Form 990

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047
2021
Open to Public Inspection

Department of the Treasury Internal Revenue Service

For the 2021 calendar year, or tax year beginning 07/01/21, and ending 06/30/22D Employer identification number PUBLIC BROADCASTING OF NORTHWEST C Name of organization Check if applicable: PENNYSYLVANIA, INC. Address change 25-1154116 Doing business as Name change Room/suite Number and street (or P.O. box If mail is not delivered to street address) 814-864-3001 8425 PEACH STREET Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/ terminated 5,308,253 PA 16509 G Gross receipts\$ Amended return Name and address of principal officer: H(a) Is this a group return for subordinates? Application pending THOMAS H NEW H(b) Are all subordinates included? 8425 PEACH STREET If "No." attach a list, See instructions 16509 ERIE X 501(c)(3) 4947(a)(1) or 501(c) Tax-exempt status: WWW.WOLN.ORG H(c) Group exemption number Website: PA L Year of formation: 1965 M State of legal domicile: Form of organization: X Corporation Trust Association Part Summary 1 Briefly describe the organization's mission or most significant activities: TO STIMULATE, ENRICH, EDUCATE, AND ENTERTAIN THE PUBLIC. Activities & Governance 2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets. 10 3 Number of voting members of the governing body (Part VI, line 1a) 3 10 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 50 5 5 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 300 6 Total number of volunteers (estimate if necessary) 6 24,851 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11 **Current Year** 4,012,979 3,678,827 8 Contributions and grants (Part VIII, line 1h) Revenue 527,281 409,716 9 Program service revenue (Part VIII, line 2g) 88,229 142,959 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 395,501 229,987 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5,078,720 4,406,759 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,571,703 1,485,171 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 801,700 1,880,964 2,012,106 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,583,809 3,366,135 18 Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25) 1,040,624 1,494,911 19 Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** End of Year 6,521,948 5,719,575 20 Total assets (Part X, line 16) 655,696 418,120 21 Total liabilities (Part X, line 26) 6,103,828 5,063,879 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury Lectare 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. m Signature of officer Sign PRESIDENT/CEO THOMAS H NEW Here Type or print name and title Date Preparer's signature Check Print/Type preparer's name 10/05/22 self-employed P01361166 hisq ELIZABETH N. STURGEON ELIZABETH N. STURGEON 25-1538014 BUSECK, BARGER, BLEIL & CO., Preparer Firm's EŧN ▶ Firm's name 1640 W 8TH ST Use Only 814-454-6341 ERIE, PA 16505-5042 Firm's address Yes No May the IRS discuss this return with the preparer shown above? See instructions

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

If "Yes," complete Form 6069.

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

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

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

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

 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

Check this box if neither the orga	anization nor any	/ rela	tea (tion c	iornį	bensated any current diffice	i, director, or trustee.	
(A) Name and tille	(B) Average hours per week	officer and a director/trustee)		Position (do not check more than one box, unless person is both an officer and a director/trustee) Position (D) Reportable compensation from the			an ee)	Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) THOMAS H NEW	37.50									
PRESIDENT/CEO	0.00			x				106,906	0	15,021
(2) CYNTHIA L SPIZAL										
VP/GENERAL MANAGER	37.50 0.00			x				93,193	0	15,261
(3) MARK AMENDOLA										
BOARD SEC./TREASURER	1.00	x		x				0	0	0
(4) JENNIFER M. BONI	Þ									
DIRECTOR	1.00	x	3					0	o	0
(5) JOHN BONGIOVANN										
VICE BOARD CHAIR	1.00	х		x				0	0	0
(6) SHARON DALE										
DIRECTOR	1.00	x						0	0	0
(7) GLENN HOLLAND										
DIRECTOR	1.00	x						0	0	0
(8) ROCHELLE KROWINS										
BOARD CHAIR EMERITUS	1.00	x		x				0	0	0
(9) MARIO MAZZA	4 00									
DIRECTOR	1.00	x						0	0	0
(10) HOWARD NADWORNY										
DIRECTOR	1.00	x						0	0	0
(11) GARY SKIBA										
DIRECTOR	0.00	x						0	0	O 990 (2021)

Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded (B) Related or exempt (C) Unrelated (A) Total revenue from tax under sections 512-514 function revenue business revenue 1a 1a Federated campaigns b Membership dues 987,470 1b c Fundraising events 1c 1d d Related organizations e Government grants (contributions) 2,272,897 1e f All other contributions, gifts, grants, 1f 752,612 and similar amounts not included above g Noncash contributions included in 1,760 lines 1a-1f 4,012,979 h_Total, Add lines 1a-1f Business Code 502,430 502,430 515100 BROADCAST UNDERWRITING Program Service 24,851 515100 24,851 PRODUCTION INCOME f All other program service revenue 527,281 g Total. Add lines 2a-2f..... 3 Investment income (including dividends, interest, and 88,218 88,218 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ii) Personat 6a Gross rents 6a b Less: rental expenses 6b c Rental inc. or (loss) 6c d Net rental income or (loss) Gross amount from (i) Securities (ii) Other sales of assets 54,741 7a other than inventory b Less: cost or other Other Revenue 7b basis and sales exps. 54,741 c Gain or (loss) 7c 54,741 d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 425,244 8a 1c). See Part IV, line 18 229.533 b Less: direct expenses 8b 195,711 c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory **Business Code** 160,952 160,952 531390 GRAIN COMMUNICATIONS REVENUE 11a 31,596 31,596 531190 FACILITY RENTAL 6,496 6,496 531190 TOWER LAND RENTAL 746 746 515100 d All other revenue 199,790 Total. Add lines 11a-11d 88,218 24,851 5,078,720 756,961 Total revenue. See instructions

Total liabilities and net assets/fund balances

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 224,906 413,758 1 Cash—non-interest-bearing 2 2 Savings and temporary cash investments 373,541 29,753 129,130 3 Pledges and grants receivable, net 146,360 Accounts receivable, net Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 101,695 98,173 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 10,115,502 basis. Complete Part VI of Schedule D 10a 2,644,946 7,470,556 2,589,547 b Less: accumulated depreciation [10b] 10c 1,269,903 1,191,217 11 Investments—publicly traded securities 1,864,418 862,948 Investments—other securities. See Part IV, line 11 12 12 13 Investments—program-related. See Part IV, line 11 13 14 Intangible assets 14 140,590 160,638 15 Other assets. See Part IV, line 11 15 6,521,948 5,719,575 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 105,124 117,593 17 Accounts payable and accrued expenses 17 18 Grants payable 18 408,182 179,507 19 Deferred revenue 19 20 Tax-exempt bond llabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 121,020 142,390 25 of Schedule D 418,120 655,696 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here ▶ 🗓 and complete lines 27, 28, 32, and 33. Vet Assets or Fund Balances 6,103,828 5,063,879 Net assets without donor restrictions 27 Net assets with donor restrictions

Organizations that do not follow FASB ASC 958, check here ▶ and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 31 31 6,103,828 5,063,879 32 Total net assets or fund balances 6,521,948 5,719,575

SCHEDULE A (Form 990)

Public Charity Status and Public Support

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

PUBLIC BROADCASTING OF NORTHWEST

Em

PENNYSYLVANIA, INC.

