Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No. 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning JUL 1, 2010 **and ending** JUN 30, 2011

B Check if applicable: [ ] Address change [ ] Name change [ ] Initial return [ ] Terminated [ ] Amended return [ ] Application pending

C Name of organization
MINNESOTA PUBLIC RADIO
AMERICAN PUBLIC MEDIA

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
480 CEDAR STREET

City or town, state or country, and ZIP + 4
ST. PAUL, MN 55101

D Employer identification number
41-0953924

E Telephone number
651-290-1446

G Gross receipts $ 80,729,318.

F Name and address of principal officer: THOMAS J. KIGIN
SAME AS C ABOVE

H(a) Is this a group return for affiliates? [ ] Yes [X] No

H(b) Are all affiliates included? [ ] Yes [ ] No
If "No," attach a list. (see instructions)

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ WWW.MPR.ORG/WWW.AMERICANPUBLICMEDIA.ORG

H(c) Group exemption number ▶

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation: 1967 **M** State of legal domicile: MN

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: PUBLIC MEDIA, PRODUCTION AND BROADCASTING

2 Check this box ▶ [ ] 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	34
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	33
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	600
6	Total number of volunteers (estimate if necessary)	6	249
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	305,472.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	189,403.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	54,915,732.	59,083,626.
	9	Program service revenue (Part VIII, line 2g)	16,717,588.	18,939,593.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	359,707.	570,531.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,395,871.	1,576,884.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	73,388,898.	80,170,634.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,759,509.	1,726,076.
	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)	37,611,101.	40,090,115.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	156,881.	348,962.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 9,292,339.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	34,646,300.	39,860,427.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	74,173,791.	82,025,580.
	19	Revenue less expenses. Subtract line 18 from line 12	-784,893.	-1,854,946.
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	161,806,458.	162,861,513.
	21	Total liabilities (Part X, line 26)	60,166,260.	58,590,455.
	22	Net assets or fund balances. Subtract line 21 from line 20	101,640,198.	104,271,058.

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

▶ Signature of officer | Date

▶ THOMAS J. KIGIN, EXECUTIVE VP
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
TODD A. JACKSON				

Firm's name ▶ MCGLADREY & PULLEN, LLP | Firm's EIN ▶

Firm's address ▶ 801 NICOLLET MALL, SUITE 1100
MINNEAPOLIS, MN 55402 | Phone no. 612-332-4300

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
THE MISSION OF MINNESOTA PUBLIC RADIO (MPR) IS TO INFORM, ENRICH AND NOURISH ITS AUDIENCES, ASSISTING THEM TO ENGAGE EFFECTIVELY AS CITIZENS, ENHANCE THEIR LIVES, EXPAND THEIR PERSPECTIVS AND STRENGTHEN THEIR COMMUNITIES. WE SEEK AUDIENCES INTERESTED IN EXPANDING THEIR

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
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 60,386,615. including grants of $ 1,726,076.) (Revenue $ 18,939,593.)
IN ORDER TO ACCOMPLISH ITS MISSION, IN THE FISCAL YEAR 2011 (TAX YEAR 2010), MINNESOTA PUBLIC RADIO (MPR) OPERATED A NETWORK OF 47 NONCOMMERCIAL (EDUCATIONAL) PUBLIC RADIO STATIONS THAT, IN CONJUNCTION WITH MPR'S NETWORK PRODUCTION CENTER, PRODUCED, ACQUIRED AND BROADCAST THREE PROGRAM SERVICES (A FULL-TIME SERVICE OF CLASSICAL MUSIC PROGRAMMING, A FULL-TIME SERVICE OF NEWS & INFORMATION PROGRAMMING, AND A FULL-TIME SERVICE OF ALTERNATIVE MUSIC PROGRAMMING) TOTALING OVER 26,208 HOURS OF BROADCASTING. AT LEAST ONE MPR BROADCAST SIGNAL WAS EASILY RECEIVABLE BY 95% OF THE POPULATION OF MINNESOTA, AS WELL AS BY SUBSTANTIAL SEGMENTS OF THE POPULATION OF NEIGHBORING STATES. WE ESTIMATE THAT DURING THE FISCAL YEAR, A WEEKLY TOTAL OF 954,500 PEOPLE LISTENED TO THE RADIO PROGRAMMING BROADCAST BY THE REGIONAL RADIO

4b (Code:) (Expenses $ including grants of $) (Revenue $)

4c (Code:) (Expenses $ including grants of $) (Revenue $)

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

4e **Total program service expenses** ▶ 60,386,615.

SEE SCHEDULE O FOR CONTINUATION(S)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b	X	
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17	X	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25*	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c	X	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	X	
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* [X] Yes [ ] No			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	480		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	600		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file*. (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	X
b	If "Yes," enter the name of the foreign country: ▶				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c	
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c X	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h X	
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8	
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?			9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?			13a	
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a	X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b	

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 in Schedule O. See instructions.*

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	34		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	33		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Does the organization have members or stockholders?	6			X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			X

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	X	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ MN, CA, MI, WI

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

[X] Own website [X] Another's website [X] Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶

DOUG RODERICK - 651-290-1446
480 CEDAR STREET, ST. PAUL, MN 55101

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

Check if Schedule O contains a response to any question 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ 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 (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
RANDALL J. HOGAN TRUSTEE/CHAIRMAN	2.00	X		X				0.	0.	0.
IAN R. FRIENDLY TRUSTEE/VICE CHAIRMAN	1.00	X		X				0.	0.	0.
WILLIAM KLING PRESIDENT/CEO/TRUSTEE	25.00	X		X				0.	644,872.	38,913.
BRADBURY H. ANDERSON TRUSTEE/SECRETARY	1.00	X		X				0.	0.	0.
PAUL REYELTS TRUSTEE/TREASURER	1.00	X		X				0.	0.	0.
MARYANN BAENNINGER, PHD TRUSTEE	1.00	X						0.	0.	0.
SUSAN BOREN TRUSTEE	1.00	X						0.	0.	0.
GEORGE BUCKLEY TRUSTEE	1.00	X						0.	0.	0.
PATRICK J. DENZER TRUSTEE	1.00	X						0.	0.	0.
JANET M. DOLAN TRUSTEE	1.00	X						0.	0.	0.
STEVE FRITZE TRUSTEE	1.00	X						0.	0.	0.
SARA H. GAVIN TRUSTEE	1.00	X						0.	0.	0.
KIRSTEN GORSUCH TRUSTEE	1.00	X						0.	0.	0.
SUSAN KAHN TRUSTEE	1.00	X						0.	0.	0.
RICK KING TRUSTEE	1.00	X						0.	0.	0.
EMERY KOENIG TRUSTEE	1.00	X						0.	0.	0.
ANITA H. KUNIN TRUSTEE	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
KARIN L. LARSON TRUSTEE	1.00	X						0.	0.	0.
WILLIAM R. MCLAUGHLIN TRUSTEE	1.00	X						0.	0.	0.
MARTI MORFITT TRUSTEE	1.00	X						0.	0.	0.
GLEN D. NELSON, MD TRUSTEE	1.00	X						0.	0.	0.
DR. MARY NICHOLS TRUSTEE	1.00	X						0.	0.	0.
MICHAEL O'KEEFE TRUSTEE	1.00	X						0.	0.	0.
RICHARD B. PAYNE, JR TRUSTEE	1.00	X						0.	0.	0.
WILLIAM PEARCE TRUSTEE	1.00	X						0.	0.	0.
JAMES J. PHELPS TRUSTEE	1.00	X						0.	0.	0.
1b Sub-total ▶								0.	644,872.	38,913.
c Total from continuation sheets to Part VII, Section A ▶								2,341,619.	1,276,983.	312,186.
d Total (add lines 1b and 1c) ▶								2,341,619.	1,921,855.	351,099.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 59

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		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? *If "Yes," complete Schedule J for such individual*	4	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? *If "Yes," complete Schedule J for such person*	5		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.

