EOF 8879-TE

### **IRS E-file Signature Authorization** for a Tax Exempt Entity

For calendar year 2023, or fiscal year beginning 10/01, 2023, and ending 9/30, 20 24

EIN or SSN

2023

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information.

Name of filer Gallup Public Radio, Inc. 85-0385909 Name and title of officer or person subject to tax Raymond Calderon President Type of Return and Return Information Part I Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. 345,431 b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b 1a Form 990 check here b Total revenue, if any (Form 990-EZ, line 9) \_\_\_\_\_ 2b 2a Form 990-EZ check here 3a Form 1120-POL check here b Total tax (Form 1120-POL, line 22) b Tax based on investment income (Form 990-PF, Part V, line 5) 4b 4a Form 990-PF check here 5a Form 8868 check here b Balance due (Form 8868, line 3c) 5b 6a Form 990-T check here b Total tax (Form 990-T, Part III, line 4) 6b 7a Form 4720 check here b FMV of assets at end of tax year (Form 5227, Item D) ...... 8b 8a Form 5227 check here 9a Form 5330 check here Amount of credit payment requested (Form 8038-CP, Part III, line 22) . . . . 10b 10a Form 8038-CP check here ..... b Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name . (EIN) and that I have examined a copy of the of entity) 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only Waters & Company, LLC \_ to enter my PIN as my signature I authorize Enter five numbers, but ERO firm name do not enter all zeros on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the peturn is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. 04/01/25 Janne Signature of officer or person subject to tax Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification 85073611376 number (EFIN) followed by your five-digit self-selected PIN. I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. 04/01/25 Ollie D. Waters ERO's signature **ERO Must Retain This Form — See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So

## Forms 990 / 990-EZ Return Summary

For calendar year 2023, or tax year beginning 10/01/23 , and ending

09/30/24

85-0385909

Gallup Public Radio, Inc.

Net Asset / Fund Balance at Begin	ning of Year			591,150
Revenue				
Contributions		323,105		
Program service revenue				
Investment income		22,313		
Capital gain / loss				
Fundraising / Gaming:				
Cross revenue				
Direct expenses				
Net income				
Other income		13		
Total revenue			345,431	
Expenses			•	
Program services		200,162		
Management and general		34,350		
Fundraising		14,403		
Total expenses		<u> </u>	248,915	
Excess / (deficit)				96,516
Changes				-94,200
	alance at End of Year			593,466
Reconciliation of F			Reconciliation of Expe	
otal revenue per financial statements	345,431	Total expenses	per financial statements	343,115
ess:		Less:		
Unrealized gains		Donated se	ervices	94,200
Donated services	-	Prior year a	adjustments	
Recoveries		Losses	_	
Other		Other		
luat				
ius.		Plus:		
Investment expenses		Plus: Investment	t expenses	
			t expenses	
Investment expenses	345,431	Investment Other	t expensesexpenses per return	248,915
Investment expenses Other		Investment Other Total	expenses per return	248,915
Investment expenses Other Total revenue per return	Beginning	Investment Other Total of Balance Sheet Ending		248,915
Investment expenses Other Total revenue per return  Assets	Beginning 597,906	Investment Other Total of Balance Sheet Ending 602,975	expenses per return	248,915
Investment expenses Other Total revenue per return  Assets Liabilities	Beginning 597,906 6,756	Investment Other Total of  Balance Sheet Ending 602,975 9,509	expenses per return	
Investment expenses Other Total revenue per return  Assets	Beginning 597,906	Investment Other Total of Balance Sheet Ending 602,975	expenses per return	
Other  Total revenue per return  Assets Liabilities	Beginning 597,906 6,756	Balance Sheet Ending 602,975 9,509 593,466	expenses per return	248,915
Investment expenses Other Total revenue per return  Assets Liabilities	Beginning 597, 906 6, 756 591, 150	Balance Sheet Ending 602,975 9,509 593,466	Differences	

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 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 2023 Open to Public Inspection

Α	For the	e 2023 ca	alendar year, or		ginning 10	0/01/23	3 , and ending	09/3	30/2	4					
В	Check if ap	pplicable:	C Name of organiza								DI	Employer	identifica	tion number	•
	Address c	change		Ga	allup Pub	lic Rad	io, Inc.				4.			_	
	Name cha	ange	Doing business as										<u> 3859</u>	09	
$\equiv$	Initial retur	ŭ	Number and stree		mail is not delivere	ed to street addre	ess)			Room/suite		Telephone		7626	
$\Box$	Final return				untry, and ZIP or fo	reign postal cod	e				╁	,05	303	7020	
	terminated		Gallup			NM 8730						0	:4- <b>(</b>	3.4	5,431
	Amended	return	F Name and addres	ss of principal of		NM 0730					G	Gross rece	ipts \$	34	3,431
	Application	n pendina	Raymond							H(a) Is this a	group re	eturn for su	bordinates	? Yes	X No
			705 Gui							H(b) Are all s	ubordir	natos inclu	dod2	Yes	No
				riey A	ve	NTM.	87301						aea : See instruc		
			Gallup		, ,						io, alla	on a not. c	occ monac	110110	
<u> </u>		npt status:	<b>X</b> 501(c)(3)		( ) (inse	ert no.)	4947(a)(1) or	527							
J	Website:		ww.kglp.							H(c) Group e					3737
		organization:		Trust	Association	Other			L Yea	ar of formation:	199	12	M State	of legal domic	cile: <b>NM</b>
	art I		ımmary												
	1 E		scribe the organiz		ion or most sig	nificant activi	ties:								
e		See	Schedule C	)											
an															
Activities & Governance															
ઠ્ઠ	l l	Check thi		-		•	or disposed of n						_		
æ	3 N	Number c	of voting members	s of the gove	rning body (Pa	rt VI, line 1a)						3	6		
es	4 N	Number o	of independent vot	ting member	s of the govern	ing body (Pa	rt VI, line 1b)					4	6		
Ĭ	5 T	Total num	ber of individuals	s employed ir	n calendar year	2023 (Part V	/, line 2a)					5	3		
Act	<b>6</b> T	Total num	ber of volunteers	(estimate if	necessary)							6	13		
-	<b>7a</b> T	Total unre	elated business re	evenue from	Part VIII, colun	nn (C), line 1	2					7a			0
	bΝ	Net unrela	ated business tax	able income	from Form 990	O-T, Part I, lin	e 11					7b			0
										Prior \			(	Current Yea	
ø	8 (	Contributi	ons and grants (F	Part VIII, line	1h)					3	17,	719		323	,105
Ę.	9 F	Program :	service revenue (I	Part VIII, line	e 2g)										0
Revenue	10 li	Investmer	nt income (Part V	'III, column (	<li>A), lines 3, 4, a</li>	nd 7d)					<u>11,</u>	727		22	,313
ш	11 (	Other rev	enue (Part VIII, c	olumn (A), liı	nes 5, 6d, 8c, 9	oc, 10c, and 1	11e)					37			13
	<b>12</b> T	Total reve	enue – add lines 8	3 through 11	(must equal Pa	art VIII, colum	nn (A), line 12)			3:	29,	483		345	, 431
	13 (	Grants ar	nd similar amount	s paid (Part	IX, column (A),	lines 1–3)									0
	14 E	Benefits p	aid to or for mem	nbers (Part I)	K, column (A), I	line 4)									0
S	15 0								L	1	01,	520		116	,274
nse	<b>16a</b> F	Professio	nal fundraising fe	es (Part IX,	column (A), line	e 11e)									0
Expenses	b T	Total fund	other compensati nal fundraising fe draising expenses	s (Part IX, co	lumn (D), line 2	25)	14,	, 403							
ш	17 (		enses (Part IX, c			114 046				1	17,	835		132	, 641
	18 T	Total expe	enses. Add lines	13-17 (must	equal Part IX,	column (A),	line 25)					355			, 915
	<b>19</b> F	Revenue	less expenses. S	Subtract line 1	18 from line 12							128		96	,516
Net Assets or	<u> </u>									Beginning of (			l	End of Year	
sets	<b>20</b> T		ets (Part X, line 1							5		906			, 975
A A	21 T		lities (Part X, line									756			,509
			s or fund balance		ine 21 from line	e 20				5	91,	150		593	, 466
F	art II	Si	gnature Bloc	<u>ck</u>											
			perjury, I declare th									f my kno	wledge a	nd belief, i	t is
tr	ue, corre	ect, and co	mplete. Declaratio	on of preparer	(other than offic	er) is based or	n all information o	f which prepa	arer has	any knowled	ge.				
Sig	gn	Signature	of officer									Date			
He	re	Rayr	mond Calo	deron			Pr	esider	nt						
_		Type or p	rint name and title												
		Print/Type	e preparer's name	-		Preparer's sign	nature			Date		Check	if F	PTIN	
Pai	d	Ollie	D. Waters			Ollie D.	Waters			03/3	<u>30/</u> 25	self-em	oloyed	P000725	61
Pre	parer	Firm's na	me <b>W</b> a	aters	& Compa	ny, LLO	C				Firm's	EIN	20	-5855	985
Use	e Only				ndelaria										
		Firm's ad	73.7		rque, N		07-1952				Phone	e no.	505·	-260-	0616
May	y the IRS		s this return with t		_									X Yes	