Employer identification number 25–1154116

Pa	ırt I	Reaso	on for Public Charity	Status. (All organizations	must co	omplete	this part.) See instruction	ons.	
he	orgai	nization is not	a private foundation because	e it is: (For lines 1 through 12, o	heck only	one box.))		
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)							
3	П	A hospital or	a cooperative hospital service	e organization described in sec	ction 170	b)(1)(A)(ii	ii).		
4	П	A medical res	earch organization operated	in conjunction with a hospital	described	in section	n 170(b)(1)(A)(iii). Enter the h	ospital's name,	ř.
•	لسا	city, and state	.,					a1	11.55.25.
5	\Box			f a college or university owned	or operate	ed by a go	vernmental unit described in		
•	لـــا	_	b)(1)(A)(iv). (Complete Part						
6	П			overnmental unit described in s	ection 17	0(b)(1)(A)	(v).		
7	H			substantial part of its support fro					
•			section 170(b)(1)(A)(vi). (Co						
8				70(b)(1)(A)(vi). (Complete Part	II.)				
9	П			cribed in section 170(b)(1)(A)(i		ed in conju	inction with a land-grant colle	ge	
•	ш	or university	or a non-land-grant college of	f agriculture (see instructions).	Enter the	name, cit	y, and state of the college or		
		university:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
10	X	An organizati	on that normally receives (1)	more than 33 1/3% of its supp	ort from o	ontribution	ns, membership fees, and gro	ess	
	_	receipts from	activities related to its exem	pt functions, subject to certain	exception	s; and (2)	no more than 331/3% of its		
		support from	gross investment income an	d unrelated business taxable in	come (les	s section	511 tax) from businesses		
), 1975. See section 509(a)(2)					
11	Ц	An organizati	on organized and operated e	exclusively to test for public safe	ety. See s	ection 50	estable).	soo of	
12		An organizati	on organized and operated e	exclusively for the benefit of, to ons described in section 509(a	perrorm ti	etion 500	(a)(2) See section 500(a)(3)	Check	
		one or more p	oubliciy supported organizati os 12a through 12d that des	cribes the type of supporting or	rganizatio	and com	note times 12e. 12f. and 12g.	· Orioon	
				erated, supervised, or controlled					
	a	iype i. A	supporting organization ope	er to regularly appoint or elect	a maiority	of the dir	ectors or trustees of the	9	
		eunnortin	a organization You must co	omplete Part IV, Sections A a	nd B.	01 1110 411			
	b	Tuna II /	a cupporting organization su	pervised or controlled in conne	ction with	its suppor	ted organization(s), by having	1	
	IJ	control or	management of the suppor	ting organization vested in the	same pers	ons that o	control or manage the support	led	
		organizat	ion(s). You must complete	Part IV, Sections A and C.	•				
	С	Tyne III f	unctionally integrated, A s	upporting organization operated	d in conne	ction with	, and functionally integrated w	rith,	
	•	its suppo	rted organization(s) (see ins	tructions). You must complete	Part IV,	Sections	A, D, and E.		
	d	Type III r	non-functionally integrated	. A supporting organization ope	erated in o	onnection	with its supported organization	on(s)	
		that is no	t functionally integrated. The	organization generally must s	atisfy a dis	stribution r	equirement and an attentiven	ess	
		requireme	ent (see instructions). You n	nust complete Part IV, Sectio	ns A and	D, and Pa	art V.		
	е	Check thi	is box if the organization rec	eived a written determination fr	om the IR	S that it is	a Type I, Type II, Type III		
	,			n-functionally integrated suppor	ing organ	ization.		Γ	
	f		nber of supported organization	e supported organization(s).		********			
-	g				fint) le the	organization	(v) Amount of monetary	(vi) Amount	of
(i		e of supported ganization	(II) EIN	(iii) Type of organization (described on lines 1–10	11.1	ur governing	support (see	other support	
	, or	gamenton		above (see instructions))	docu	ment?	instructions)	instructions)
					Yes	No			
(A)									
							11.11		
(B)									
. ,									
(C)									
,									
(D)									
, ,									
(E)									
. ,									
			 Managagagagagagagagagagagagagagagagagaga	* 4 Processor de la companya del la companya de	10 10 10 10 10 10 10 10 10 10 10 10 10 1	#15855000.0000000000000000000000000000000		1	

