENSES -14,723.

LOSS ON ASSETS DISPOSED RECLASSIFIED FROM EXPENSES -3,632.

TOTAL TO SCHEDULE D, PART XI, LINE 4B -18,355.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

LOSS ON ASSETS DISPOSED RECLASSIFIED FROM EXPENSES 3,632.

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2019

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization **KQED INC.** Employer identification number **94-1241309**

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
MAL WARWICK & ASSOCIATES, INC. - 2550 NINTH STREET, #3,	DIGITAL FUNDRAISING		X	5,580,208.	2,081,140.	3,499,068.
CARL BLOOM ASSOCIATES, INC. - 81 MAIN STREET, FIRST FLOOR,	FUNDRAISING		X	530,853.	18,269.	512,584.
INFOCISION, INC. - 325 SPRINGSIDE DRIVE, AKRON, OH	TELEMARKETING		X	2,936.	1,516.	1,420.
Total				6,113,997.	2,100,925.	4,013,072.

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, MA, MD, ME, MI, MN, MS, ND, NH, NJ, NM, NV, NY
OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

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))
		(event type)	(event type)	(total number)	
Revenue	1	Gross receipts			
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
	11	Net income summary. Subtract line 10 from line 3, column (d)			

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	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	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
	7	Direct expense summary. Add lines 2 through 5 in column (d)			
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)			

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:

a The organization's facility	13a	%
b An outside facility	13b	%
- 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 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: MAL WARWICK & ASSOCIATES, INC.

(I) ADDRESS OF FUNDRAISER: 2550 NINTH STREET, #3, BERKELEY, CA 94710

(I) NAME OF FUNDRAISER: CARL BLOOM ASSOCIATES, INC.

(I) ADDRESS OF FUNDRAISER:

81 MAIN STREET, FIRST FLOOR, WHITE PLAINS, NY 10601

Part IV Supplemental Information (continued)

(I) NAME OF FUNDRAISER: INFOCISION, INC.

(I) ADDRESS OF FUNDRAISER: 325 SPRINGSIDE DRIVE, AKRON, OH 44333

Multiple horizontal lines for supplemental information.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2019

Open to Public Inspection

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 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization
KQED INC.

Employer identification number
94-1241309

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 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 type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input 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
1b		
2		
4a		X
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2019

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 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) JOHN BOLAND FORMER PRESIDENT AND CEO	(i)	375,480.	222,508.	371,056.	15,400.	375.	984,819.	280,000.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MICHAEL ISIP PRESIDENT AND CEO	(i)	366,543.	87,206.	276.	15,400.	24,717.	494,142.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SARAH SAWYER LOCAL MARKETING DIRECTOR	(i)	340,051.	3,629.	1.	10,874.	244.	354,799.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MICHAEL BLACK EXEC DIRECTOR MARKETING SPONSORSHIP	(i)	275,677.	19,776.	120.	0.	17,185.	312,758.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ELIZABETH SEIRMARCO LOCAL MARKETING DIRECTOR	(i)	256,621.	3,287.	6.	15,254.	30,376.	305,544.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) MARIA MILLER CHIEF ADMIN OFFICER	(i)	229,606.	25,930.	276.	15,043.	28,892.	299,747.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) HOLLY KERNAN CHIEF CONTENT OFFICER	(i)	233,540.	29,400.	276.	15,108.	17,729.	296,053.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) MITZIE KELLEY CHIEF FINANCIAL OFFICER	(i)	230,197.	27,848.	792.	14,693.	13,146.	286,676.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) LAUREEN CHANG LOCAL MARKETING DIRECTOR	(i)	252,266.	4,869.	109.	14,352.	12,951.	284,547.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) WILLIAM LOWERY GENERAL COUNSEL & CORP SECRETARY	(i)	225,032.	26,276.	792.	14,025.	14,754.	280,879.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) DELINDA MROWKA CHIEF AUDIENCE OFFICER	(i)	228,519.	24,397.	180.	13,997.	2,820.	269,913.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) GEORGANNA KELLY VP DEVELOPMENT	(i)	216,871.	25,990.	276.	11,340.	14,005.	268,482.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) JOHN REILLY EXEC DIRECTOR IT & ENTERPRISE SYST	(i)	191,590.	53,000.	276.	13,565.	8,022.	266,453.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) JASON BRENNEMAN VP, CHIEF STAFF & SPECIAL OPS	(i)	189,528.	24,000.	180.	12,333.	17,729.	243,770.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) TIM OLSON SR. VP, STRATEGIC DIGITAL PARTNERSHI	(i)	188,570.	22,936.	276.	12,100.	17,752.	241,634.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(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.

SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN

SCHEDULE J, PART I, LINE 4B:

JOHN BOLAND, FORMER PRESIDENT & CEO'S BASE SALARY WAS \$375,480 AND

INCENTIVE COMPENSATION OF \$222,508. IN ADDITION TO THIS COMPENSATION,

HE RECEIVED A \$370,347 PAYOUT OF HIS 457(F) NON-QUALIFIED DEFERRED PLAN

IN 2019 DUE TO HIS TERMINATION. THE ACCUMULATED 457(F) CONTRIBUTIONS

PREVIOUSLY REPORTED AS DEFERRED COMPENSATION ARE REPORTED ON SCHEDULE

J, PART II, COLUMN F.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **KQED INC.** Employer identification number **94-1241309**

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				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles	X	3,929	3,268,072.	FMV
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	134	605,085.	FMV
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				
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 (FOOD, RADIO P)	X	8	57,035.	FMV
26 Other ()				
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 IV, Donee Acknowledgement **29** 23

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three 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.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2019

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):

THE NUMBER OF CONTRIBUTORS REFLECTS THE NUMBER OF DONORS, NOT THE NUMBER OF ITEMS DONATED.

SCHEDULE M, LINE 32B:

THE ORGANIZATION USES AN UNRELATED THIRD PARTY, CHARITABLE ADULT RIDES & SERVICES (CARS), TO ADMINISTER ITS VEHICLE DONATION PROGRAM. CARS ACCEPTS VEHICLE DONATIONS ON KQED'S BEHALF AND SENDS A LETTER TO THE DONOR ACKNOWLEDGING THE DONATION. THE CHARITABLE DONATIONS ARE THEN RECEIVED AT KQED, NET OF CARS' SERVICE FEE.

SCHEDULE O
(Form 990 or 990-EZ)

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 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization

KQED INC.

Employer identification number

94-1241309

FORM 990, PART III, LINE 1:

DESCRIPTION OF ORGANIZATION MISSION

KQED SERVES THE PEOPLE OF NORTHERN CALIFORNIA WITH A
COMMUNITY-SUPPORTED ALTERNATIVE TO COMMERCIAL MEDIA, PROVIDING CITIZENS
WITH THE KNOWLEDGE THEY NEED TO MAKE INFORMED DECISIONS; CONVENING
COMMUNITY DIALOGUE; BRINGING THE ARTS TO EVERYONE; AND ENGAGING
AUDIENCES TO SHARE THEIR STORIES. KQED HELPS STUDENTS AND TEACHERS
THRIVE IN 21ST-CENTURY CLASSROOMS AND TAKES PEOPLE OF ALL AGES ON
JOURNEYS OF EXPLORATION - EXPOSING THEM TO NEW PEOPLE, PLACES AND
IDEAS.

KQED'S VISION

KQED IS REDEFINING PUBLIC MEDIA FOR THE BAY AREA, MAKING IT MORE
INCLUSIVE, PARTICIPATORY AND COMMUNITY POWERED.

WE CELEBRATE DIVERSITY, EMBRACE INNOVATION, VALUE LIFELONG LEARNING AND
PARTNER WITH THOSE WHO SHARE OUR PASSION FOR PUBLIC SERVICE.