Pa	Statement of Program Service Check if Schedule O contains a	e Accomplishments a response or note to any line in thi	e Part III	$\overline{\mathbf{X}}$
1	Briefly describe the organization's mission:	response of note to any line in thi	31 ait iii	
S	ee Schedule O			
	•			
2	Did the organization undertake any significant progr	ram services during the year which were not I	isted on the	
_		and control daming the year miles need need		Yes X No
	If "Yes," describe these new services on Schedule			
3	Did the organization cease conducting, or make sign	nificant changes in how it conducts, any prog	ıram	
				Yes X No
4	If "Yes," describe these changes on Schedule O.	plichments for each of its three largest progra	om continue to management by	
4	Describe the organization's program service accomexpenses. Section 501(c)(3) and 501(c)(4) organization			
	the total expenses, and revenue, if any, for each pro-		and anodatons to others,	
	, , , , , , , , , , , , , , , , , , ,	<b>3</b>		
	(Code: ) (Expenses \$ 200	0,162 including grants of \$	) (Revenue \$	)
-	CPB accepted financial su			
-	Quarterly music, FCC pro			
-	Beta testing of IP-based			es.
	Backup system and new tr Weatherization of Gibson			
_	Installation of Gibson F			•
_	Hiring of a new PT Produ	ction Assistant, Calv	in Gleason.	'. <b>•</b>
_	Continued community outr	reach, including publi	c service	
	announcements (PSAs), ir	nterviews, website exp	ansion (see above)	
	and collaboration			
415	(Oada: \(\sigma \) (Figure 2222 \(\sigma \)	including wants of th	) (Pausaus	
	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$	)
	/ <del></del>			
	• • • • • • • • • • • • • • • • • • • •			• • • • • • • • • • • • • • • • • • • •
	• • • • • • • • • • • • • • • • • • • •			
	• • • • • • • • • • • • • • • • • • • •			
	• • • • • • • • • • • • • • • • • • • •			
	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$	)
N	//A			
	·			
	•			• • • • • • • • • • • • • • • • • • • •
	• • • • • • • • • • • • • • • • • • • •			
	•			
4d	Other program services (Describe on Schedule O.)			
Tu			(Revenue \$	)
4e	Total program service expenses	ng grants of \$ ) 200,162	_ (	

#### **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 1 complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? See instructions 2 2 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 X 3 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 X 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III 5 X 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 "Yes," complete Schedule D, Part I X 6 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 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III X 8 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 debt negotiation services? If "Yes," complete Schedule D, Part IV X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V X 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," complete Schedule D, Part VI X 11a 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 X 11b 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 X 11c 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 X 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 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 X Schedule D, Parts XI and XII **b** Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes." and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional X 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV X 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 for any foreign organization? If "Yes," complete Schedule F, Parts II and IV X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 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. See instructions X 17 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on X Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? X If "Yes," complete Schedule G, Part III. 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a **b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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.

-			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? 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			•
04-	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	04-		х
<b>L</b>	through 24d and complete Schedule K. If "No," go to line 25a  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		Λ
b	Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
С	to defense any tay exempt heads?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
ZJa	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	254		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Voc " complete School II  Part I	25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule			
	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash 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, Part II, III,			<u>-</u> -
	or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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 on Schedule O for Part VI, lines 11b and		v	
( <b>1</b>	19? Note: All Form 990 filers are required to complete Schedule O.  Statements Regarding Other IRS Filings and Tay Compliance	38	X	<u> </u>
33353	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Check if Schedule O contains a response of hole to any line in this Part v		Yes	No
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	333333	1 62	INO
1a b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 2  Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and	-		
С	reportable gaming (gambling) winnings to prize winners?	1c	200000000	
	- specials gaining (gaineing) minings to prize minister.	1 .0	<u>.                                    </u>	ı

Pa	IN Statements Regarding Other IRS Filings and Tax Compliance (continued)	าued)			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			0000000		
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	<u> </u>
3a				3a	<u> </u>	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other autho					
	a financial account in a foreign country (such as a bank account, securities account, or other financial account, or other financial account, securities account, or other financial account, or other financial account.	ount)?		4a	0-00-00-00-00	X
b	If "Yes," enter the name of the foreign country			. (00000000		
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Acco	unts (F	·BAR).			
5a						X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?					
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			60		х
b	organization solicit any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions o			6a		- 21
D	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
и а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods					
u	and services provided to the payor?			7a	200000000	1000000000
b	If "Vee " did the executive time patify the degree of the value of the grands are existed as a			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	required to file Form 8282?			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			20000000	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract	+0		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 88	899 as	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization f	ile a Fo	orm 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by	the t				
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а				9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b	00000000	*********
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:	المدا				
a	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources	11h		0.0000000		
12a	against amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	11b		12a	888888888	4000000000
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1		120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120				
а	le the organization licensed to iccur qualified health plans in more than one state?			13a		
_	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which					
	the organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
14a	Did the ergenization receive any payments for indeer tenning conjugate during the tay year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration					
	excess parachute payment(s) during the year?			15	<u> </u>	X
	If "Yes," see instructions and file Form 4720, Schedule N.	•				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income	me?		16		X
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17	00000000	
	If "Yes," complete Form 6069.					400000