Part III

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support					WW Complete	
	dar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifls, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,469,043	2,028,116	2,864,241	3,493,592	4,012,979	14,867,971
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	618,642	550,714	970,713	806,359	1,127,468	4,073,896
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	3,087,685	2,578,830	3,834,954	4,299,951	5,140,447	18,941,867
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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)	- 750					18,941,867
Sec	tion B. Total Support					(60	
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	3,087,685	2,578,830	3,834,954	4,299,951	5,140,447	18,941,867
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	58,360	76,265	22,214	22,255	88,218	267,312
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	58,360	76,265	22,214	22,255	88,218	267,312
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	4,435	4,432	3,551	0	0	12,418
12	Other income. Do not include gain or toss from the sale of capital assets (Explain in Part VI.)	619	1,100		9,173	750	11,642
13	Total support. (Add lines 9, 10c, 11,	0.454.000	0 000 007	3,860,719	4,331,379	5,229,415	19,233,239
	and 12.) First 5 years. If the Form 990 is for the or	3,151,099	2,660,627				25/205/205
14	organization, check this box and stop her	re				,)
Sec	tion C. Computation of Public S						
15	Public support percentage for 2021 (line 8						98.49%
16	Public support percentage from 2020 Sch					16	98,17%
	tion D. Computation of Investme	ent Income Per	centage) a alum- 1/2\		17	1%
17	Investment income percentage for 2021 (40	1%
	Investment income percentage from 2020 33 1/3% support tests—2021. If the organization	Schedule A, Part III	, line 17	14 and line 45 ic	more than 33 1/39	A No. of the Late	1. 70
19a	33 1/3% support tests—2021. If the organization of the organization of the support tests—2021. If the organization of the orga	anization did not che oox and stop here.	The organization of	ualifies as a public	oly supported orga	nization	▶ X
b	33 1/3% support tests-2020. If the orga	anization did not che	eck a box on line 1	4 or line 19a, and	line 16 is more tha	an 33 1/3%, and	
~	line 18 is not more than 33 1/3%, check to	his box and stop he	ere. The organizat	ion qualifies as a p	oublicly supported	organization	▶ 📙
20	Private foundation. If the organization di	id not check a box o	on line 14, 19a, or	19b, check this bo	x and see instructi	ons	▶ 🔲

Schedu	lle A (Form 990) 2021 PUBLIC BROADCASTING OF NORTHWEST 25-1154116	<u> </u>		Page 5
	Supporting Organizations (continued)	-		
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	110 below, the governing body of a supported organization:	11a		
	A failthly the label of a betsort described on time 1 to above:	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part Vi-	11c	1	
Secti	on B. Type I Supporting Organizations			
		3100000000	Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			
0000	on birth Typo in dapporting organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
1	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	255500000000000000000000000000000000000	ONCORPORAÇÃO DE LA COMPANSION DE LA COMP
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	MANAGE CONTROL (**)	Allaharan er
_				
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3	**********	5.0000000000000000000000000000000000000
-	supported organizations played in this regard.	9		
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	tional		
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruc	נוטווטן 	Van	Nio
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	90900000000	***************************************
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		(50.500.000.000
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

	e A (Form 990) 2021 PUBLIC BROADCAST			116 Page 7
Part		Supporting Organiza	dons (commueu)	Current Year
Secti	on D – Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purp	oses		
2	Amounts paid to perform activity that directly furthers exempt purpos	ses of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of su	ported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required-provide d	etails in Part VI)		
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organ	ization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2021 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	1	4275	/:::X
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
	Underdistributions, if any, for years prior to 2021			
-	(reasonable cause required-explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2021	art of the same of	1100 Table 1	oma e establecamenta de la composito de la com
а	From 2016			
b	From 2017	The state of the s		ngagagaa
С	From 2018			A
d	From 2019			n (alic and a second
	From 2020			
f	Total of lines 3a through 3e			a anamona establish
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
ī	Carryover from 2016 not applied (see instructions)			
i	Remainder, Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from			
	Section D, line 7:			The management of the second o
а	Applied to underdistributions of prior years			
	Applied to 2021 distributable amount		The second secon	
	Remainder. Subtract lines 4a and 4b from line 4.			
- 5	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.	The second secon		Y
6	Remaining underdistributions for 2021 Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
•	and 4c.			
8	Breakdown of line 7:			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			
	Excess from 2021			
	minutes it will be well a property to the control of the control o			Schedule A (Form 990) 2021

Schedule B (Form 990)

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Department of the Treasury Internal Revenue Service Name of the organization

PUBLIC BROADCASTING OF NORTHWEST

Go to www.irs.gov/Form990 for the fatest mormation.

PENNYSYLVANIA, INC.

Employer identification number

25-1154116

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 converted to the Note: Only a section 501(c)(7) instructions.	overed by the General Rule or a Special Rule. , (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See								
General Rule									
	ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 property) from any one contributor. Complete Parts I and II. See instructions for determining a ributions.								
Special Rules									
regulations under sect 16b, and that received	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the ions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.								
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.									
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year									
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).									