FORM 990, PART III, LINE 4A:

PROGRAM SERVICE ACCOMPLISHMENTS

KQED'S MULTIDISCIPLINARY CONTENT TEAMS - FOCUSING ON NEWS; ARTS &
CULTURE; EDUCATION AND SCIENCE - WORK TO EXPAND REGIONAL COVERAGE AND
ENSURE OUR CONTENT IS AVAILABLE VIA MOBILE, SOCIAL AND INTERACTIVE
MEDIA AS WELL AS ON RADIO AND TELEVISION.

IN FY20, NEW MULTIMEDIA PROJECTS INCLUDED THE POLITICAL MIND OF JERRY

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization KQED INC.	Employer identification number 94-1241309
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BROWN AND SOLD OUT: RETHINKING HOUSING IN AMERICA. ABOVE THE NOISE,
DEEP LOOK, MINDSHIFT, RIGHTNOWISH, TRUTH BE TOLD, BAY CURIOUS AND OTHER
PROJECTS ALSO CONTINUED THIS YEAR.

THE POLITICAL MIND OF JERRY BROWN EXPLORES BROWN'S TAKE ON GOVERNMENT,
POLITICS AND THE STATE HE LOVES. IT AIRED ON KQED PUBLIC RADIO AND WAS
ALSO RELEASED AS A PODCAST.

SOLD OUT: RETHINKING HOUSING IN AMERICA, ENVISIONS WHAT HOME SHOULD BE
BY EXAMINING CALIFORNIA, THE EPICENTER OF THE NATION'S AFFORDABILITY
CRISIS. THE PODCAST FOCUSES ON DREAMERS AND DOERS WHO ARE FINDING
SOLUTIONS TO HIGH HOUSING COSTS.

EACH YEAR, KQED CELEBRATES THE DIVERSITY OF OUR COMMUNITY WITH A
SPECIAL LINEUP OF PROGRAMS, INCLUDING EVENTS AND FILM SCREENINGS DURING
BLACK HISTORY; WOMEN'S HISTORY; ASIAN AMERICAN PACIFIC ISLANDER;
LESBIAN GAY BISEXUAL TRANSGENDER QUEER (LGBTQ); LATINO HERITAGE; INDIAN
HERITAGE; AND DISABILITY CULTURE AWARENESS MONTHS. KQED HAS LONG
RECOGNIZED THE IMPORTANT CONNECTION BETWEEN CULTURAL HERITAGE AND THE
ARTS AND HAS MADE EVENTS (ONLINE THIS YEAR BECAUSE OF THE PANDEMIC) AN
INTEGRAL PART OF OUR HERITAGE MONTH CELEBRATIONS.

FORM 990, PART III, LINE 4B:
PROGRAM SERVICE ACCOMPLISHMENTS
KQED 9 AND KQED PLUS ARE AMONG THE NATION'S MOST-WATCHED PUBLIC
TELEVISION STATIONS WITH AN AVERAGE OF 843,000 WEEKLY VIEWERS IN THE
SAN FRANCISCO-OAKLAND-SAN JOSE MARKET. KQED OWNS AND OPERATES PUBLIC
TELEVISION STATIONS KQED-TV/DT CHANNEL 9 (SAN FRANCISCO), KQEH-TV/DT

Name of the organization KQED INC.	Employer identification number 94-1241309
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CHANNEL 54 (SAN JOSE) AND KQET-TV/DT CHANNEL 25 (WATSONVILLE/MONTEREY).

KQED'S DIGITAL TELEVISION CHANNELS INCLUDE KQED 9; KQED PLUS; KQED WORLD; AND PBS KIDS, AND ARE AVAILABLE 24/7 OVER THE AIR AND ON CABLE.

SINCE FIRST GOING ON THE AIR IN 1954, KQED HAS BEEN AN INTEGRAL PART OF THE BAY AREA'S MEDIA AND CULTURAL LANDSCAPE. THE STATION PRODUCES ITS OWN UNIQUE CONTENT AND COLLABORATES WITH FILMMAKERS AND DOCUMENTARY PRODUCERS TO PRESENT INDEPENDENT PROGRAMMING.