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	6			
	If there are material differences in voting rights among members of the governing body, or					
	if the governing body delegated broad authority to an executive committee or similar					
	committee, explain on Schedule O.			00000000		
b	Enter the number of voting members included on line 1a, above, who are independent	1b	6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, or persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year b		owing:			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the In	ternal i	Revenu	e Code.)		
					Yes	No
l0a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the	form?		11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	-		00000000		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	conflicts	?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe on Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13		X
14	Did 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?					
а	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
l6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
	with a taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			0000000		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			00000000		
	organization's exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed <b>NM</b>					
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 6104 requires an organization for 6104 requires an organization for 6104 requires an organization for 6104 requires and 6104 requires an	on 501(c	:)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request Other (explain on Schedule O)					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	policy,				
	and financial statements available to the public during the tax year.	-				
20	State the name, address, and telephone number of the person who possesses the organization's books and records.					
01	ganization 705 Gurley Ave					

505-863-7626

NM 87301

Gallup

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

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

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

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

Check this box if neither the organ	nization nor any r	elate	d org	aniza	ation	comp	ens	sated any current officer, di	rector, or trustee.	
<b>(A)</b> Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	bo	x, unle	Pos heck ess pe	more rson i	than on a both a r/trustee Highest compensated employee	เท	(D)  Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Raymond Calderon	2.00	x		x				0	0	0
(2) Carol Sarath  Vice President	2.00	x		x				0	0	0
(3) Matthew Mingus Secretary	2.00	x		x				0	0	0
(4) Gabriel Suk	2.00	x						0	0	0
(5) Markos Chavez	2.00	x						0		
(6) Sabrina Ezzell Director	2.00	x						0	0	0
(7) Rachel Kaub	40.00			х				78,129		0
(8)		-						70,123		
(9)		-								
(10)		-								
(11)										

Pa	rt VII Section A. Officers	, Directors, Trus	stees	s, Ke	y En	nplo	yees	s, an	nd Highest Compensated E	mployees (continued)	
	ı		(C) Position (do not check more than one box, unless person is both at officer and a director/trustee per week (list any hours for						(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 below dotted line)	Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	Former	1099-NEC)	1099-NEC)	related organizations
(12)											
(13)											
(14)											
(15)											
(16)											
(17)											
(18)											
(19)											
1b	Subtotal								78,129		
2	Total from continuation sheet Total (add lines 1b and 1c) Total number of individuals (increportable compensation from total)	luding but not lim							78,129 who received more than \$100	0,000 of	
3	Did the organization list any <b>for</b> employee on line 1a? <i>If "Yes," o</i> For any individual listed on line organization and related organization.	complete Schedu 1a, is the sum of zations greater th	<i>le J i</i> repo an \$	<i>for su</i> ortabl 150,0	uch ii e coi 000?	ndivi mpei If "}	dual nsatio 'es,"	on al	nd other compensation from	the	3 X
5	individual	receive or accru	e coi	mper	nsatio	on fr	om a	ny u	nrelated organization or indiv	ridual	
Sect	ion B. Independent Contractor	rs									
1	Complete this table for your five compensation from the organization								year ending with or within the	e organization's tax year.	
	Name and	(A) business address							Descript	(B) tion of services	(C) Compensation
2	Total number of independent correceived more than \$100,000 or	ontractors (includ	ing b	out no	ot lim	ited izatio	to the	ose l	listed above) who	0	

Part	90 (2023) Gall VIII Stateme	nt of	Revenue					-0385909		Page
	Check if	Sche	dule O cont	ains	a respor	nse or note	to any line in thi (A) Total revenue	S Part VIII  (B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Program Service Contributions, Gifts, Grain Revenue and Other Similar Amour	b c d	ions ions ntributions gifts, gran t included ncluded in	s) ts, above			Business Code	323,105			
	f All other program g Total. Add lines 2 Investment incom other similar amo Income from inve Royalties	2a–2f . ne (incluunts) unts) stment	uding dividends,	intere	est, and roceeds		22,313			22,31
6: I	a Gross rents b Less: rental expenses c Rental inc. or (loss) d Net rental income a Gross amount from sales of assets other than inventory	6a 6b 6c	(i) Real		(ii) F	Personal				
her Revenu	b Less: cost or other basis and sales exps. c Gain or (loss) d Net gain or (loss)	7b 7c								
1	a Gross income from (not including \$ of contributions reports). See Part IV, lin b Less: direct experts C Net income or (locations) C Gross income from	orted on e 18 nses	ı line n fundraising ev	8a 8b rents						
10	activities. See Pa b Less: direct exper c Net income or (lo: a Gross sales of inverturns and allows b Less: cost of good	rt IV, lirnses nses ss) fror ventory ances	ne 19 n gaming activit , less	9a 9b ies 10a 10b						
	c Net income or (los	ss) fror		tory		Business Code	13	13		

13 345,431

13

0

d All other revenue .....

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

Total revenue. See instructions

Form 990 (2023)

### Part IX Statement of Functional Expenses

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

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

	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		o.pe.iisss	gonoral oxponess	5.ps.1005
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members		ŝ		
5	Compensation of current officers, directors,	70 100	E4 C01	11 710	11 710
_	trustees, and key employees	78,129	54,691	11,719	11,719
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	29,394	29,394		
8	Pension plan accruals and contributions (include	20,001			
·	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	8,751	6,843	954	954
11	Fees for services (nonemployees):	·	·		
а	Management				
b	Legal	1,870		1,870	
С	Accounting	18,018		18,018	
d	Lobbying	27			
е	Professional fundraising services. See Part IV, line 17	Š			
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column	10 000	10 000		
10	(A) amount, list line 11g expenses on Schedule O.)	10,988 887	10,988		887
12	· · · · · · · · · · · · · · · · · · ·	4,458	2,966	1,219	273
13 14	Office expenses Information technology	1,779	1,391	194	194
15	Royalties	1,773	1,331	171	174
16	Occupancy	2,861	2,803	29	29
17	Travel	173	135	19	19
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,494	9,494		
23	Insurance	3,007	2,351	328	328
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)  Program Exp	63,885	63,885		
a b	Operating Supplies	9,070	9,070		
С	Miscellaneous	6,151	6,151		
d	*	<u> </u>	0,101		
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	248,915	200,162	34,350	14,403
26	Joint costs. Complete this line only if the	-,	,	- ,	,
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

::F4!	Check if Schedule O contains a response or no	ote to any line in th	nis Part X			
		-		(A) Beginning of year		(B) End of year
	1 Cash—non-interest-bearing			121,769	1	110,000
	2 Savings and temporary cash investments			410,260	2	431,938
	Pledges and grants receivable, net			4,600	3	·
	4 Accounts receivable, net			•	4	
	Loans and other receivables from any current or form	er officer, director				
	trustee, key employee, creator or founder, substantial		DV:			
	controlled entity or family member of any of these pers				5	
	6 Loans and other receivables from other disqualified p					
S	under section 4958(f)(1)), and persons described in s				6	
Assets	7 Notes and loans receivable, net				7	
As	8 Inventories for sale or use				8	
	9 Prepaid expenses and deferred charges			2,609		2,607
	Oa Land, buildings, and equipment: cost or other			_,		_, _,
	basis. Complete Part VI of Schedule D	10a	104,980			
	b Less: accumulated depreciation	10h	46,550	58,668	10c	58,430
1				30,000	11	
1:					12	
1:					13	
14	Intermedial program related. See Fart 17, line FF				14	
1					15	
10				597,906	16	602,975
1				3,799	17	9,216
18	R Grante payable and accrucia expenses	3,133	18	3,220		
19	• • • • • • • • • • • • • • • • • • • •				19	
2					20	
2		V of Schedule D			21	
					21	
Liabilities	trustee, key employee, creator or founder, substantial		o/			
iii					22	
ع   ع	controlled entity or family member of any of these pers	sird partice			23	
2		Ina parties			24	
	' '				24	
2	parties, and other liabilities not included on lines 17-2.		v			
		4). Complete Fan	. ^	2,957	25	293
2	of Schedule D			6,756	25 26	9,509
			······	0,730	20	<u> </u>
<b>"</b>	Organizations that follow FASB ASC 958, check I	nere A				
Š	<ul><li>and complete lines 27, 28, 32, and 33.</li><li>Net assets without donor restrictions</li></ul>		8	591,150	07	593,466
alan 2				391,130	27	333,400
Ba 2			1		28	
Fund Balances	Organizations that do not follow FASB ASC 958,	check here				
	and complete lines 29 through 33.		ji		•	
Net Assets or					29	
sset		ierit tuna			30	
A A S	• • • • • • • • • • • • • • • • • • • •			591,150	31	593,466
N Set					32	
3	Total liabilities and net assets/fund balances			597,906	33	602,975