(A) Name and business address	(B) Description of services	(C) Compensation
LEONARD, STREET AND DEINARD, 150 SOUTH FIFTH STREET, SUITE 2300, MINNEAPOLIS, MN	LEGAL SERVICES	556,746.
ALL MOBILE VIDEO 221 WEST 26TH STREET, NEW YORK, NY 10001	PRODUCTION SUPPORT	447,300.
CUSTOMERLINK, 1 EAST FIRST ST. SUITE 300, DULUTH, MN 55802	FUNDRAISING	311,677.
RADIO RESEARCH CONSORTIUM 18200 HILLCREST AVE, ONLEY, MD 20832	AUDIENCE DATA AND ANALYSIS	197,735.
LYRIS TECHNOLOGIES, INC, 6401 HOLLIS ST, SUITE 125, EMERYVILLE, CA 94908	TECHNOLOGY SUPPORT	192,604.

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 12

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	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
ADDISON (TAD) PIPER TRUSTEE	1.00	X						0.	0.	0.
JAMES T. PROKOPANKO TRUSTEE	1.00	X						0.	0.	0.
STEVEN M. ROTHSCHILD TRUSTEE	1.00	X						0.	0.	0.
ROBERT J. SIVERTSEN TRUSTEE	1.00	X						0.	0.	0.
ROBERT STEPHENS TRUSTEE	1.00	X						0.	0.	0.
DAVID R. STRAND TRUSTEE	1.00	X						0.	0.	0.
AUSTIN P. SULLIVAN JR TRUSTEE	1.00	X						0.	0.	0.
DR. MARYILYN SUTTON, PH.D. TRUSTEE	1.00	X						0.	0.	0.
REED V. TUCKSON, MD TRUSTEE	1.00	X						0.	0.	0.
JOANNE VON BLON TRUSTEE	1.00	X						0.	0.	0.
SAMUEL S.M. WAI TRUSTEE	1.00	X						0.	0.	0.
MARK ALFUTH SENIOR VP / CFO	15.00			X				0.	277,495.	26,289.
JOAQUIN ALVARADO SVP - DIGITAL INNOVATION	48.00			X				235,102.	0.	7,343.
THOMAS KIGIN EVP	25.00			X				0.	364,705.	34,483.
JUDY MCALPINE SVP - APM	48.00			X				267,751.	0.	22,514.
JON MCTAGGART SVP - CHIEF OPERATING OFFICER	36.00			X				0.	389,667.	39,005.
MARY NEASE SVP - HR, SHARED SERVICES	15.00			X				0.	245,116.	24,551.
TIMOTHY ROESLER SVP - GENERAL MANAGER-MPR	48.00			X				287,380.	0.	29,302.
JOHN YORE VP/PROGRAMMING-MARKETPLACE	48.00			X				242,598.	0.	23,269.
RANDI YODER SVP DEVELOPMENT	48.00			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	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
MARY PAT LADNER MG. DIR., MARKETING & RESEARCH	48.00				X			153,456.	0.	15,665.
CHRISTOPHER WORTHINGTON MANAGING DIR., MPR NEWS	48.00				X			153,257.	0.	11,180.
MARK BUNDGAARD SR. NATIONAL ACCOUNT EXECUTIVE	40.00					X		210,294.	0.	10,927.
FREDERICK CHILD HOST, PERFORMANCE TODAY	40.00					X		174,855.	0.	15,472.
SAMUEL HUDSON ENGINEER, APHC	40.00					X		184,198.	0.	14,719.
KAI RYSSDAL HOST, MARKETPLACE	40.00					X		217,549.	0.	23,241.
SCOTT TONG BUREAU CHIEF, MARKETPLACE	40.00					X		215,179.	0.	14,226.
Total to Part VII, Section A, line 1c								2,341,619.	1,276,983.	312,186.

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	18093155.				
	c Fundraising events	1c	44,115.				
	d Related organizations	1d	6,292,000.				
	e Government grants (contributions)	1e	9,053,020.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	25601336.				
	g Noncash contributions included in lines 1a-1f: $ 39,040.						
	h **Total.** Add lines 1a-1f ▶			59083626.			
			Business Code				
Program Service Revenue	2 a PROGRAM SERVICE REVENU		515100	18525373.	18525373.		
	b OTHER EARNED REVENUE		515100	219,620.	219,620.		
	c ADVERTISING		541800	194,600.		194,600.	
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f ▶			18939593.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			544,985.			544,985.
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶			1,351,961.			1351961.
		(i) Real	(ii) Personal				
	6 a Gross Rents		438,108.				
	b Less: rental expenses		262,969.				
	c Rental income or (loss)		175,139.				
	d Net rental income or (loss) ▶			175,139.		94,079.	81,060.
		(i) Securities	(ii) Other				
	7 a Gross amount from sales of assets other than inventory	25,546.					
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)	25,546.					
	d Net gain or (loss) ▶			25,546.			25,546.
	8 a Gross income from fundraising events (not including $ 44,115. of contributions reported on line 1c). See Part IV, line 18	a	288,027.				
	b Less: direct expenses	b	255,036.				
	c Net income or (loss) from fundraising events ▶			32,991.			32,991.
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities ▶						
	10 a Gross sales of inventory, less returns and allowances	a	57,472.				
	b Less: cost of goods sold	b	40,679.				
	c Net income or (loss) from sales of inventory ▶			16,793.		16,793.	
	Miscellaneous Revenue		Business Code				
	11 a						
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a-11d ▶						
	12 **Total revenue.** See instructions. ▶			80170634.	18744993.	305,472.	2036543.

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) but are not required to complete columns (B), (C), and (D).

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 governments and organizations in the U.S. See Part IV, line 21	1,726,076.	1,726,076.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,448,817.	1,448,817.		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	31,707,995.	24,886,693.	2,838,564.	3,982,738.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,502,796.	1,195,793.	129,060.	177,943.
9 Other employee benefits	2,751,407.	2,309,896.	126,638.	314,873.
10 Payroll taxes	2,679,100.	2,156,886.	209,617.	312,597.
11 Fees for services (non-employees):				
a Management				
b Legal	248,004.	11,668.	236,336.	
c Accounting	1,621,386.		1,621,386.	
d Lobbying	58,313.		58,313.	
e Professional fundraising services. See Part IV, line 17	348,962.			348,962.
f Investment management fees				
g Other				
12 Advertising and promotion	3,988,826.	2,562,752.		1,426,074.
13 Office expenses	1,669,140.	1,114,948.	65,035.	489,157.
14 Information technology				
15 Royalties				
16 Occupancy	4,663,523.	4,055,721.	602,389.	5,413.
17 Travel	783,566.	574,257.	132,049.	77,260.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	170,064.	126,984.	22,640.	20,440.
20 Interest	650,387.	650,387.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	4,370,443.	3,859,929.	120,755.	389,759.
23 Insurance	273,252.		273,252.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a PROGRAMMING	12,961,693.	12,961,693.		
b ADMINISTRATIVE	7,248,875.	695,477.	5,843,674.	709,724.
c PRINTING AND PUBLICATIO	1,087,341.	48,638.	1,304.	1,037,399.
d UBI TAX	65,614.		65,614.	
e				
f All other expenses				
25 **Total functional expenses.** Add lines 1 through 24f	82,025,580.	60,386,615.	12,346,626.	9,292,339.
26 **Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		1,391,178.	1	1,533,120.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		8,990,127.	3	8,623,264.
	4	Accounts receivable, net		14,075,612.	4	18,285,274.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)			6	
	7	Notes and loans receivable, net		28,556,714.	7	27,751,096.
	8	Inventories for sale or use		377,226.	8	392,061.
	9	Prepaid expenses and deferred charges		1,407,996.	9	1,384,364.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 76,600,881.			
	b	Less: accumulated depreciation	10b 32,081,901.	46,309,181.	10c	44,518,980.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11		41,227,092.	12	41,243,622.
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets		19,050,077.	14	18,741,485.
	15	Other assets. See Part IV, line 11		421,255.	15	388,247.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		161,806,458.	16	162,861,513.
Liabilities	17	Accounts payable and accrued expenses		5,574,034.	17	6,350,368.
	18	Grants payable			18	
	19	Deferred revenue		22,157,995.	19	21,169,029.
	20	Tax-exempt bond liabilities		28,615,000.	20	27,511,239.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		2,749,791.	23	2,290,173.
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities. Complete Part X of Schedule D		1,069,440.	25	1,269,646.
	26	**Total liabilities.** Add lines 17 through 25		60,166,260.	26	58,590,455.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		66,158,436.	27	65,595,709.
	28	Temporarily restricted net assets		23,439,270.	28	26,313,090.
	29	Permanently restricted net assets		12,042,492.	29	12,362,259.
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		101,640,198.	33	104,271,058.
	34	Total liabilities and net assets/fund balances		161,806,458.	34	162,861,513.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI [X]