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

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021)

Name of organization

PUBLIC BROADCASTING OF NORTHWEST

Employer identification number 25-1154116

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is nee	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	HOWARD POLLOCK 2240 WEST 15TH STREET ERIE PA 16505	\$ 12,500	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	BARBARA POLLOCK 4620 HARBORVIEW DRIVE ERIE PA 16508	\$ 12,500	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
No. 9	MARY LINCOLN 5966 WYNDEMERE DRIVE ERIE PA 16505	\$ 20,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	MARY MCINTYRE ESTATE 1435 W 38TH STREET ERIE PA 16508	\$ 18,456	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	JOSEPH LEONE 536 CALIFORNIA DRIVE ERIE PA 16505	\$ 69,699	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	SCOTT WRIGHT 540 WILKINS ROAD ERIE PA 16505	\$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information. If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

Complete if the organization is described below.

· Section 527 organizations: Complete Part I-A only.

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

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

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

+ S	ection 501(c)(4), (5), or (6) organizations: Complete Part III.				
Name	of organization PUBLIC BROADCASTING	OF NORTHWEST			fication number
	PENNYSYLVANIA, INC.			25-11541	
	(I-A Complete if the organization is exem	pt under section 501(c	or is a section	on 527 organization	n.
1	Provide a description of the organization's direct and indire	ct political campaign activities	in Part IV. See ins	structions for	
	definition of "political campaign activities."				
2	Political campaign activity expenditures. See instructions	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
3	Volunteer hours for political campaign activities. See instru	ctions		***********	
Par	t IsB Complete if the organization is exem	pt under section 501(c)(3).		
1	Enter the amount of any excise tax incurred by the organiza	ation under section 4955		*************************************	
2	Enter the amount of any excise tax incurred by organization	n managers under section 495	5	o. ao	
3	If the organization incurred a section 4955 tax, did it file Fo				
4a	Was a correction made?		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	90-8936	Yes No
b	If "Yes," describe in Part IV.		V	F04/a\/2\	
Par	Complete if the organization is exem			ion 501(c)(s).	
1	Enter the amount directly expended by the filing organization				
	activities			5 S	
2	Enter the amount of the filing organization's funds contribut	ted to other organizations for s	ection		
	527 exempt function activities				
3	Tribute to the tribute and the second tribute to the second tribute tribute to the second tribute trib	as bara and an Carm 1170 Of I			
	line 17b Did the filing organization file Form 1120-POL for this year Enter the names, addresses and employer identification nu	.,,.,			
4	Did the filing organization file Form 1120-POL for this year	?			Yes No
5	Enter the names, addresses and employer identification nu	mber (EIN) of all section 527	political organizati	ons to which the filing	
	organization made payments. For each organization listed,	enter the amount paid from the	ie filing organization	on's funds. Also enter	
	the amount of political contributions received that were pro-	mptly and directly delivered to	a separate politica	al organization, such	
	as a separate segregated fund or a political action committee	ee (PAC), If additional space i			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds, if none, enter -0	promptly and directly
					delivered to a separate political organization.
					If none, enter -0
,,,					
(1)					
(2)					
(2)					
(3)					
(0)					
(4)					
177					
(5)					
(~)					
(6)					
1-1			1	1	