Form **990** (2023)

Pε	art XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>		X
1	Total revenue (must equal Part VIII, column (A), line 12)			431
2	Total expenses (must equal Part IX, column (A), line 25)			915
3	Revenue less expenses. Subtract line 2 from line 1			516
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	5	91,	150
5	Net unrealized gains (losses) on investments 5			
6	Donated services and use of facilities 6	_	94,	200
7	Investment expenses 7			
8	Prior period adjustments 8			
9	Other changes in net assets or fund balances (explain on Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B)) 10	5	93,	466
Pε	art XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		
		E	Yes	No
1	Accounting method used to prepare the Form 990:			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both.			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both.			
	X Separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on			
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2023)

### SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990 or Form 990-EZ.

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

20047

Open to Public Inspection

Name of the organization

Gallup Public Radio, Inc.

Employer identification number 85-0385909

P	Part Reason for Public Charity Status. (All organizations must complete this part.) See instructions.							
The	orga			t is: (For lines 1 through 12, chec			• ,	
1		A church, cor	nvention of churches, or asso	ciation of churches described in s	section 1	70(b)(1)( <i>A</i>	۸)(i).	
2	П	A school desc	cribed in section 170(b)(1)(A	)(ii). (Attach Schedule E (Form 9	90).)			
3	П			organization described in <b>section</b>		1)(A)(iii).		
4	П			n conjunction with a hospital desc			70(b)(1)(A)(iii). Enter the hospita	al's name.
		city, and state	· ·					
5		•		a college or university owned or o				
•	ш	_	b)(1)(A)(iv). (Complete Part I		por area s	, a goro		
6		•		ernmental unit described in <b>secti</b>	on 170(b	)(1)(A)(v)		
7	X		•	bstantial part of its support from a	•			
		-	section 170(b)(1)(A)(vi). (Co		3 - 3		3	
8		A community	trust described in section 17	'0(b)(1)(A)(vi). (Complete Part II.	)			
9	П			ribed in section 170(b)(1)(A)(ix)		n conjunc	tion with a land-grant college	
		-	_	agriculture (see instructions). Ent				
		university:						
10		-	• , ,	more than 33 1/3% of its support				
			•	t functions, subject to certain exc		` '		
				unrelated business taxable incor 1975. See <b>section 509(a)(2).</b> (C			1 tax) from businesses	
44			•	* * * * * * * * * * * * * * * * * * * *	•	,	\(\lambda\)	
11	Н			clusively to test for public safety.				
12	Ш	•		clusively for the benefit of, to performs described in section 509(a)(1)				
				ribes the type of supporting organ				30K
	а		-	rated, supervised, or controlled by		-		
	_			er to regularly appoint or elect a m		Ū	( / : )	
			• , , ,	mplete Part IV, Sections A and				
	b	Type II.	A supporting organization sup	ervised or controlled in connectio	n with its	supported	l organization(s), by having	
		control or	management of the supporting	ng organization vested in the sam	e persons	that cont	rol or manage the supported	
		organizati	ion(s). You must complete I	Part IV, Sections A and C.				
	С			upporting organization operated in				
				uctions). You must complete Pa				
	d			. A supporting organization opera				
				organization generally must satisf ust complete Part IV, Sections	-			
	е			ved a written determination from t				
	C			functionally integrated supporting			ype i, Type ii, Type iii	
	f		nber of supported organization		_			
	g	Provide the fo	llowing information about the					
(i	) Nam	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	rganization	(v) Amount of monetary	(vi) Amount of
	or	ganization		(described on lines 1–10	-	ır governing	support (see	other support (see
				above (see instructions))		ment?	instructions)	instructions)
<b>/A</b> >					Yes	No		
(A)								
<b>(D)</b>								
(B)								
(C)								
(D)								
(D)								
/E\								
(E)								
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Schedule A (Form 990) 2023

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support	<sub>1</sub> <b>,</b>		,		,	
Caler	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	435,363	181,979	219,549	223,519	228,905	1,289,315
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	94,200	94,200	94,200	94,200	94,200	471,000
<b>4 5</b>	Total. Add lines 1 through 3  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)	529,563	276,179	313,749	317,719	323,105	1,760,315
6	Public support. Subtract line 5 from line 4						1,760,315
Sec	tion B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	529,563	276,179	313,749	317,719	323,105	1,760,315
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	679	342	542	11,727	22,313	35,603
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			175	37	13	225
11	Total support. Add lines 7 through 10						1,796,143
12	Gross receipts from related activities, etc. (s	see instructions)				12	6,880
13	First 5 years. If the Form 990 is for the org	anization's first, seco	ond, third, fourth, o	r fifth tax year as a	section 501(c)(3)		
	organization, check this box and stop here						
Sec	tion C. Computation of Public S	• •					
14	Public support percentage for 2023 (line 6,			))		14	98.01%
15	Public support percentage from 2022 Scheo						99.23%
16a	<b>33 1/3% support test — 2023.</b> If the organ				/3% or more, check	this	
	box and <b>stop here.</b> The organization qualifi-		_				X
b	33 1/3% support test — 2022. If the organ						
	this box and <b>stop here.</b> The organization qu						L
17a	10%-facts-and-circumstances test — 202	_				S	
	10% or more, and if the organization meets				•		
	Part VI how the organization meets the facts	s-and-circumstances	test. The organiza	ition qualifies as a p	oublicly supported		
	organization						L
b	10%-facts-and-circumstances test — 202	=					
	15 is 10% or more, and if the organization n		-				
	in Part VI how the organization meets the fa		· ·	'	, , , , ,		
10	organization						L
18	<b>Private foundation.</b> If the organization did						
	instructions						L

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### 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.)