1	Total revenue (must equal Part VIII, column (A), line 12)	1	80,170,634.
2	Total expenses (must equal Part IX, column (A), line 25)	2	82,025,580.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,854,946.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	101,640,198.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	4,485,806.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	104,271,058.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII [ ]

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	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 in Schedule O.	2c	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: [ ] Separate basis [X] Consolidated basis [ ] Both consolidated and separate basis			
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?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

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. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization MINNESOTA PUBLIC RADIO
AMERICAN PUBLIC MEDIA

Employer identification number 41-0953924

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 11, 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.)
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 [X] 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 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.)
10 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
11 [ ] 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 that describes the type of supporting organization and complete lines 11e through 11h.

a [ ] Type I b [ ] Type II c [ ] Type III - Functionally integrated d [ ] Type III - Other

e [ ] By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ..... [ ]

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)		
(ii) A family member of a person described in (i) above?	11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document? Yes	No	(v) Did you notify the organization in col. (i) of your support? Yes	No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	No	(vii) Amount of support
Total									

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

Schedule A (Form 990 or 990-EZ) 2010

032021 12-21-10

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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	59497637.	62751792.	44820766.	55340860.	60612309.	283023364
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	59497637.	62751792.	44820766.	55340860.	60612309.	283023364
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)						30883718.
6 **Public support.** Subtract line 5 from line 4.						252139646

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	59497637.	62751792.	44820766.	55340860.	60612309.	283023364
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2499826.	3375529.	1646956.	2312445.	1896946.	11731702.
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 IV.)						
11 **Total support.** Add lines 7 through 10						294755066

12 Gross receipts from related activities, etc. (see instructions) ..... 12 16,817,374.

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** ..... ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) ..... 14 85.54 %

15 Public support percentage from 2009 Schedule A, Part II, line 14 ..... 15 87.49 %

16a **33 1/3% support test - 2010.** 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 ..... ▶ [X]

b **33 1/3% support test - 2009.** 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 ..... ▶ ☐

17a **10% -facts-and-circumstances test - 2010.** 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ..... ▶ ☐

b **10% -facts-and-circumstances test - 2009.** 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ..... ▶ ☐

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 ..... ▶ ☐

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

(Complete only if you checked the box on line 9 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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 IV.)						
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 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2009** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2010.** 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 - 2009.** 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 ▶ ☐

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990, 990-EZ, or 990-PF.**

OMB No. 1545-0047

2010

Name of the organization	**Employer identification number**
MINNESOTA PUBLIC RADIO| AMERICAN PUBLIC MEDIA	41-0953924

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

[X] For a section 501(c)(3) organization 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), and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year. ..... ▶ $ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization
MINNESOTA PUBLIC RADIO|
AMERICAN PUBLIC MEDIA

Employer identification number
41-0953924

Part I **Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		$ 4,247,717.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
2		$ 1,898,002.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
3		$ 6,292,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Name of organization
MINNESOTA PUBLIC RADIO
AMERICAN PUBLIC MEDIA

Employer identification number
41-0953924

Part II **Noncash Property** (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

Name of organization

MINNESOTA PUBLIC RADIO |
AMERICAN PUBLIC MEDIA

Employer identification number

41-0953924

Part III **Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than $1,000 for the year.** 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 information once. See instructions.) ▶ $

(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

(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

(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

(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

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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.**
▶ **See separate instructions.**

OMB No. 1545-0047

2010

Open to Public Inspection

If the organization answered "Yes," to 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," to 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," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then
- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization	Employer identification number
MINNESOTA PUBLIC RADIO AMERICAN PUBLIC MEDIA	41-0953924

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 expenditures ▶ $
3 Volunteer hours

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.
LHA

Schedule C (Form 990 or 990-EZ) 2010

032041 02-02-11

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 ▶ [X] if the filing organization belongs to an affiliated group.
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 (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)	58,314.	172,741.
c Total lobbying expenditures (add lines 1a and 1b)	58,314.	172,741.
d Other exempt purpose expenditures	61,645,974.	76,465,204.
e Total exempt purpose expenditures (add lines 1c and 1d)	61,704,288.	76,637,945.
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.	1,000,000.
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000.	250,000.
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.	0.
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.	0.

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.

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 instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	111,472.	60,850.	91,441.	172,741.	436,504.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
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) Yes	(a) No	(b) Amount
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?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If "Yes," describe in Part IV			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
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 carryover lobbying and political 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) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if 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

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

PART II-B, AFFILIATED GROUP RETURN STATEMENT:

MINNESOTA PUBLIC RADIO INCURRED LOBBYING EXPENSES OF $58,314 FOR THE FISCAL YEAR 2011 (TAX YEAR 2010) TO ADDRESS REGIONAL AND NATIONAL ISSUES AFFECTING THE ORGANIZATION AND AFFECTING PUBLIC BROADCASTING. FOR EXAMPLE, THE ORGANIZATION PROMOTED LEGISLATION AFFECTING FUNDING FOR PUBLIC BROADCASTING, BOTH AT THE STATE LEVEL AND AT THE NATIONAL

Part IV Supplemental Information *(continued)*

LEVEL.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047
2010
Open to Public Inspection

Name of the organization: MINNESOTA PUBLIC RADIO | AMERICAN PUBLIC MEDIA

Employer identification number: 41-0953924

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate 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? ☐ Yes ☐ 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? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to 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 (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

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 8/17/06, 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? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, 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)? ☐ Yes ☐ No

9 In Part XIV, 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" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (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) Revenues included in 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 SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a 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 programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

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" to 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 XIV 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? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	17,114,311.	15,872,115.			
b Contributions	1,513,313.	395,315.			
c Net investment earnings, gains, and losses	3,876,882.	1,898,944.			
d Grants or scholarships	959,066.				
e Other expenditures for facilities and programs		993,977.			
f Administrative expenses	61,262.	58,086.			
g End of year balance	21,484,178.	17,114,311.			

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ▶ 55.00 %
b Permanent endowment ▶ 45.00 %
c Term endowment ▶ _____ %

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	3a(i)	X	
(ii) related organizations	3a(ii)		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		8,750,223.		8,750,223.
b Buildings		39,059,474.	9,748,636.	29,310,838.
c Leasehold improvements		2,035,511.	1,988,919.	46,592.
d Equipment		25,497,813.	20,344,346.	5,153,467.
e Other		1,257,860.		1,257,860.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				44,518,980.

Part VII Investments - Other Securities. 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) RESTRICTED INVESTMENTS	239,486.	END-OF-YEAR MARKET VALUE
(B) RESTRICTED INVESTMENTS		
(C) HELD BY ENDOWMENT FUND	24,204,817.	END-OF-YEAR MARKET VALUE
(D) RESTRICTED INVESTMENTS IN		
(E) INVESTMENT POOL	16,799,319.	END-OF-YEAR MARKET VALUE
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	41,243,622.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15.)* ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) OTHER LONG TERM OBLIGATIONS	359,456.
(3) INTEREST RATE SWAP	910,190.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶	1,269,646.