KQED PUBLIC TELEVISION IS COMMITTED TO PRODUCING, CO-PRODUCING AND PRESENTING CONTENT THAT SERVES THE PEOPLE OF NORTHERN CALIFORNIA AND BEYOND. IN FY20, KQED CONTINUED TO BROADCAST LOCALLY PRODUCED SERIES SHOWCASING DIFFERENT ASPECTS OF LIFE IN THE BAY AREA. PROGRAMS INCLUDED THE 15TH SEASON OF CHECK, PLEASE! BAY AREA, WHERE LOCAL DINERS REVIEW THEIR FAVORITE BAY AREA RESTAURANTS; AND SPIN-OFF EPISODES CHECK, PLEASE! BAY AREA KIDS; THE 7TH SEASON OF KQED NEWSROOM, A WEEKLY MULTIPLATFORM NEWS PROGRAM ON TELEVISION, RADIO AND ONLINE; AND THE DOCUMENTARY SERIES TRULY CA, WHICH PRESENTED 10 INDEPENDENTLY PRODUCED FILMS IN ITS 15TH SEASON.

KQED WAS ALSO A LEADER IN PRESENTING INDEPENDENT PRODUCTIONS TO NATIONWIDE AUDIENCES, INCLUDING SEVERAL RELEASES FROM ROADTRIP NATION, INCLUDING REROUTING, MAKING IT BALANCE AND TO BE DETERMINED. ALSO, KQED PRESENTED JOANNE WEIR'S PLATES AND PLACES, SEASON THREE; AND A COLLABORATIVE RELEASE WITH THE WORLD CHANNEL CALLED STATES OF AMERICA. KQED SUPPORTED THESE PROGRAMS IN FINDING DISTRIBUTION AND NATIONAL AUDIENCES IN FY20.

Name of the organization KQED INC.	Employer identification number 94-1241309
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FORM 990, PART III, LINE 4C:

PROGRAM SERVICE ACCOMPLISHMENTS

KQED PUBLIC RADIO IS AMONG THE MOST-LISTENED-TO PUBLIC RADIO STATIONS

IN THE NATION, WITH AN AVERAGE OF 728,533 WEEKLY RADIO LISTENERS IN THE

SAN FRANCISCO METRO SURVEY AREA, AND AN ADDITIONAL 31,808 IN THE

SACRAMENTO AREA.

KQED OWNS AND OPERATES KQED PUBLIC RADIO 88.5 FM SAN FRANCISCO AND 89.3

FM SACRAMENTO. ITS AWARD-WINNING NEWS AND PUBLIC AFFAIRS PROGRAM

SERVICE CAN BE HEARD ON 88.5 FM OR COMCAST CHANNEL 960 IN SAN

FRANCISCO, KQEI 89.3 FM IN SACRAMENTO AND 88.3 FM IN SANTA ROSA AND

88.1 FM IN MARTINEZ.

KQED PUBLIC RADIO BROADCASTS MANY OF NPR'S STELLAR PROGRAMS. KQED

PUBLIC RADIO ALSO PRODUCES A SIGNIFICANT NUMBER OF LOCAL PROGRAMS AND

SERIES, INCLUDING THE AWARD-WINNING FORUM; POLITICAL BREAKDOWN; THE

CALIFORNIA REPORT, A WEEKDAY NEWS REPORT CARRIED ACROSS THE STATE, AND

ITS COUNTERPART THE CALIFORNIA REPORT MAGAZINE, A WEEKLY 30-MINUTE NEWS

MAGAZINE. IN ADDITION, THERE ARE WEEKLY KQED SCIENCE RADIO REPORTS AND

18 WEEKDAY AND WEEKEND KQED NEWS REPORTS.

KQED PUBLIC RADIO PRESENTED CONTENT FROM THE COMMONWEALTH CLUB OF

CALIFORNIA, THE WORLD AFFAIRS COUNCIL AND CITY ARTS AND LECTURES. IT

ALSO BROADCASTS A RADIO VERSION OF KQED NEWSROOM.