*	quality under	ine lesis listeu	below, please	complete Fart	11.)	
	(a) 2019	(b) 2020	(c) 2021	(4) 2022	(a) 2023	(f) Total
	(a) 2019	(b) 2020	(6) 2021	(u) 2022	(e) 2023	(I) Total
received. (Do not include any "unusual grants.")						
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						
Gross receipts from activities that are not an unrelated trade or business under section 513						
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
The value of services or facilities furnished by a governmental unit to the organization without charge						
Total. Add lines 1 through 5						
Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
tion P. Total Support						
	(a) 2010	(b) 2020	(a) 2021	(4) 2022	(a) 2022	(f) Total
, , , , ,	(a) 2019	( <b>b)</b> 2020	(C) 2021	(a) 2022	(e) 2023	(I) Total
payments received on securities loans, rents, royalties, and income from similar sources						
section 511 taxes) from businesses						
Add lines 10a and 10b						
Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
Total support. (Add lines 9, 10c, 11,						
First 5 years. If the Form 990 is for the organization	anization's first, sec	cond, third, fourth, o	or fifth tax year as a	section 501(c)(3)		
organization, check this box and stop here						
Public support percentage for 2023 (line 8, o	column (f), divided	by line 13, column (	(f))		15	%
					16	%
			olumn (f))			%
						%
			ution on a publicly o	runnorted organizat	ion	
17 is not more than 33 1/3%, check this box	-	-				
17 is not more than 33 1/3%, check this box 33 1/3% support tests — 2022. If the orgal line 18 is not more than 33 1/3%, check this	nization did not che	eck a box on line 14	or line 19a, and lin	e 16 is more than 3	3 1/3%, and	
	dar year (or fiscal year beginning in)  Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  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.  Gross receipts from activities that are not an unrelated trade or business under section 513  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 5  Amounts included on lines 1, 2, and 3 received from disqualified persons  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  Public support. (Subtract line 7c from line 6.)  Etion B. Total Support  Indar year (or fiscal year beginning in)  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  Total support. (Add lines 9, 10c, 11, and 12.)  First 5 years. If the Form 990 is for the organization, check this box and stop here effor C. Computation of Public Sipublic support percentage from 2022 Scheetion D. Computation of Investment income percentage from 2022 Scheetion D. Computation of Investment income percentage from 2022 Scheetion D. Computation of Investment income percentage from 2022 Scheetion D. Computation of Investment income percentage from 2022 Scheetin D. Computation of Investment income percentage from 2022 Sch	cition A. Public Support Indar year (or fiscal year beginning in)  Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')  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  Gross receipts from activities that are not an unrelated trade or business under section 513  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 5  Amounts included on lines 2 and 3 received from disqualified persons  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  Public support. (Subtract line 7c from line 6.)  Ition B. Total Support  Indar year (or fiscal year beginning in)  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royallies, and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  Total support. (Add lines 9, 10c, 11, and 12.)  First 5 years. If the Form 990 is for the organization's first, sec organization, check this box and stop here  Ition C. Computation of Public Support Percei  Public support percentage for 2023 (line 10c, column (f), clivided Public support percentage for 2023 (line 10c, column (f), clivided Public support percentage for 2023 (line 10c, column (f), clivided Public support percentage for 2023 (line 10c, column (f), clivided Public support percentage for 2023 (line 10	cition A. Public Support  dar year (or fiscal year beginning in)  Gifts, grants, contributions, and membership fees sold or services performed, or facilities sold or services performed, or facilities furnished in any activity that is related to the organization's fave-exempt purpose  Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 5  Amounts included on lines 1, 2, and 3 received from disqualified persons  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  Public support. (Subtract line 7c from line 6.)  Total Support  dar year (or fiscal year beginning in)  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalities, and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses activities not included on line 10b, whether or not the business is regularly carried on .  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  Total support. (Add lines 9, 10c, 11, and 12.)  First 5 years. If the Form 990 is for the organization's first, second, third, fourth, organization, check this box and stop here  tition D. Computation of Public Support Percentage  Public support percentage from 2023 (line 8, column (f), divided by line 13, column (f), divided by line 13, column (f), divided by line 13, column (f), divided by line 17, linestment income percentage from 2023 (line 10c, column (f), divided by line 13, column (f), divided by line 17, linestment income percentage from 2025 Schedule A, Part III, line 17	Rion A. Public Support  Idar year (or fiscal year beginning in)  Gins, grants, combibutions, and membeship fees received. (Do not include any "musual grants.")  Gross receipts from admissions, merchandise sold of services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.  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.  Gross receipts from admissions under section 513  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization's theorem of the program of the	tition A. Public Support  dar year (or fiscal year beginning in)  (a) 2019  (b) 2020  (c) 2021  (d) 2022  (e) 2021  (d) 2022  (d) 2022  (d) 2022  (e) 2021  (e) 2021  (f) 2022  (g) 2021  (g) 2022  (g) 2021  (g) 2022  (g) 2023  (g) 2024  (g) 2024  (g) 2024  (g) 2025  (g) 2026  (g) 2026  (g) 2026  (g) 2027  (g) 2026  (g) 2027  (g) 2027  (g) 2028  (g) 2028	office greats contributions, and membership fees received. Do not include any furnase grants 1 (d) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (fits, greats contributions, and membership fees received. Do not include any furnase grants 1 (do not include any furnase) grants 1 (do not include any furnase) grants 1 (do not include any furnase) grants 1 (do not include any activity that is related to the organization shorement purpose of a great g

Schedule A (Form 990) 2023

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

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

### Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 10a 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Voc	No
>>>>>>>	Yes	No
1		000000000000
		**********
_		************
3a	*********	***********
00000000	80303030303	000000000000000000000000000000000000000
3b		
_	200000000000	000000000000
3c		
000000000	,cccc6066666	000000000000000
4a		
	9999999	
4b		
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9a	00000000000	100000000000000000000000000000000000000
9b		
	000000000000000000000000000000000000000	300000000000000000000000000000000000000
9с		
10a		
10b		
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Par	til Supporting Organizations (continued)			
		F	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
<u>C4</u>	provide detail in Part VI.	11c		
Sect	on B. Type I Supporting Organizations		.,	·
	Did the annual peak, annual and the annual peak, officers exting in their official constitutions are being a sur-	20000000	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 <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	3333333		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	888888888 1	33333333333	888888888888888888888888888888888888888
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 <b>Part</b>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		0000000000000
Sect	ion C. Type II Supporting Organizations		<u>I</u>	
	71 11 0 0		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			
		F0000000	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	000000000000000000000000000000000000000	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b>	6666666		
	how the organization maintained a close and continuous working relationship with the supported organization(s).	2	000000000000000000000000000000000000000	100000000000000000000000000000000000000
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 <b>Part VI</b> the role the organization's	3		100000000000000000000000000000000000000
Sect	supported organizations played in this regard. 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).			
· a	The organization satisfied the Activities Test. <i>Complete line 2 below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions)	ions).		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a	00000000000	10000000000
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b	ĺ	

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

Schedu	ule A (Form 990) 2023 Gallup Public Radio, Inc.		85-0385	909	Page <b>6</b>
Par	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	aniz	ations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20	), 1970	(explain in <b>Part VI</b> ). <b>See</b>		
	instructions. All other Type III non-functionally integrated supporting organizations must co	mplete	Sections A through E.		
Sect	ion A – Adjusted Net Income		(A) Prior Year	(B) Currer (option	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or collection				
	of gross income or for management, conservation, or maintenance of				
	property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B – Minimum Asset Amount		(A) Prior Year	(B) Currer (option	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
a	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
c	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in <b>Part VI</b> ):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C – Distributable Amount			Current	Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-functionally integrated Type	e III su	pporting organization		

Schedule A (Form 990) 2023

(see instructions).