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
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			
b	Other (Describe in Part XIV.)	4b			
c	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
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			
b	Other (Describe in Part XIV.)	4b			
c	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4: MPR'S ENDOWMENT FUNDS PROVIDE A LONG TERM FUNDING SOURCE THAT SUPPORTS MPR'S PROGRAMS INCLUDING: NEWS AND INFORMATION, ALTERNATIVE MUSIC, AND CLASSICAL MUSIC SERVICES.

PART X, LINE 2: THE ORGANIZATION HAS ADOPTED CERTAIN PROVISIONS OF ACCOUNTING STANDARDS CODIFICATION (ASC) 740, INCOME TAXES. THE ORGANIZATION HAS REVIEWED ITS TAX POSITIONS FOR ALL OPEN TAX YEARS AND HAS CONCLUDED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT REQUIRE

Part XIV Supplemental Information *(continued)*

RECOGNITION.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open To Public Inspection

Name of the organization: MINNESOTA PUBLIC RADIO | AMERICAN PUBLIC MEDIA

Employer identification number: 41-0953924

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to 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 [X] Mail solicitations
b [X] Internet and email solicitations
c [X] Phone solicitations
d [X] In-person solicitations
e [X] Solicitation of non-government grants
f [X] Solicitation of government grants
g [X] 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? [X] Yes [ ] No

b If "Yes," list the ten 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? Yes	No	(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
ARIA COMMUNICATIONS CORP - 717 W ST. GERMAIN STREET, ST.	SOLICIT CONTRIBUTIONS		X	883,280.	336,785.	546,495.
Total ▶				883,280.	336,785.	546,495.

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.

CA,MN,MI,WI

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

SEE PART IV FOR CONTINUATIONS

Part II **Fundraising Events.** Complete if the organization answered "Yes" to 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 FOOD AND WINE SHOW (event type)	(b) Event #2 (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	332,142.			332,142.
	2 Less: Charitable contributions	44,115.			44,115.
	3 Gross income (line 1 minus line 2)	288,027.			288,027.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	65,267.			65,267.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	189,769.			189,769.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				(255,036.)
	11 Net income summary. Combine line 3, column (d), and line 10 ▶				32,991.

Part III **Gaming.** Complete if the organization answered "Yes" to 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				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				( )
	8 Net gaming income summary. Combine line 1, column d, and line 7 ▶				

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate 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 operate 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 operated 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.** Complete this part to 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 complete this part to provide any additional information (see instructions).

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

(I) NAME OF FUNDRAISER: ARIA COMMUNICATIONS CORP

(I) ADDRESS OF FUNDRAISER: 717 W ST. GERMAIN STREET, ST. CLOUD, MN 56301

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization MINNESOTA PUBLIC RADIO
AMERICAN PUBLIC MEDIA

Employer identification number 41-0953924

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed ▶ [ ]

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN PUBLIC MEDIA GROUP 480 CEDAR STREET ST. PAUL, MN 55101	36-3503764	501(C)(3)	1,696,076.	0.			SEE PART IV
AMERICAN PUBLIC MEDIA GROUP 480 CEDAR STREET ST. PAUL, MN 55101	36-3503764	501(C)(3)	30,000.	0.			SEE PART IV

2 Enter total number of section 501(c)(3) and government organizations ▶ 1.

3 Enter total number of other organizations ▶

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

Schedule I (Form 990) (2010)

032101 01-13-11

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: AMERICAN PUBLIC MEDIA GROUP (APMG), MPR'S PARENT SUPPORT ORGANIZATION MANAGES AN ENDOWMENT AND CERTAIN OTHER FUNDS FOR THE BENEFIT OF MPR. FROM TIME TO TIME, MPR MAKES CONTRIBUTIONS, IN THE FORM OF GRANTS, TO THESE FUNDS MANAGED BY APMG. SUCH CONTRIBUTIONS ARE APPROVED BY THE MPR BOARD OF TRUSTEES.

PART II, LINE 1, COLUMN H

PURPOSE OF GRANT OR ASSISTANCE

IN FY09 MPR ENTERED INTO CONTRACTS WITH SPRINT NEXTEL TO LEASE EXCESS

Part IV Supplemental Information

CAPACITY OF ITS EBS (EDUCATIONAL BROADCAST SERVICE) FREQUENCIES. THE TOTAL CASH REVENUE FROM THESE CONTRACTS WAS PAID IN ADVANCE, AND IS BEING RECOGNIZED OVER THE 30 YEAR LEASE TERMS ON A STRAIGHT LINE BASIS. MPR LOANED THE CASH REVENUE TO APMG FOR USE IN ITS EARNED ENDOWMENT, BENEFITTING MPR. THE LOAN IS BEING AMORTIZED OVER 30 YEARS. EACH YEAR, SO LONG AS MPR REMAINS THE BENEFICIARY OF THE EARNED ENDOWMENT, MPR WILL CONSIDER FORGIVENESS OF THE CURRENT YEAR PRINCIPAL AND INTEREST AND RECORD AS A GRANT TO APMG -- $1,696,076 IN FY11.

PART II, LINE 1, COLUMN H

PURPOSE OF GRANT OR ASSISTANCE

APMG INITIALLY PROVIDED GRANTS TO MPR TO BUILD-OUT OFFICE AND STUDIO SPACE. DURING THE FISCAL YEAR 2011, MPR PROVIDED A GRANT TO APMG OF $30,000 FROM THE PROCEEDS OF A SUBLEASE OF THIS SPACE.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 23.**

▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization: MINNESOTA PUBLIC RADIO | AMERICAN PUBLIC MEDIA

Employer identification number 41-0953924

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	[X] First-class or charter travel			
	[ ] Travel for companions			
	[ ] Tax indemnification and gross-up payments			
	[ ] Discretionary spending account			
	[ ] Housing allowance or residence for personal use			
	[ ] Payments for business use of personal residence			
	[X] Health or social club dues or initiation fees			
	[ ] Personal services (e.g., 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	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	X	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.			
	[X] Compensation committee			
	[X] Independent compensation consultant			
	[X] Form 990 of other organizations			
	[X] Written employment contract			
	[X] Compensation survey or study			
	[X] Approval by the board or compensation committee			
4	During the year, did any person listed in 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 from the organization or a related organization?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	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) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a	X	
b	Any related organization?	5b	X	
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in 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?	6a	X	
b	Any related organization?	6b	X	
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in 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	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2010

032111
12-21-10

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 in 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 are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(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 reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 WILLIAM KLING	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	427,911.	159,864.	57,097.	31,200.	7,713.	683,785.	0.
2 MARK ALFUTH	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	222,126.	50,683.	4,686.	18,736.	7,553.	303,784.	0.
3 JOAQUIN ALVARADO	(i)	200,053.	33,892.	1,157.	0.	7,343.	242,445.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 THOMAS KIGIN	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	263,685.	75,013.	26,007.	27,209.	7,274.	399,188.	0.
5 JUDY MCALPINE	(i)	219,338.	45,087.	3,326.	15,390.	7,124.	290,265.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 JON MCTAGGART	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	279,064.	93,506.	17,097.	31,200.	7,805.	428,672.	0.
7 MARY NEASE	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	199,689.	43,672.	1,755.	15,408.	9,143.	269,667.	0.
8 TIMOTHY ROESLER	(i)	214,452.	66,435.	6,493.	20,092.	9,210.	316,682.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9 JOHN YORE	(i)	206,569.	34,136.	1,893.	14,520.	8,749.	265,867.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
10 MARY PAT LADNER	(i)	137,577.	13,900.	1,979.	9,323.	6,342.	169,121.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
11 CHRISTOPHER WORTHINGTON	(i)	151,157.	0.	2,100.	9,117.	2,063.	164,437.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
12 MARK BUNDGAARD	(i)	36,097.	1,000.	173,197.	4,533.	6,394.	221,221.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
13 FREDERICK CHILD	(i)	144,158.	30,000.	697.	8,747.	6,725.	190,327.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
14 SAMUEL HUDSON	(i)	182,600.	0.	1,598.	9,089.	5,630.	198,917.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
15 KAI RYSSDAL	(i)	215,932.	0.	1,617.	13,805.	9,436.	240,790.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
16 SCOTT TONG	(i)	93,195.	0.	121,984.	6,267.	7,959.	229,405.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

Part III Supplemental Information

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

PART I, LINE 1A: FIRST-CLASS OR CHARTER TRAVEL: THE ORGANIZATION'S TRAVEL POLICY STATES THAT ITS TRAVELERS MUST PURCHASE COACH TICKETS AND MAKE EFFORTS TO GET THE LOWEST FARE. ANY EXCEPTION TO THE POLICY (E.G. FIRST-CLASS WAS THE ONLY FLIGHT AVAILABLE) MUST BE APPROVED BY THE ORGANIZATION'S EXECUTIVE MANAGEMENT AND/OR THE BOARD OF TRUSTEES. DURING THE REPORTING PERIOD, THE ORGANIZATION APPROVED FIRST-CLASS BUSINESS AIR TRAVEL FOR THREE LISTED PEOPLE, FOR A TOTAL OF FIVE FIRST CLASS TRIPS. FIRST-CLASS TRAVEL ACCOUNTED FOR LESS THAN 1% OF THE ORGANIZATION'S TOTAL TRAVEL RELATED EXPENSES.