PUBLIC BROADCASTING OF NORTHWEST 25-1154116

	(election under section 501(h)).	(a	a)		(b)		
	r each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed Yes cription of the lobbying activity.		No	A	moui	nt	
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:						
а	Volunteers?		X				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X				
C	Media advertisements?	X			1	1,	143
d	Mailings to members, legislators, or the public?		X				
	Publications, or published or broadcast statements?		X			_	
f	Grants to other organizations for lobbying purposes?	-	X				
	Direct contact with legislators, their staffs, government officials, or a legislative body?		X				_
h	Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X			-	_
	Other activities?		X			4	1 4 2
j	Total. Add lines 1c through 1i	0.000		**********	<u></u>	¹ /	143
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	0.00500000000	X				
	If "Yes," enter the amount of any tax incurred under section 4912			_	_		
	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?	1 1/81		4.7		*****	
Pa	rtili-A Complete if the organization is exempt under section 501(c)(4), section 501	(C)(5),	or sec	tion			
	501(c)(6).					V	Na
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1000	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			1600	3	_	-
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year	(c)(5)	or eac		3		
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501	(C)(O);	Davi II	LIOIT LA lie	10.3	ie	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" (מן אכ	Faitil	1-7-4, 111	10 0,	13	
-	answered "Yes."		1				
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 pald).		2a				
	Current year		2b				
	Carryover from last year		2c				
C		(27.70)	3				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	• • • • • • • • • • • • • • • • • • • •	l i				
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		4				
	and political expenditure next year? Taxable amount of lobbying and political expenditures. See instructions	50	5				
5							
Pa	rt IV Supplemental Information ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Par	+ ILΔ li	nee 1 and	4			
Prov	ee instructions); and Part II-B, line 1. Also, complete this part for any additional information.		1100 1 0111	_			
2 (S	ee instructions); and Part II-B, line 1. Also, complete this part for any additional information.						
C.	CHEDULE C, PART IV, ADDITIONAL INFORMATION						
# .D	Cheboth C, Fact IV, 2200111001112 2110 011011111		*10 (00 113	223 -24 - 20	() 1 t ()		
P	ART II-B, LINE 1, LOBBYING ACTIVITIES:		-04-C00	1 (3 x 6+36)	00	0.00	
ľ	TEM 1(C) - A PORTION OF THE ORGANIZATION'S MEMBERSHIP D	UES	TO		ioi - 161		
A	SSOCIATION OF PUBLIC TELEVISION STATIONS (APTS) IS ASSO	CIA	ED W	TTH	e		<u> </u>
L	OBBYING EFFORTS.	ă			5 5.		8
* 1	8 7 8 8 9 8 9 8 8 8 8 8 8 8 8 8 8 8 8 8						
9 15 -		8 6	0000 is 40 ·	- 4994 - 14995	C+100	08904.4	0.12.0

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

	of the organization		Employer identification number
P	JBLIC BROADCASTING OF NORTHWEST		
PI	ENNYSYLVANIA, INC.		25-1154116
*******	Organizations Maintaining Donor Advised Fur Complete if the organization answered "Yes" on F	nds or Other Similar Funds or A Form 990, Part IV, line 6.	Accounts.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that	t the assets held in donor advised	_
•	funds are the organization's property, subject to the organization's excl		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	or advisor, or for any other purpose	
	conferring impermissible private benefit?		Yes No
Pa	Conservation Easements.		
	Complete if the organization answered "Yes" on F	Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check		
•	Preservation of land for public use (for example, recreation or educ		important land area
	Protection of natural habitat	Preservation of a certified hi	storic structure
	Preservation of open space	_	
2	Complete lines 2a through 2d if the organization held a qualified conse	rvation contribution in the form of a cons	ervation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic structure incl		
d	Number of conservation easements included in (c) acquired after 7/25/		
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organiza	ation 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 mon	itoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of	of violations, and enforcing conservation of	easements during the year
	•		
7	Amount of expenses incurred in monitoring, inspecting, handling of vio	lations, and enforcing conservation ease	ments 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 XIII, describe how the organization reports conservation easem	ents in its revenue and expense stateme	nt 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.	111 4 1 1 1 7	Civilian Appara
P	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" on I	Form 990, Part IV, line 8.	Similar Assets.
12	If the organization elected, as permitted under FASB ASC 958, not to		ce sheet works
•	of art, historical treasures, or other similar assets held for public exhibit	tion, education, or research in furtheranc	e of public
	service, provide in Part XIII the text of the footnote to its financial state	ments that describes these items.	
b	If the organization elected, as permitted under FASB ASC 958, to repo	ort in its revenue statement and balance:	sheet works of
	art, historical treasures, or other similar assets held for public exhibition	n, education, or research in furtherance of	of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical treasures, or	r other similar assets for financial gain, p	rovide the
	following amounts required to be reported under FASB ASC 958 relation	ng to these items:	
a	Revenue included on Form 990, Part VIII, line 1		\$