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Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 3 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required—provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 7 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. Distributable amount for 2022 from Section C, line 6 9 9 10 Line 8 amount divided by line 9 amount 10 (i) (ii) (iii) Section E – Distribution Allocations (see instructions) **Excess Distributions** Underdistributions Distributable Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 2 Underdistributions, if any, for years prior to 2023 (reasonable cause required-explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023 a From 2018. **b** From 2019 ... **c** From 2020 ..... **d** From 2021 ..... e From 2022 ..... f Total of lines 3a through 3e **g** Applied to underdistributions of prior years **h** Applied to 2023 distributable amount i Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2023 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2023 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2024. Add lines 3j and 4c. Breakdown of line 7: a Excess from 2019. c Excess from 2021 ... d Excess from 2022 . .

Schedule A (Form 990) 2023

e Excess from 2023.

Schedule A (For Part VI	Supplemental III, line 12; Part B, lines 1 and 2	Information. Provi IV, Section A, lines ; Part IV, Section C	s 1, 2, 3b, 3c, 4b, 4c, 5 5, line 1; Part IV, Sect	equired by Part II, li 5a, 6, 9a, 9b, 9c, 11 ion D, lines 2 and 3;	ne 10; Part II, line 17a or 17b; P a, 11b, and 11c; Part IV, Sectio Part IV, Section E, lines 1c, 2a	n , 2b,
			Section B, line 1e; Par s part for any additior		s 5, 6, and 8; and Part V, Section instructions.)	n E,
Part I		- Other Inco		,	,	
			\$	225		
•			<b></b>			
•						

DAA Schedule A (Form 990) 2023

# Schedule B (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

### Schedule of Contributors

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

OMB No. 1545-0047

**Employer identification number** 

2023

85-0385909 Gallup Public Radio, Inc. Organization type (check one): Filers of: Section: Form 990 or 990-EZ **X** 501(c)( 3 ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules X** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or

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

16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

"N/A" in column (b) instead of the contributor name and address), II, and III.

Schedule B (Form 990) (2023)

Page 2

Name of organization

Gallup Public Radio, Inc.

Employer identification number 85-0385909

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
1	Corporation for Public Broadcasting 401 Ninth Street NW  Washington DC 20004-2129	\$ 192,344	Person X Payroll Noncash (Complete Part II for noncash contributions.)					
(a)	(b)	(c)	(d)					
No.	Name, address, and ZIP + 4 University of New Mexico	Total contributions	Type of contribution					
. 2	Gallup Campus 705 Gurley Avenue  Gallup NM 87301	\$ 94,200	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a)	(b)	(c)	(d)					
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a)	(b)	(c)	(d)					
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					

Page 3

Name of organization

Gallup Public Radio, Inc.

Employer identification number 85-0385909

Part II	Noncash Property (see instructions). Use duplicate	e copies of Part II if additional spa	ace is needed.
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	Donated space	\$ 94,200	
(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
		\$	

### 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.

2023

Inspection

Name of the organization Employer identification number Gallup Public Radio, Inc. 85-0385909 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 4 Aggregate value at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements ..... 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included on line 2a 2c d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X......

Pa	rt III Organizations Maintaining	Collections of	f Art, F	listorical T	reasures	, or Othe	r Sim	ilar <i>F</i>	ssets	(conti	пиеа	')
3	Using the organization's acquisition, accession collection items (check all that apply).	, and other records, o	check an	y of the followi	ng that make	significant u	ise of its	3				
а	Public exhibition	d 🗌	Loan or e	exchange prog	ram							
b	Scholarly research	е 🗌	Other									
С	Preservation for future generations											
4	Provide a description of the organization's collection	ctions and explain ho	w they fo	urther the orga	nization's exe	empt purpose	e in Par	t				
	XIII.											
5	During the year, did the organization solicit or re											1
	assets to be sold to raise funds rather than to b		of the or	ganization's co	ollection?					Ye	s	No
Pa	irt IV Escrow and Custodial Arra	•		000 B		•				_		
	Complete if the organization	answered "Yes	on Fo	orm 990, Pa	art IV, line	9, or rep	orted	an ar	nount	on For	m	
	990, Part X, line 21.											
1a	Is the organization an agent, trustee, custodian											1 <b></b> .
	included on Form 990, Part X?									Ye	s	No
D	If "Yes," explain the arrangement in Part XIII and	a complete the follow	ing table	).			ſ			Amount		
	Device helene						•	4.		Amoun		
С	Beginning balance							1c				
a	Additions during the year							1d				
e	Distributions during the year							1e				
1	Ending balance							1f				
	Did the organization include an amount on Forn											No
	If "Yes," explain the arrangement in Part XIII. Clust V Endowment Funds	neck nere if the expia	anation n	as been provid	led on Part XI	III						
. Fd	**********	anawarad "Vaa	" on E		ort IV/ line	10						
	Complete if the organization						(-I) Th		la a a la	(-) F		1.
		(a) Current year	(D)	Prior year	(c) Two yea	ars back	(a) IIII	ee years	Dack	(e) Four	years t	ack
	Beginning of year balance											
	Contributions											
С	Net investment earnings, gains, and											
	losses											
	Grants or scholarships											
е	Other expenditures for facilities and											
	programs											
	Administrative expenses											
_	End of year balance											
2	Provide the estimated percentage of the current	•	ne 1g, co	olumn (a)) held	las:							
	Board designated or quasi-endowment	%										
	Permanent endowment %											
С	Term endowment %	1 1 1 2 2 2 7										
٥-	The percentages on lines 2a, 2b, and 2c should	•										
За	Are there endowment funds not in the possessi	on of the organization	n that are	e neid and adm	ninistered for	tne				ſ	V	N1 -
	organization by:									0-(1)	Yes	No
	(i) Unrelated organizations?									3a(i)		
	(ii) Related organizations?									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization									3b		
4 	Describe in Part XIII the intended uses of the or		nent func	ls.								
На	rt VI Land, Buildings, and Equi		" F	000 D	IV I !:	11- 0			Dt	V !!	10	
	Complete if the organization			-	-				, rart	•		
	Description of property	(a) Cost or other b	asis	(b) Cost or o			cumulate	1		(d) Book	value	
		(investment)		(othe	<i>□</i> 1 <i>)</i>	uepi	reciation	0000000000	8			
1a	Land	-			10 000		····	OF	<u>:</u>		2	1 / /
b	Buildings				10,000			856	,		۷,	144
	Leasehold improvements				04 000		20	604	,	1	56 '	206
	Equipment				94,980		36	694	*		56,2	400
	Other		line 10	ookuma (D))						ı	58,	130
ı otal	I. Add lines 1a through 1e. (Column (d) must equ	ıaı rurin 990, Part X	, iirie 100	:, соштп (В))					1		, 0, 1	±⊃U

Schedule D (Fo	orm 990) 2023 Gallup Public Radio, I	nc.	85-0385909	Page <b>3</b>
Part VII	Investments – Other Securities  Complete if the organization answered "Yes" on I	Form 990, Part IV	, line 11b. See Form 990,	Part X, line 12.
	(a) Description of security or category	(b) Book value	(c) Method of	
	(including name of security)		Cost or end-of-yea	r market value
(1) Financial d	erivatives			
	d equity interests			
(A)				
(B)				
(D)				
(E)				
(F)				
(C)				
(H)				
	n (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments – Program Related		<u> </u>	
*****************	Complete if the organization answered "Yes" on	Form 990. Part IV.	line 11c. See Form 990. I	Part X. line 13.
	(a) Description of investment	(b) Book value	(c) Method of	
	,	` '	Cost or end-of-yea	
(1)			•	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8) (9)				
	n (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets			
	Complete if the organization answered "Yes" on	Form 990, Part IV	, line 11d. See Form 990, l	
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, line 15, col. (B))			
Part X	Other Liabilities			
	Complete if the organization answered "Yes" on line 25.	Form 990, Part IV	, line 11e or 11f. See Form	1 990, Part X,
1.	(a) Description of liability			(b) Book value
(1) Federal i	ncome taxes			
	oll Liabilities			293
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, line 25, col. (B))			293
	uncertain tax positions. In Part XIII, provide the text of the footnote	to the organization's fin	ancial statements that reports the	
	7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -	J		