HEALTH OR SOCIAL CLUB DUES: THE ORGANIZATION REQUESTS THAT CERTAIN OF ITS OFFICERS BECOME MEMBERS OF SOCIAL CLUBS THAT PROVIDE THE ORGANIZATION REPRESENTATION IN THE COMMUNITY AND THAT CAN BE USED BY THE ORGANIZATION FOR BOARD COMMITTEE MEETINGS AND THAT PROVIDES THE PARTICIPATING EMPLOYEE WITH DEVELOPMENT AND FITNESS OPPORTUNITIES. ANNUALLY, THE ORGANIZATION ASKS THAT THE EMPLOYEES WHO ARE MEMBERS OF SUCH CLUBS REPORT THE PERSONAL USE OF THE CLUB. THE ORGANIZATION THEN INCLUDES THAT PERSONAL USE PORTION OF THE CLUB DUES AS TAXABLE INCOME TO THE EMPLOYEE. ALL PAYMENTS MADE BY THE ORGANIZATION FOR THE EMPLOYEE'S USE OF THE CLUBS' FITNESS FACILITIES ARE

Part III Supplemental Information

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

REPORTED AS INCOME TO THE EMPLOYEE.

PART I, LINE 4B: PLAN 457F PROVIDES FOR A DEFERRED COMPENSATION AGREEMENT THAT HAS A DEFINED PERIOD OF TIME AND HAS A SUBSTANTIAL RISK OF FORFEITURE IF THE EMPLOYEE DOES NOT MEET THE TERMS OF HIS EMPLOYMENT AGREEMENT. THE EMPLOYER ESTABLISHES A DEFERRED COMPENSATION ACCOUNT IN THE NAME OF THE EMPLOYEE, IN WHICH THE EMPLOYER DEPOSITS A SPECIFIC DOLLAR AMOUNT ANNUALLY, UNTIL THE END OF THE SPECIFIED TERM AT WHICH THE ACCOUNT IS PAID OUT IN FULL TO THE EMPLOYEE. IF THE EMPLOYEE VOLUNTARILY TERMINATES EMPLOYMENT OR IS DISCHARGED FOR CAUSE THE ENTIRE AMOUNT IN THE DEFERRED COMPENSATION ACCOUNT IS FORFEITED BACK TO THE EMPLOYER.

PARTICIPANT(S): KAI RYSSDAL - PAID $0

PART I, LINE 5: EVERY MEMBER OF THE SENIOR MANAGEMENT TEAM IN THE APM GROUP PARTICIPATES IN AN ANNUAL AT-RISK COMPENSATION PLAN (THE PLAN), WHICH PROVIDES THAT A CERTAIN PERCENTAGE OF THEIR BASE SALARY IS AVAILABLE IN THE FORM OF AT-RISK COMPENSATION AT YEAR END BASED ON AN EVALUATION OF PERFORMANCE AGAINST GOALS. A PORTION OF THE EVALUATION AGAINST GOALS IS

Part III Supplemental Information

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

DETERMINED BY THE SCORE ON OVERALL COMPANY OBJECTIVES INCLUDING REVENUE AND NET (FINANCIAL MEASURE), AND ANNUAL OBJECTIVES (ANNUAL OBJECTIVE MEASURES); AND THE REMAINDER ON PERSONAL ACHIEVEMENT AGAINST GOALS (INDIVIDUAL MEASURE). ACHIEVEMENT AGAINST COMPANY OBJECTIVES IS DETERMINED BY THE PERSONNEL & COMPENSATION COMMITTEE (PCC); FOR THE CEO, PERSONAL ACHIEVEMENT AGAINST GOALS IS ALSO DETERMINED BY THE PCC.

PART I, LINE 6: INCLUDED IN THE ABOVE RESPONSE FOR PART I, LINE 5.

SCHEDULE K (Form 990)
Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part V.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047
2010
Open to Public Inspection

Name of the organization: MINNESOTA PUBLIC RADIO
AMERICAN PUBLIC MEDIA

Employer identification number: 41-0953924

Part I Bond Issues SEE PART V FOR COLUMNS (A) AND (F) CONTINUATIONS

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased Yes	(g) Defeased No	(h) On behalf of issuer Yes	(h) On behalf of issuer No	(i) Pooled financing Yes	(i) Pooled financing No
A	PORT AUTHORITY OF THE CITY OF ST. PAUL, MINNES	41-6005524	793067AM1	10/18/05	11500000.	SEE PART V, SUPPLEMENTAL INFO		X		X		X
B	HOUSING AND REDEVELOPMENT AUTHORITY	41-6005521	792893FV6	12/01/10	9,413,881.	SEE PART V, SUPPLEMENTAL INFO		X		X		X
C												
D												

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	1,400,000.			
2	Amount of bonds legally defeased				
3	Total proceeds of issue	11,521,848.	9,413,881.		
4	Gross proceeds in reserve funds				
5	Capitalized interest from proceeds	282,185.			
6	Proceeds in refunding escrows		9,245,000.		
7	Issuance costs from proceeds	229,792.	164,234.		
8	Credit enhancement from proceeds	12,127.			
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds	10,997,744.			
11	Other spent proceeds		4,647.		
12	Other unspent proceeds				
13	Year of substantial completion	2006	2011		

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
14	Were the bonds issued as part of a current refunding issue?		X	X					
15	Were the bonds issued as part of an advance refunding issue?		X		X				
16	Has the final allocation of proceeds been made?	X		X					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

Part III Private Business Use

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X				
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X				

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X				
b Are there any research agreements that may result in private business use of bond-financed property?		X		X				
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	X		X					
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	%		%		%		%	
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	%		%		%		%	
6 Total of lines 4 and 5	%		%		%		%	
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X					

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X				
2 Is the bond issue a variable rate issue?	X			X				
3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X				
b Name of provider								
c Term of hedge								
d Was the hedge superintergrated?								
e Was the hedge terminated?								
4a Were gross proceeds invested in a GIC?		X		X				
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5 Were any gross proceeds invested beyond an available temporary period?		X		X				
6 Did the bond issue qualify for an exception to rebate?	X		X					

Part V Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

SCHEDULE K, PART I, BOND ISSUES:
(A) ISSUER NAME: PORT AUTHORITY OF THE CITY OF ST. PAUL, MINNESOTA
(F) DESCRIPTION OF PURPOSE: SEE PART V, SUPPLEMENTAL INFOMRATION

(A) ISSUER NAME:

Part V Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

HOUSING AND REDEVELOPMENT AUTHORITY OF THE CITY OF ST. PAUL

(F) DESCRIPTION OF PURPOSE: SEE PART V, SUPPLEMENTAL INFOMRATION

FORM 990, SCHEDULE K, PART I, LINE A, COLUMN F:

PURPOSE OF BOND:

TO FINANCE THE ACQUISITION AND IMPROVEMENT OF RADIO BROADCASTING LICENSES AND RADIO TRANSMISSION EQUIPMENT. THESE NONCOMMERCIAL EDUCATIONAL RADIO BROADCAST LICENSES INCLUDED KCMP(FM) - NORTHFIELD, MN AND KMSE(FM) - ROCHESTER, MN

FORM 990, SCHEDULE K, PART I, LINE B, COLUMN F:

PURPOSE OF BOND:

TO REFUND THE OUTSTANDING PRINCIPAL AMOUNT OF MPR SERIES 2005 BONDS THAT PROVIDED PARTIAL FINANCING FOR THE ACQUISITION, REMODELLING AND EQUIPPING OF MPR'S BROADCAST CENTER LOCATED AT 480 CEDAR STREET, SAINT PAUL, MN.