KQED PUBLIC RADIO CONTINUED TO EMBRACE 21ST-CENTURY MEDIA TECHNIQUES IN

2020, SERVING THE SAN FRANCISCO BAY AREA WITH CONTENT THROUGH A WIDE

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ARRAY OF ON-DEMAND ONLINE SERVICES. SOME KQED PUBLIC RADIO BROADCASTS
ARE ALSO PART OF THE SIRIUS SATELLITE NETWORK.

KQED PUBLIC RADIO STAFF RECEIVED TWO AWARDS FROM THE SOCIETY OF
PROFESSIONAL JOURNALISTS (NATIONAL).

FORM 990, PART III, LINE 4D:

OTHER PROGRAM SERVICES
KQED DIGITAL, WHICH INCLUDES KQED.ORG, DEVELOPS CONTENT AND
APPLICATIONS FOR DIGITAL PLATFORMS, SMART SPEAKERS AND MOBILE DEVICES;
HOSTS ONLINE SERVICES FOR KQED PUBLIC TELEVISION, KQED PUBLIC RADIO AND
KQED EDUCATIONAL SERVICES; AND SERVES AS A COMMUNITY CONVENER,
PROVIDING EVENT LISTINGS, RESOURCES, ONLINE POLLS, PODCASTS, BLOGS AND
OTHER ITEMS OF TIMELY INTEREST. KQED.ORG FUNCTIONS AS KQED'S THIRD
MEDIA PLATFORM, DELIVERING CONTENT SPECIFICALLY ACQUIRED AND PRODUCED
FOR THE WEB.

KQED SERIES AND BLOGS INCLUDE DEEP LOOK, A REMARKABLE SCIENCE VIDEO
SERIES ON THE PBS DIGITAL STUDIOS NETWORK; ABOVE THE NOISE, SERIES THAT
INVESTIGATES CONTROVERSIAL SUBJECT MATTER TO HELP YOUNG VIEWERS DRAW
INFORMED CONCLUSIONS, ALSO ON THE PBS DIGITAL STUDIOS NETWORK; IF
CITIES COULD DANCE, A VIDEOS SERIES THAT EXPLORES DANCERS FROM AROUND
THE COUNTRY; MINDSHIFT, A BLOG AND PODCAST SERIES EXPLORING THE FUTURE
OF LEARNING IN ALL ITS DIMENSIONS; LOCAL NEWS PODCASTS; AND THE
CALIFORNIA REPORT. ADDITIONAL PODCASTS INCLUDE BAY CURIOUS, ABOUT THE
UNEXPLORED SAN FRANCISCO BAY AREA; THE BAY, A LOCAL NEWS PODCAST; AND
MORE.

Name of the organization KQED INC.	Employer identification number 94-1241309
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KQED DIGITAL IS A LEADER IN THE NATIONAL PUBLIC BROADCASTING ARENA,
DEVELOPING INTERACTIVE TECHNOLOGY PRODUCTS AND DIGITAL CONTENT THAT
SERVE THE BAY AREA'S GROWING DIGITAL-FIRST AUDIENCE. THIS YEAR, WE
REACHED THIS AUDIENCE THROUGH A SMART SPEAKER SERIES CALLED THE
VOICEBOT CHRONICLES, WHICH EARNED A WEBBY AWARD FOR BEST WRITING IN THE
APPS, MOBILE AND VOICE CATEGORY.

KQED.ORG'S AUDIENCE CONTINUES TO GROW AND IS ONE OF THE MOST-TRAFFICKED
PUBLIC MEDIA WEBSITES IN THE UNITED STATES. IN FY20, KQED.ORG SERVED AN
AVERAGE OF 1.8 MILLION UNIQUE USERS EACH MONTH AND AN AVERAGE OF 5.7
MILLION MONTHLY PAGE VIEWS OF ITS ONLINE CONTENT. PROPOSED LANGUAGE: IN
FY20, KQED REACHED A WEEKLY AVERAGE OF APPROXIMATELY 593,000 WEBSITE
USERS.