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

Sche	dule D (Form 990) 2023 Gallup Public	<u>c Radio, Inc.</u>		85-038590	9	Page <b>4</b>
Pá	rt XI Reconciliation of Revenue per	<b>Audited Financial Statem</b>	nents With	Revenue per Re	eturn	
	Complete if the organization answ	wered "Yes" on Form 990,	Part IV, line	12a.		
1	Total revenue, gains, and other support per audited fin	iancial statements			1	345,431
2	Amounts included on line 1 but not on Form 990, Part					
а	Net unrealized gains (losses) on investments		2a			
b	Donated services and use of facilities		2b			
С	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII.)		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1				3	345,431
4	Amounts included on Form 990, Part VIII, line 12, but					
а	Investment expenses not included on Form 990, Part \	VIII, line 7b	4a			
b	Other (Describe in Part XIII.)		4b		::::::::::::::::::::::::::::::::::::::	
С					4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Fo	,			5	345,431
P	rt XII Reconciliation of Expenses per				Return	
	Complete if the organization answ		Part IV, line	12a.		
1	Total expenses and losses per audited financial statem	nents			1	343,115
2	Amounts included on line 1 but not on Form 990, Part	IX, line 25:				
а	Donated services and use of facilities		2a	94,200		
b	Prior year adjustments		2b		00000000 00000000	
С	Other losses		2c			
d	Other (Describe in Part XIII.)		2d			
е	Add lines 2a through 2d				2e	94,200
3	Subtract line <b>2e</b> from line <b>1</b>				3	248,915
4	Amounts included on Form 990, Part IX, line 25, but no	ot on line 1:				
а	Investment expenses not included on Form 990, Part \					
b	Other (Describe in Part XIII.)		4b			
С	Add lines 4a and 4h				4c	

### Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line

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

#### Part X - FIN 48 Footnote

Gallup Public Radio annually evaluates all federal and state income tax positions. This process includes an analysis of whether these income tax positions the Organization takes meet the definition of an uncertain tax position under the Income Taxes Topic of the Financial Accounting Standards Codification. As of September 30, 2024, there were no uncertain tax positions noted. Gallup Public Radio's policy is to classify income tax penalties and interest, when applicable, according to their natural classification. Under the statute of limitations, Gallup Public Radio's tax returns are no longer subject to examination by tax authorities for years prior to 2021.

248,915

Schedule D (Fo	rm 990) 2023	Gallup 1	Public	Radio,	Inc.	85-0385909	Page <b>5</b>
Part XIII	Supplemen	Gallup 1 Ital Informat	ion (contir	nued)			
	опристо.		(00//////				

### SCHEDULE M (Form 990)

### **Noncash Contributions**

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

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

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number Gallup Public Radio, Inc. 85-0385909 Types of Property Part I (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art — Works of art ..... 1 Art — Historical treasures ..... 2 Art — Fractional interests ..... 3 Books and publications ..... 4 5 Clothing and household goods Cars and other vehicles ..... 6 7 Boats and planes Intellectual property ..... 8 Securities — Publicly traded ...... 9 Securities — Closely held stock .... 10 Securities — Partnership, LLC, 11 or trust interests ..... Securities — Miscellaneous ...... 12 13 Qualified conservation contribution — Historic structures Qualified conservation 14 contribution — Other ..... Real estate — Residential ..... 15 Real estate — Commercial ...... 16 Real estate — Other ..... 17 Collectibles 18 Food inventory ..... 19 Drugs and medical supplies ...... 20 21 Taxidermy Historical artifacts 22 Scientific specimens ..... 23 Archeological artifacts ..... 24 94,200 X 1 25 Other (\_\_\_\_\_\_) 26 Other (\_\_\_\_\_) 27 Other (\_\_\_\_\_) 28 Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part V, Donee Acknowledgement 29 Yes No During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? X **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard X 31 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a

contributions?

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

32a

X

b

If "Yes," describe in Part II.

describe in Part II.

Schedule M (Foi	rm 990) 2023 Gallup Public Radio, Inc. 85-0385909 Page 2
Part II	<b>Supplemental Information.</b> Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

# SCHEDULE O (Form 990)

### Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

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

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

Open to Public Inspection

Employer identification number

Gallup Public Radio, Inc. 85-0385909 Form 990 - Organization's Mission KGLP's primary mission is to provide a radio service that encourages intellectual curiosity and critical analysis. KGLP's mandate is to provide for the otherwise un-served tastes and interests of the public in the Gallup area and to present materials that challenges the mind, provokes thought, broadens views and educates the whole person. Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 Management and selected members of the Board will review this document prior to submission to the Internal Revenue Service. Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy Board members are required to report any potential conflicts of interest and recuse themselves from decisions involving the conflict. Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Documents are made available upon written request. Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Adjustment of PY net assets to audit 0

Form **4562** 

Department of the Treasury Internal Revenue Service

### **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

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

OMB No. 1545-0172

ttachment equence No. 179

Name(s) shown on return Identifying number Gallup Public Radio, Inc. 85-0385909 Business or activity to which this form relates Indirect Depreciation **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 1,160,000 1 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,890,000 3 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions ....... 5 (b) Cost (business use only) (a) Description of property 6 Listed property. Enter the amount from line 29 7 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 9 Carryover of disallowed deduction from line 13 of your 2022 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 ... 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions Property subject to section 168(f)(1) election 15 15 9,238 Other depreciation (including ACRS) MACRS Depreciation (Don't include listed property. See instructions.) Section A MACRS deductions for assets placed in service in tax years beginning before 2023 256 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction placed in (business/investment use service only-see instructions) 19a 3-year property b 5-year property C 7-year property 10-year property 15-year property 20-year property 25-year property 25 yrs. S/I Residential rental 27.5 yrs. MM S/L property 27.5 yrs. MM S/L MM S/L 39 yrs. i Nonresidential real property MM S/L Section C—Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life S/I 12-year S/L 12 yrs. С 30-year 30 yrs. MM S/L 40-year MM S/L 40 yrs. Part IV **Summary** (See instructions.) Listed property. Enter amount from line 28 21 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 9,494 here and on the appropriate lines of your return. Partnerships and S corporations—see instructions ...... For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