FORM 990, SCHEDULE K, PART II, LINE 3, COLUMN A:

DIFFERENCE BETWEEN ISSUE PRICE AND TOTAL PROCEEDS:

THE DIFFERENCE BETWEEN THE ISSUE PRICE SHOWN IN PART I, LINE A, COLUMN E AND THE TOTAL PROCEEDS ISSUED SHOWN IN PART II, LINE 3, COLUMN A IS DUE TO INTEREST EARNED ON THE INVESTMENT OF BOND PROCEEDS.

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047
2010
Open To Public Inspection

Name of the organization: MINNESOTA PUBLIC RADIO | AMERICAN PUBLIC MEDIA

Employer identification number: 41-0953924

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1 (a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization? To	From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	No	(f) Approved by board or committee? Yes	No	(g) Written agreement? Yes	No
Total ▶ $										

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

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

Schedule L (Form 990 or 990-EZ) 2010

032131 12-21-10

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
SKYWORD, INC.	WILLIAM KLING, MPR	402,700.	SKYWORD (FK		X
PIPER JAFFRAY & CO	ADDISON PIPER, MPR	69,657.	MPR ISSUED		X
PIPER JAFFRAY & CO	ADDISON PIPER, MPR	33,250.	MPR ISSUED		X

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: SKYWORD, INC.

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

WILLIAM KLING, MPR TRUSTEE & SKYWORD TRUSTEE

(D) DESCRIPTION OF TRANSACTION: SKYWORD (FKA GATHER) PROVIDED ON-AIR AND WEB UNDERWRITING SUPPORT TO MPR

(A) NAME OF PERSON: PIPER JAFFRAY & CO

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

ADDISON PIPER, MPR TRUSTEE AND PIPER JAFFRAY TRUSTEE

(D) DESCRIPTION OF TRANSACTION: MPR ISSUED $9,040,000 HOUSING AND REDEVELOPMENT AUTHORITY OF THE CITY OF SAINT PAUL, MINNESOTA REVENUE REFUNDING BONDS, SERIES 2010 IN DECEMBER 2010. PIPER JAFFRAY WAS THE UNDERWRITER.

(A) NAME OF PERSON: PIPER JAFFRAY & CO

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

ADDISON PIPER, MPR TRUSTEE AND PIPER JAFFRAY TRUSTEE

(D) DESCRIPTION OF TRANSACTION: MPR ISSUED (I) $10,000,000 VARIABLE RATE, HOUSING AND REDEVELOPMENT AUTHORITY OF THE CITY OF SAINT PAUL

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

DEMAND REVENUE BONDS SERIES 2002 IN MAY 2002, (II) $10,000,000 VARIABLE RATE, HOUSING AND REDEVELOPMENT AUTHORITY OF THE CITY OF SAINT PAUL DEMAND REVENUE BONDS SERIES 2005 IN MAY 2005 (FULLY REDEEMED IN JANUARY 2011); AND (III) $11,500,000 PORT AUTHORITY OF THE CITY OF SAINT PAUL DEMAND REVENUE BONDS- SERIES 2005-7 IN OCTOBER 2005. PIPER JAFFRAY IS THE REMARKETING AGENT OF ALL OF THESE BONDS.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization: MINNESOTA PUBLIC RADIO | AMERICAN PUBLIC MEDIA

Employer identification number: 41-0953924

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	1	21,540.	DEALER CASH SALES PR
7	Boats and planes	X	1	17,500.	SELLING PRICE
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
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 ▶ ( )				
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

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		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 non-standard contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	X	
b	If "Yes," describe in Part II.			
33	If the organization did not 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) (2010)

032141
12-23-10

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

SCHEDULE M, LINE 32B: MPR PARTNERS WITH A THIRD PARTY CORPORATION WHO PROVIDES THE NECESSARY SERVICES AND SUPPORT REQUIRED TO OPERATE A VEHICLE DONATION PROGRAM. MPR CONTRACTS WITH INDEPENDENT BROKERS TO PROCESS THE RECEIPT AND SUBSEQUENT SALE OF DONATED PUBLICLY LISTED SECURITIES.

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.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization: MINNESOTA PUBLIC RADIO | AMERICAN PUBLIC MEDIA

Employer identification number: 41-0953924

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

HORIZONS AND PERSPECTIVES; IN LEARNING, BEING INFORMED, INSPIRED, AND ENTERTAINED; IN ENJOYING ARTS AND CULTURAL EXPERIENCES; IN UNDERSTANDING, BEING CHALLENGED AND FINDING PLEASURE AND EXCITEMENT IN ONGOING PERSONAL GROWTH; AND IN MAKING A COMMITMENT TO THE IMPROVEMENT OF THEIR COMMUNITIES. OUR VISION IS TO BE THE MOST RELEVANT, INNOVATIVE, AND INSIGHTFUL PUBLIC MEDIA COMPANY IN AMERICA. OUR STRATEGY IS TO CREATE INDISPENSABLE CONTENT THAT ENGAGES WITH DIVERSE AUDIENCES TO CONNECT PEOPLE WITH EACH OTHER, THEIR COMMUNITIES, THEIR COUNTRY, AND THEIR WORLD.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

STATIONS OF MPR. THROUGH ITS AMERICAN PUBLIC MEDIA (APM) ACTIVITY, MPR DISTRIBUTED APPROXIMATELY 10,661 HOURS OF PROGRAMMING THAT IT PRODUCED OR ACQUIRED, TO 803 PUBLIC RADIO STATIONS THROUGHOUT THE UNITED STATES DURING THE YEAR. WE ESTIMATE THAT DURING THE FISCAL YEAR, A WEEKLY TOTAL OF 16.2 MILLION PEOPLE LISTENED TO NONCOMMERCIAL EDUCATIONAL RADIO PROGRAMMING PRODUCED AND DISTRIBUTED BY APM.

MPR ALSO FURTHERS ITS MISSION THROUGH INTERNET AND OTHER MEANS. MPR MAINTAINS COMPREHENSIVE WEBSITES AT MINNESOTAPUBLICRADIO.ORG, AMERICANPUBLICMEDIA.ORG, AND OTHER DOMAINS. THESE PROVIDE PUBLIC SERVICE INFORMATION, NEWS, CULTURAL CONTENT, AND OPPORTUNITIES FOR AUDIENCE INTERACTION. IN THIS FISCAL YEAR, MORE THAN 9.6 MILLION PAGES WERE VIEWED PER MONTH BY AN ESTIMATED 2.2 MILLION UNIQUE VIEWERS. IN ITS ROLE AS A COMMUNITY CONVENER, MPR ORGANIZED OR TOOK PART IN

Name of the organization MINNESOTA PUBLIC RADIO | AMERICAN PUBLIC MEDIA

Employer identification number 41-0953924

APPROXIMATELY 463 EVENTS DURING THE FISCAL YEAR. THESE EVENTS ATTRACTED MORE THAN A QUARTER-MILLION AUDIENCE MEMBERS. OUR LIVE PRESENTATIONS REFLECT THE AUDIENCE AND MISSION OF MINNESOTA PUBLIC RADIO. OUR STAGED PRODUCTIONS HAVE CREATED THOUSANDS OF MEMORABLE MOMENTS, ATTRACTING AND ENGAGING AUDIENCES FROM ACROSS THE STATE AND THROUGHOUT THE REGION. WE PROUDLY SERVE STAGE, RADIO, AND DIGITAL AUDIENCES. WE RECEIVE EXTERNAL MEDIA COVERAGE IN NEWSPAPERS, NEWSLETTERS, SOCIAL MEDIA SITES, AND OTHER BROADCAST SERVICES, WHICH HELP MAXIMIZE MPR'S REACH TO NEW AUDIENCES AND DEEPEN ITS IMPACT WITH EACH EVENT. THESE ACTIVITIES WERE PURSUED CONSISTENT WITH THE PUBLIC POLICY OBJECTIVES SET FORTH IN PART IV OF THE COMMUNICATION ACT OF 1934 (AS AMENDED).