KQED RECEIVED PROMINENT AWARDS FOR MULTIMEDIA/WEB CONTENT IN FY20. THEY
INCLUDE TWO NORTHERN CALIFORNIA EMMY AWARDS FOR PORTRAITS OF NAPA
WORKERS: ARLEENE CORREA VALENCIA AND FOR DEEP LOOK; THE CURIOUS
WEBSPINNER INSECT KNITS A COZY HOME. KQED ALSO WON NATIONAL EDWARD R.
MURROW AWARDS FOR GRAYING CALIFORNIA, A COLLABORATIVE REPORTING
PROJECT. THE BAY PODCAST WON A REGIONAL EDWARD R. MURROW AWARD FOR
EXCELLENCE IN INNOVATION. AND KQED WAS ALSO AWARDED FIVE ADDITIONAL
REGIONAL EDWARD R. MURROW AWARDS. KQED'S ARTS & CULTURE TEAM'S
FEATURE-LENGTH FILM DEAR HOMELAND WON A CINE LAS AMERICAS CLA2020
VIRTUAL SHOWCASE AWARD FOR BEST DOCUMENTARY FEATURE AND FOR BEST SHORT
DOCUMENTARY AT THE 18TH OAKLAND INTERNATIONAL FILM FESTIVAL. THE
VOICEBOT CHRONICLES AND IF CITIES COULD DANCE BOTH WON WEBBY AWARDS.
AND SAM LEFEBVRE WON THE DOROTHEA AND LEO RABKIN PRIZE FOR EXCELLENCE
IN ARTS REPORTING, WHILE RUTH GEBREYESUS WON LES DAMES D'ESCOFFIER

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EXCELLENCE IN FOOD JOURNALISM.

UNDER KQED'S LEADERSHIP, CALIFORNIA'S PRE-K-12 EDUCATORS CONTINUE TO HAVE FREE ACCESS TO TENS OF THOUSANDS OF DIGITAL ASSETS FROM KQED AND PBS, INCLUDING VIDEOS, GAMES, AUDIO, PHOTOS, IN-DEPTH LESSON PLANS AND EVEN DISCUSSION QUESTIONS. ADDITIONALLY, KQED IS HELPING STUDENTS BUILD DIGITAL LITERACY SKILLS AND FORM EVIDENCE-BASED ARGUMENTS WITH EDUCATION PROPERTY ABOVE THE NOISE. THIS CONTENT DIRECTLY ENGAGES STUDENTS AND TEACHERS FROM AROUND THE BAY AREA AND ACROSS THE COUNTRY IN PUBLIC DISCOURSE OF ISSUES IMPORTANT TO THE LIVES OF YOUTH.

IN FY20, KQED'S EDUCATION SOURCES, INCLUDING STUDENT MEDIA AND LEARNING PLATFORMS AS WELL AS TEACHER PROFESSIONAL DEVELOPMENT, SAW A SIGNIFICANT INCREASE IN USE PARTLY DUE TO COVID-19 SCHOOL CLOSURES. KQED.ORG/EDUCATION WEB PROPERTIES RECEIVED MORE THAN 1.9 MILLION VISITORS. THE ABOVE THE NOISE YOUTUBE SERIES GARNERED OVER 1.2M VIEWS. KQED LEARN REACHED MORE THAN 200,200 WEB VISITORS (+165% Y/Y), AND 11,082 NEW MIDDLE AND HIGH SCHOOL STUDENTS REGISTERED FOR THE PLATFORM. ON AVERAGE, ABOUT 115,000 TEACHERS AND STUDENTS PER MONTH ACCESSED THE PBS LEARNING/MEDIA PLATFORM WE MANAGE FOR CALIFORNIA. 5,576 EDUCATORS ATTENDED ONLINE WORKSHOPS, AND 132,200 VISITORS CAME TO KQED TEACH (+143% Y/Y), RESULTING IN 4,000 NEW REGISTRATIONS. MORE THAN 500 NEW MICROCREDENTIALS WERE AWARDED TO EDUCATORS ON THEIR JOURNEY TO EARNING PBS MEDIA LITERACY CERTIFICATION BY KQED.