	Complete if the organization answered "Yes" on Fo			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
(A) Cincopial a				
(1) Financial d	Id equity interests			
(2) Clustry ite	IXED INCOME MUTUAL FUNDS	804,802	MARKET	
	NEY MARKET ACCOUNTS	798,445	MARKET	
	JITY MUTUAL FUNDS	197,362	MARKET	
	DOWMENTS HELD BY OTHERS	37,148	MARKET	
	AL ESTATE MUTUAL FUNDS	26,661	MARKET	
(E)				
(F)				
(G)	2 2 2 2		[8]	
(H)				
	n (b) must equal Form 990, Part X, col. (B) line 12.)	1,864,418		
Part VIII	Investments – Program Related.			
armin and a second	Complete if the organization answered "Yes" on Fo			
	(a) Description of investment	(b) Book value	(c) Method of value	
			Cost or end-of-year ma	arkei value
(1)				
(2)				
(3)				
_(4)				
(5)				
(6)				
(7)				
(8)			16	
(9)	n (b) must equal Form 990, Part X, col. (B) line 13.)			* v · ·
Part IX	Other Assets.	orm 000 Dort IV line	11d Soo Form 000 Par	t V. line 15
	Complete if the organization answered "Yes" on Fo	min 990, Fait IV, min	s 11d. See Form 550, Far	(b) Book value
(4)	(a) Document			
(1)				
(2)	11411			
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 15.)		▶	
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	e 11e or 11f. See Form 99	90, Part X,
	line 25.			
1.	(a) Description of liability			(b) Book value
(1) Federal	income taxes			00 5/5
	JED PAYROLL AND WITHHOLDINGS			88,545
	JED BROADCAST RIGHTS			28,687
(4) ACCRI	JED SALES TAX			3,788
(5)				
(6)				
(7)				
(8)				
(9)				121,020
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 25.)	.	inancial statements that reports	
2. Liability for	uncertain tax positions. In Part XIII, provide the text of the footnot	He to the organization's f	traticial statements that reports	XIII
organization's	liability for uncertain tax positions under FASB ASC 740. Check	nere if the text of the foo	mote has been provided in Paπ	VIII

Schedule D (Form 990) 2021 PUBLIC BROADCASTING OF Part XIII Supplemental Information (continued)	NORTHWEST	25-1154116	Page 5
Part XIII Supplemental Information (continued)			
8.3	······································		·····
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9			1 EL 1 1 12 12 12 12 12 12 13 14 14 14 14 14 14 14 14 14 14 14 14 14
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PUBLIC BROADCASTING OF NORTHWEST 25-1154116

Schedule G (Form 990) 2021 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (c) Other events (a) Event #1 (b) Event #2 (d) Total events (add col. (a) through BREWFEST AUCTION col. (c)) (fotal number) (event type) (event type) 33,927 261,550 425,244 1 Gross receipts 129,767 2 Less: Contributions 3 Gross income (line 1 minus 425,244 33,927 261,550 129,767 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 10,982 184,596 229,533 33,955 9 Other direct expenses 229,533 10 Direct expense summary. Add lines 4 through 9 in column (d) 195,711 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add (b) Pull tabs/instant (c) Other gaming Revenue (a) Bingo col. (a) through col. (c)) bingo/progressive bingo 1 Gross revenue ... 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses No 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net garning income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: a is the organization licensed to conduct gaming activities in each of these states? b if "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

2021

OMB No. 1545-0047

▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

Department of the Treasury Internal Revenue Service **Employer Identification number** PUBLIC BROADCASTING OF NORTHWEST Name of the organization 25-1154116 PENNYSYLVANIA, INC. FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 A COPY OF THE FORM 990 AND FORM 990-T IS PROVIDED TO THE BOARD OF THE ORGANIZATION'S PRESIDENT/GM IS RESPONSIBLE FOR REVIEWING DIRECTORS. AND APPROVING THE FORM 990 PRIOR TO ITS BEING FILED. FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS, CONFLICT-OF-INTEREST POLICIES, FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE TO THE PUBLIC AT THE ORGANIZATION'S OFFICE OR UPON REQUEST. FORM 990, PART XII, LINE 2C - CHANGE IN FINANCIAL REVIEW PROCESS THE ORGANIZATION'S BOARD OF DIRECTORS REVIEWS AND APPROVES THE ANNUAL AUDITED FINANCIAL STATEMENTS AND SELECTION OF THE INDEPENDENT AUDITOR.