FORM 990, PART VI, SECTION A, LINE 2: TRUSTEE PAUL REYELTS AND LIFE TRUSTEE WILLIAM PEARCE - FAMILY RELATIONSHIP

FORM 990, PART VI, SECTION A, LINE 3: THE ORGANIZATION RELIES ON AMERICAN PUBLIC MEDIA GROUP TO PROVIDE CERTAIN MANAGEMENT, FINANCIAL, AND HR SERVICES. AMERICAN PUBLIC MEDIA GROUP IS A NOT-FOR-PROFIT PARENT SUPPORT ORGANIZATION WHOSE PRIMARY PURPOSE IS TO PROVIDE FINANCIAL AND MANAGEMENT SUPPORT SERVICES TO ITS AFFILIATES.

FORM 990, PART VI, SECTION A, LINE 4: THE BYLAWS WERE AMENDED OCTOBER 28, 2010 AND JUNE 23, 2011. THE MISSION STATEMENT WAS UPDATED IN FEBRUARY OF 2011.

FORM 990, PART VI, SECTION A, LINE 7A: MINNESOTA PUBLIC RADIO (MPR) IS CONTROLLED BY ITS NOT-FOR-PROFIT PARENT SUPPORT ORGANIZATION AMERICAN PUBLIC MEDIA GROUP (APMG). APMG HAS THE ABILITY TO APPROVE THE ELECTION OF

Name of the organization MINNESOTA PUBLIC RADIO AMERICAN PUBLIC MEDIA

Employer identification number 41-0953924

TRUSTEES BY THE MPR BOARD.

FORM 990, PART VI, SECTION A, LINE 7B: MINNESOTA PUBLIC RADIO (MPR) IS CONTROLLED BY ITS NOT-FOR-PROFIT PARENT SUPPORT ORGANIZATION AMERICAN PUBLIC MEDIA GROUP (APMG). APMG HAS THE ABILITY TO APPROVE THE ELECTION OF TRUSTEES BY THE MPR BOARD.

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS PREPARED UNDER THE DIRECTION OF THE ORGANIZATION'S BOARD OF TRUSTEES' AUDIT COMMITTEE AND IS MADE AVAILABLE TO EACH MEMBER OF THE BOARD PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION SURVEYS ITS OFFICERS, TRUSTEES, AND KEY EMPLOYEES ANNUALLY FOR POTENTIAL CONFLICTS OF INTEREST. THE SURVEYS ARE ANALYZED AND INFORM TRANSACTIONS AND VOTING IN ORDER TO AVOID ACTUAL CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15: THE PERSONNEL AND COMPENSATION COMMITTEE OF THE BOARD (PCC) REVIEWS THE COMPENSATION AND BENEFITS PLANS OF THE ORGANIZATIONS OF THE APM GROUP, INCLUDING MPR, ON AN ANNUAL BASIS, INCLUDING THE COMPANY'S COMPENSATION PHILOSOPHY, HEALTH CARE PLAN, AND SUMMARY OF OTHER BENEFITS, INCLUDING EXECUTIVE BENEFITS, AND SAVINGS AND RETIREMENT PLANS. THE PCC SETS THE COMPENSATION FOR THE CEO, APPROVES THE CEO'S RECOMMENDATIONS FOR COMPENSATION FOR THE CAO AND COO, AND REVIEWS COMPENSATION FOR OTHER OFFICERS. TOWERS PERRIN IS THE COMMITTEE'S COMPENSATION CONSULTANT OF RECORD, AND THE ORGANIZATION SUBSCRIBES TO SEVERAL ADDITIONAL MARKET DATA SOURCES TO ENSURE MARKET COMPETITIVE PAY PRACTICES. THE PCC ESTABLISHES AN ANNUAL AT-RISK COMPENSATION PLAN TO ENABLE THE PARTICIPATING ORGANIZATIONS OF THE APM GROUP, INCLUDING MPR, TO

Name of the organization MINNESOTA PUBLIC RADIO | AMERICAN PUBLIC MEDIA

Employer identification number 41-0953924

ATTRACT, RETAIN AND MOTIVATE KEY MANAGEMENT TALENT BY PROVIDING TOTAL COMPENSATION THAT IS COMPETITIVE WITH THE MARKET AND HAS THE FOLLOWING OBJECTIVES:

- FOCUS MANAGEMENT EFFORTS ON KEY ANNUAL FINANCIAL AND STRATEGIC RESULTS.
- ENCOURAGE TEAMWORK AND INDIVIDUAL PERFORMANCE BY PROVIDING REWARDS FOR ACHIEVEMENT OF COMPANY GOALS, AS WELL AS INDIVIDUAL AND DEPARTMENTAL PERFORMANCE OBJECTIVES.

EACH MEMBER OF THE SENIOR MANAGEMENT TEAM PARTICIPATES IN THE PLAN, WHICH PROVIDES THAT A CERTAIN PERCENTAGE OF THEIR BASE SALARY IS AVAILABLE IN THE FORM OF AT-RISK COMPENSATION AT YEAR END BASED ON AN EVALUATION OF PERFORMANCE AGAINST GOALS. THE TOTAL COMPENSATION OPPORTUNITY IS BENCHMARKED EXTERNALLY THROUGH TOWERS PERRIN. THE GOALS AGAINST WHICH PERFORMANCE IS EVALUATED INCLUDE OVERALL COMPANY OBJECTIVES - INCLUDING REVENUE AND NET (FINANCIAL MEASURE) AND ANNUAL OBJECTIVES (ANNUAL OBJECTIVES MEASURE), AND ALSO PERSONAL OBJECTIVES (INDIVIDUAL MEASURE). ACHIEVEMENT AGAINST COMPANY OBJECTIVES, INCLUDING FINANCIAL AND ANNUAL OBJECTIVES, IS DETERMINED BY THE PCC. THE SIZE OF AT RISK COMPENSATION VARIES BY LEVEL WITHIN THE ORGANIZATION. EACH EMPLOYEE LEVEL HAS AN AT RISK AMOUNT THAT IS A PERCENTAGE OF HER/HIS BASE SALARY. THE PLAN IS DISCRETIONARY IN THAT THE PCC RESERVES THE DISCRETION TO PROVIDE AT RISK COMPENSATION UP TO 125% OF TARGET FOR EXCEPTIONAL RESULTS, TO MAKE AWARDS ON A PRO-RATA BASIS FOR RESULTS THAT EXCEED THE PLAN THRESHOLD BUT NOT THE TARGET, OR TO WAIVE THE THRESHOLD REQUIREMENT ALTOGETHER. ON AN ANNUAL BASIS, THE CEO'S COMPENSATION IS DETERMINED BY THE PCC. THE CAO AND COO ARE EVALUATED BY THE CEO, WHO DISCUSSES THEIR EVALUATIONS WITH THE PCC AND MAKES A RECOMMENDATION FOR THEIR BASE SALARY AND AT RISK COMPENSATION. THE OFFICE OF THE PRESIDENT, WHICH CONSISTS OF THE CEO, CAO, COO, CFO, CHRO,

Name of the organization MINNESOTA PUBLIC RADIO | AMERICAN PUBLIC MEDIA

Employer identification number 41-0953924

AND CDO PROVIDE THEIR RECOMMENDATIONS FOR BASE SALARY AND AT-RISK COMPENSATION FOR THE REMAINDER OF THE SENIOR MANAGEMENT TEAM.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND OTHER FINANCIAL STATEMENTS AVAILABLE FOR PUBLIC INSPECTION ON ITS WEBSITE; BY REQUEST TO HAVE THE DOCUMENTS RECEIVED VIA E-MAIL OR THE POST; OR IN PERSON AT ITS OFFICES AT 480 CEDAR STREET, ST PAUL, MN 55101. A FEE MAY APPLY FOR COPYING AND MAILING COSTS ASSOCIATED WITH A REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS:	4,485,808.
ROUNDING ADJUSTMENT	-2.
TOTAL TO FORM 990, PART XI, LINE 5	4,485,806.