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 REVIEW PROCESS

THE PROCESS FOR REVIEWING THE KQED FORM 990 PRIOR TO FILING INCLUDED A

Name of the organization KQED INC.	Employer identification number 94-1241309
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VIRTUAL MEETING AND PRESENTATION BY THE ORGANIZATION'S CPA FIRM TO THE
 AUDIT COMMITTEE, A REVIEW BY THE CONTROLLER, CFO, AND THE AUDIT COMMITTEE
 OF THE BOARD. AFTER THE AUDIT COMMITTEE APPROVES THE FORM 990, THE FORM 990
 IS PROVIDED TO ALL VOTING MEMBERS OF THE BOARD PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:
 MONITORING AND ENFORCEMENT OF CONFLICT-OF-INTEREST POLICY
 IN ACCORDANCE WITH THE ORGANIZATION'S CONFLICT OF INTEREST POLICY, ALL
 DIRECTORS, OFFICERS, AND KEY EMPLOYEES FILL OUT AND SIGN A CONFLICT OF
 INTEREST DISCLOSURE FORM, WHICH IS REVIEWED AND MAINTAINED IN THE GENERAL
 COUNSEL'S OFFICE. KEY EMPLOYEES AND OFFICERS FILL OUT THE CONFLICT OF
 INTEREST DISCLOSURE FORM ANNUALLY. BOARD OF DIRECTORS FILL OUT THE CONFLICT
 OF INTEREST DISCLOSURE FORM WHEN THEIR INITIAL TERM COMMENCES, AND THEN ARE
 ASKED ANNUALLY TO REPORT ANY CHANGES THAT WOULD GIVE RISE TO A CONFLICT OF
 INTEREST. IF A CONFLICT OF INTEREST WERE TO ARISE, THE KEY EMPLOYEE,
 OFFICER OR BOARD MEMBER WITH THE CONFLICT WOULD BE RECUSED FROM THE
 DECISION MAKING PROCESS.

FORM 990, PART VI, SECTION B, LINE 15:
 PROCESS FOR DETERMINING COMPENSATION OF OFFICERS AND KEY EMPLOYEES
 THE EXECUTIVE COMMITTEE OF THE BOARD IS RESPONSIBLE FOR REVIEWING THE
 COMPENSATION OF THE PRESIDENT/CEO, AND IT MAKES RECOMMENDATIONS TO THE
 BOARD OF DIRECTORS, WHO APPROVED ANY SUCH COMPENSATION. THE PRESIDENT/CEO
 IS RECUSED FROM ANY DISCUSSION AND VOTE. THE PROCESS FOLLOWED BY THE BOARD
 TO DEVELOP AND APPROVE THE COMPENSATION PACKAGE FOR THE PRESIDENT/CEO
 INCLUDED THE REVIEW OF DATA ON COMPARABLE COMPENSATION PACKAGES AND
 RECOMMENDATIONS, PREPARED BY AN OUTSIDE CONSULTANT. BASED ON THE DATA AND
 RECOMMENDATIONS FROM THE CONSULTANT AS WELL AS AN EVALUATION OF THE

Name of the organization KQED INC.	Employer identification number 94-1241309
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PRESIDENT/CEO'S PERFORMANCE AGAINST PREVIOUSLY SET GOALS, THE EXECUTIVE COMMITTEE DELIBERATED AND AGREED UPON RECOMMENDATIONS TO THE BOARD. THE FULL BOARD DELIBERATED ABOUT THE COMPENSATION PACKAGE BASED ON THE RECOMMENDATIONS FROM THE EXECUTIVE COMMITTEE AND APPROVED THE SALARY FOR THE PRESIDENT/CEO.