FORM 990, PART VII, SECTION A, LINE 1A, COLUMN B

AVERAGE HOURS PER WEEK FOR RELATED ORGANIZATIONS

CERTAIN INDIVIDUALS LISTED IN PART VII DEDICATE A PORTION OF THEIR TIME TO ONE OR MORE OF THE FOLLOWING RELATED ENTITIES - AMERICAN PUBLIC MEDIA GROUP (APMG), SOUTHERN CALIFORNIA PUBLIC RADIO (SCPR), CLASSICAL SOUTH FLORIDA (CSF), AND THE FITZGERALD THEATER COMPANY (FTC).

WILLIAM KLING, APMG - 12, SCPR - 1, CSF - 1, FTC - 1

MARK ALFUTH, APMG - 32, SCPR - 3, CSF - 1, FTC - 1

THOMAS KIGIN, APMG - 12, SCPR - 3, CSF - 1, FTC - 1

JON MCTAGGART, APMG - 4, SCPR - 2, CSF - 1, FTC - 1

MARY NEASE, APMG - 31, SCPR - 1, FTC - 2

DAVID R. STRAND, APMG - 1, SCPR - 1

Name of the organization MINNESOTA PUBLIC RADIO | AMERICAN PUBLIC MEDIA

Employer identification number 41-0953924

RANDALL J. HOGAN, APMG - 2

IAN R. FRIENDLY, APMG - 1

PAUL REYELTS, APMG - 1

BRADBURY H. ANDERSON, APMG - 1

JANET M. DOLAN, APMG - 1

STEVE FRITZE, APMG - 1

SARA H. GAVIN, APMG - 1

WILLIAM M. MCLAUGHLIN, APMG - 1

GLEN D. NELSON, MD, APMG - 1

ADDISON (TAD) PIPER - APMG - 1

AUSTIN P. SULLIVAN JR, APMG - 1

DR. MARYILYN SUTTON, PH.D., APMG - 1, SCPR - 1

SCHEDULE R (Form 990)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047
2010
Open to Public Inspection

Name of the organization: MINNESOTA PUBLIC RADIO
AMERICAN PUBLIC MEDIA

Employer identification number: 41-0953924

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

(a) Name, address, and EIN 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" to 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
AMERICAN PUBLIC MEDIA GROUP - 36-3503764 480 CEDAR STREET ST. PAUL, MN 55101	PROVIDE SUPPORT TO EXEMPT SUBSIDIARIES	MINNESOTA	501(C)(3)	509(A)(3)-I	N/A	X	
CLASSICAL SOUTH FLORIDA - 26-1417978 330 SW SECOND STREET FORT LAUDERDALE, FL 33312	PROVIDE THE HIGHEST QUALITY CLASSICAL MUSIC PROGRAMMING & INTERACTIVE	FLORIDA	501(C)(3)	170(B)(1)(A)(VI)	AMERICAN PUBLIC MEDIA GROUP	X	
THE FITZGERALD THEATER COMPANY - 41-1429405 480 CEDAR STREET ST. PAUL, MN 55101	PROVIDE VALUABLE REHEARSAL & PERFORMANCE SPACE	MINNESOTA	501(C)(3)	509(A)(2)	MINNESOTA PUBLIC RADIO	X	
SOUTHERN CALIFORNIA PUBLIC RADIO - 95-4765734, 474 S RAYMOND AVENUE, PASADENA, CA 91105	PROVIDE HIGHEST QUALITY RADIO SERVICE FOR SOUTHERN CALIFORNIA	CALIFORNIA	501(C)(3)	170(B)(1)(A)(VI)	AMERICAN PUBLIC MEDIA GROUP	X	

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

Schedule R (Form 990) 2010

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Part II **Continuation of Identification of Related Tax-Exempt Organizations**

(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 organization? Yes	No
OAKLEAF ENDOWMENT TRUST FOR MINNESOTA PUBLIC RADIO - 41-6429971, 480 CEDAR STREET, ST. PAUL, MN 55101	MAKES GRANTS TO HELP MAINTAIN & ENHANCE THE QUALITY OF MPR	MINNESOTA	501(C)(3)	509(A)(3)-I	MINNESOTA PUBLIC RADIO	X	

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to 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? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to 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
GREENSPRING COMPANY - 41-1904483 480 CEDAR STREET ST. PAUL, MN 55101	MANAGEMENT SERVICES	MN	AMERICAN PUBLIC MEDIA GROUP	C CORP			
GREENSPRING MEDIA GROUP - 41-1584257 480 CEDAR STREET ST. PAUL, MN 55101	PUBLICATIONS	MN	GREENSPRING COMPANY	C CORP			
CEDAR STREET HOLDINGS, INC. - 20-3194673 480 CEDAR STREET ST. PAUL, MN 55101	MANAGEMENT SERVICES	MN	AMERICAN PUBLIC MEDIA GROUP	C CORP			

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

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

		Yes	No
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?			
a Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity	1a	X	
b Gift, grant, or capital contribution to other organization(s)	1b	X	
c Gift, grant, or capital contribution from other organization(s)	1c	X	
d Loans or loan guarantees to or for other organization(s)	1d	X	
e Loans or loan guarantees by other organization(s)	1e	X	
f Sale of assets to other organization(s)	1f		X
g Purchase of assets from other organization(s)	1g		X
h Exchange of assets	1h		X
i Lease of facilities, equipment, or other assets to other organization(s)	1i	X	
j Lease of facilities, equipment, or other assets from other organization(s)	1j	X	
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	X	
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	X	
m Sharing of facilities, equipment, mailing lists, or other assets	1m	X	
n Sharing of paid employees	1n	X	
o Reimbursement paid to other organization for expenses	1o	X	
p Reimbursement paid by other organization for expenses	1p	X	
q Other transfer of cash or property to other organization(s)	1q		X
r Other transfer of cash or property from other organization(s)	1r		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 other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) AMERICAN PUBLIC MEDIA GROUP	B	835,618.	ACTUAL AMOUNT
(2) AMERICAN PUBLIC MEDIA GROUP	C	13,913,122.	ACTUAL AMOUNT
(3) AMERICAN PUBLIC MEDIA GROUP	D	21,020,433.	ACTUAL AMOUNT
(4) AMERICAN PUBLIC MEDIA GROUP	E	27,460,000.	ACTUAL AMOUNT
(5) AMERICAN PUBLIC MEDIA GROUP	L	4,913,011.	ACTUAL AMOUNT
(6) THE FITZGERALD THEATER COMPANY	M	368,706.	ACTUAL AMOUNT

Part V **Continuation of Transactions With Related Organizations** (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7) GREENSPRING MEDIA GROUP	L	522,304.	ACTUAL AMOUNT
(8) SOUTHERN CALIFORNIA PUBLIC RADIO	B	98,281.	ACTUAL AMOUNT
(9) SOUTHERN CALIFORNIA PUBLIC RADIO	K	412,346.	ACTUAL AMOUNT
(10) CLASSICAL SOUTH FLORIDA	K	146,786.	ACTUAL AMOUNT
(11) OAKLEAF ENDOWMENT TRUST FOR MINNESOTA PUBLIC RADIO	C	96,100.	ACTUAL AMOUNT
(12)			
(13)			
(14)			
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to 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) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).