IN DETERMINING SALARIES FOR OTHER OFFICERS AND KEY EMPLOYEES, KQED'S PRESIDENT/CEO AND ITS CHIEF ADMINISTRATIVE OFFICER, ANALYZE DATA FROM RELEVANT COMPENSATION SURVEYS, INCLUDING THE EXECUTIVE COMPENSATION SURVEY SPONSORED BY WETA, AND THE EXECUTIVE COMPENSATION FOR PBS STATION SURVEY. IN ADDITION, THEY HAVE DISCUSSIONS WITH CONTEMPORARIES AT SIMILARLY SITUATED PUBLIC BROADCASTING STATIONS CONCERNING COMPENSATION FOR KEY EMPLOYEES IN COMPARABLE POSITIONS. FINALLY, THEY CONSIDER THE HISTORICAL AND CURRENT COMPENSATION PAID BY KQED FOR COMPARABLE POSITIONS, AS WELL AS THE SKILLS AND EXPERIENCE OF THE INDIVIDUAL EMPLOYEE.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AL,AK,AR,CA,CO,CT,DC,FL,GA,HI,IL,KS,KY,MA,MD,ME,MI,MN,MS,ND,NV,NH,NJ,NM,NY
OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WI,WV

FORM 990, PART VI, SECTION C, LINE 19:
DOCUMENTS MADE AVAILABLE TO THE PUBLIC:
THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST FOR THE SAME PERIOD OF TIME SET FORTH IN 26 U.S. CODE 6104(D). CONDENSED FINANCIAL INFORMATION IS ALSO MADE AVAILABLE TO THE PUBLIC VIA THE ANNUAL KQED REPORT TO THE COMMUNITY, WHICH IS POSTED ON THE ORGANIZATION'S WEBSITE IN ADDITION TO ITS FORM 990 AND AUDITED FINANCIAL STATEMENTS.

Name of the organization KQED INC.	Employer identification number 94-1241309
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FORM 990, PART VIII, LINE 1E:

CONTRIBUTIONS RECEIVED AS GOVT. GRANTS

CORPORATION FOR PUBLIC BROADCASTING IS A PRIVATE, NOT-FOR-PROFIT

CORPORATION. IT RECEIVES APPROPRIATIONS FROM CONGRESS, WHICH IT

DISTRIBUTES TO SUPPORT A NATIONAL POLICY FOR GROWTH AND DEVELOPMENT OF

RADIO AND TELEVISION BROADCASTING.

COVID-19 DISCLOSURE

ON JANUARY 30, 2020, THE WORLD HEALTH ORGANIZATION ("WHO") ANNOUNCED A

GLOBAL HEALTH EMERGENCY BECAUSE OF A NEW STRAIN OF CORONAVIRUS (THE

"COVID-19 OUTBREAK") AND THE RISKS TO THE INTERNATIONAL COMMUNITY AS

THE VIRUS SPREAD GLOBALLY BEYOND ITS POINT OF ORIGIN. IN MARCH 2020,

THE WHO CLASSIFIED THE COVID-19 OUTBREAK AS A PANDEMIC. THE CORPORATION

SAW A REDUCTION IN UNDERWRITING REVENUE, DUE TO A DECLINE IN DEMAND FOR

ON-AIR SPONSORSHIPS. TO ADDRESS THIS DECLINE, MANAGEMENT IDENTIFIED

COST SAVING MEASURES ACROSS THE CORPORATION. REVENUE WITHIN ALL OTHER

MAJOR CATEGORIES REMAINED STABLE THROUGH FISCAL YEAR-END. THE FULL

IMPACT OF THE COVID-19 OUTBREAK TO THE CORPORATION IS UNCERTAIN AND

WILL DEPEND ON THE DURATION AND DEPTH OF THE PANDEMIC. MANAGEMENT IS

ACTIVELY MONITORING THE IMPACT ON ITS FINANCIAL CONDITION, LIQUIDITY,

OPERATIONS, AND WORKFORCE.

**SCHEDULE R
(Form 990)**

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 for instructions and the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization **KQED INC.** Employer identification number **94-1241309**

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

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

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
CHARITABLE REMAINDER ANNUITY TRUST (1)	INVESTMENT	CA	N/A	TRUST					X
CHARITABLE REMAINDER UNITRUST (11)	INVESTMENT	CA	N/A	TRUST					X

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.

1 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?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) <small>Are all partners sec. 501(c)(3) orgs.?</small>		(f) Share of total income	(g) Share of end-of-year assets	(h) <small>Dispropor- tionate allocations?</small>		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) <small>General or managing partner?</small>		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	