3000 Gallup Public Radio, Inc. 85-0385909

FYE: 9/30/2024

# Federal Asset Report Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior 6	MACRS: Remodeling Bldg	2/14/03 _	10,000		10,000 10,000	39 MM S/L	7,600 7,600	256 256
Other 5 7 10 11 12 13 14	Depreciation:  2 Audio Vault Workstations Counter Top & Rack Solid State FM Broadband Front Panel Frequ Studio Tranmitter Link Sys-Horizon 1 Zero-Glitch Power Module Heat Pump Trillic VI Easy Cap 4030 EAS Encoder Total Other Depreciation	10/01/13 4/16/03 enel/23/18 10/16/21 7/19/23 7/05/24 12/12/23	10,740 2,305 7,485 25,697 39,497 5,694 3,562 94,980		10,740 2,305 7,485 25,697 39,497 5,694 3,562 94,980	7 MO S/L 5 MO S/L 5 MO S/L 20 MO S/L 7 MO S/L 7 MO S/L	10,740 2,305 5,803 10,279 329 0 0 29,456	0 0 1,497 5,139 1,975 203 424 9,238
	Total ACRS and Other Deprec	riation _	94,980		94,980		29,456	9,238
	Grand Totals Less: Dispositions and Transfe Less: Start-up/Org Expense Net Grand Totals	rs  =	104,980 0 0 104,980		104,980 0 0 104,980		37,056 0 0 37,056	9,494 0 0 9,494

3000 Gallup Public Radio, Inc. 85-0385909

FYE: 9/30/2024

## NM Asset Report Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	NM Prior	NM Current	Federal Current	Difference Fed - NM
Prior 6	MACRS: Remodeling Bldg	2/14/03 _	10,000 10,000	10,000	7,600 7,600	256 256	256 256	0 0
Other 5 7 10 11 12 13 14	Depreciation:  2 Audio Vault Workstations Counter Top & Rack Solid State FM Broadband Front Panel Frequ Studio Tranmitter Link Sys-Horizon 1 Zero-Glitch Power Module Heat Pump Trillic VI Easy Cap 4030 EAS Encoder	10/01/13 4/16/03 enel/23/18 10/16/21 7/19/23 7/05/24 12/12/23	10,740 2,305 7,485 25,697 39,497 5,694 3,562	10,740 2,305 7,485 25,697 39,497 5,694 3,562	10,740 2,305 5,803 10,279 329 0	0 0 1,497 5,139 1,975 203 424	0 0 1,497 5,139 1,975 203 424	0 0 0 0 0 0 0 0
	Total Other Depreciation  Total ACRS and Other Depreciation  Grand Totals Less: Dispositions Less: Start-up/Org Expense	iation _	94,980 94,980 104,980 0 0	94,980 94,980 104,980 0 0	29,456 29,456 37,056 0 0	9,238 9,238 9,494 0 0	9,238 9,238 9,494 0 0	0 0 0 0
	Net Grand Totals	=	104,980	104,980	37,056	9,494	9,494	0

3000 Gallup Public Radio, Inc. 85-0385909

FYE: 9/30/2024

## AMT Asset Report Form 990, Page 1

Asset	Description	Date In Service	Cost	Sec 179Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Prior 6	MACRS: Remodeling Bldg	2/14/03 _	10,000 10,000	- -	10,000	39 MM S/L	7,600 7,600	256 256
Other 5 7 10 11 12 13 14	Depreciation:  2 Audio Vault Workstations Counter Top & Rack Solid State FM Broadband Front Panel Frequ Studio Tranmitter Link Sys-Horizon 1 Zero-Glitch Power Module Heat Pump Trillic VI Easy Cap 4030 EAS Encoder Total Other Depreciation	10/01/13 4/16/03 enel/23/18 10/16/21 7/19/23 7/05/24 12/12/23	0 0 0 0 0 0 0	- -	0 0 0 0 0 0 0	0 HY 0 HY 0 HY 0 HY 0 HY 0 HY 0 HY	0 0 0 0 0 0 0 0	0 0 0 0 0 0 0
	Total ACRS and Other Deprec	iation <u> </u>	0	=	0		7,600	0
	Grand Totals Less: Dispositions and Transfe Net Grand Totals	rs	10,000 0 10,000	- =	10,000 0 10,000		7,600 0 7,600	256 0 256

3000 Gallup Public Radio, Inc.

95-0385909 Depreciation Adjustment Report 03/30/2025 9:20 AM **All Business Activities** FYE: 9/30/2024 AMT Adjustments/ Preferences Form Unit Asset Description Tax AMT **MACRS Adjustments:** 6 Page 1 Remodeling Bldg 256 256 0 256 0 256

3000 Gallup Public Radio, Inc.
85-0385909 Future Depreciation Report FYE: 9/30/25

FVE: 9/30/2024 Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
Prior M	IACRS:				
6	Remodeling Bldg	2/14/03	10,000	257 257	257 257
Other D	Depreciation:				
5 7 10 11 12 13 14	2 Audio Vault Workstations Counter Top & Rack Solid State FM Broadband Front Panel Frequenc Studio Tranmitter Link Sys-Horizon 1 Zero-Glitch Power Module Heat Pump Trillic VI Easy Cap 4030 EAS Encoder Total Other Depreciation	10/01/13 4/16/03 4/23/18 10/16/21 7/19/23 7/05/24 12/12/23	10,740 2,305 7,485 25,697 39,497 5,694 3,562	0 0 185 5,140 1,975 814 509 8,623	0 0 0 0 0 0 0
	Total ACRS and Other Depreciation		94,980	8,623	0
	Grand Totals		104,980	8,880	257

3000 Gallup Public Radio, Inc. 85-0385909 NM Future Depreciation Report Form 990, Page 1

03/30/2025 9:20 AM FYE: 9/30/25

Asset	Description	Date In Service	Cost	NM
Prior M	ACRS:			
6	Remodeling Bldg	2/14/03	10,000	257 257
Other D	Depreciation:			
5 7 10 11 12 13 14	2 Audio Vault Workstations Counter Top & Rack Solid State FM Broadband Front Panel Frequenc Studio Tranmitter Link Sys-Horizon 1 Zero-Glitch Power Module Heat Pump Trillic VI Easy Cap 4030 EAS Encoder Total Other Depreciation	10/01/13 4/16/03 4/23/18 10/16/21 7/19/23 7/05/24 12/12/23	10,740 2,305 7,485 25,697 39,497 5,694 3,562	0 0 185 5,140 1,975 814 509
	Total ACRS and Other Depreciation		94,980	8,623
	Grand Totals		104,980	8,880

Form **990** 

33. Number of volunteers

Two Year Comparison Report

For calendar year 2023, or tax year beginning

10/01/23

09/30/24

, ending

13

2022 & 2023

Name

Taxpayer Identification Number

-					ĺ	17 -	
	a.	llup Public Radio, Inc.				85-0	385909
				2022	2023		Differences
	1.	Contributions, gifts, grants	1.	317,719	323	3,105	5,386
	2.	Membership dues and assessments	2.				
		Government contributions and grants	3.				
n e	4.	Program service revenue	4.				
_	5.	Investment income	5.	11,727	22	2,313	10,586
<b>&gt;</b>	6.	Proceeds from tax exempt bonds	6.				
Ве	7.	Net gain or (loss) from sale of assets other than inventory	7.				
	8.	Net income or (loss) from fundraising events	8.				
		Net income or (loss) from gaming					
		Net gain or (loss) on sales of inventory	10.				
		Other revenue	11.	37		13	-24
	12.	Total revenue. Add lines 1 through 11	12.	329,483	34	5,431	15,948
	13.	Grants and similar amounts paid	13.				
	14.	Benefits paid to or for members	14.				
Ø	15.	Compensation of officers, directors, trustees, etc.	15.	68,800	78	3,129	9,329
S	16.	Salaries, other compensation, and employee benefits	16.	32,720	38	3,145	5,425
e n	17.	Professional fundraising fees	17.				
α	18.	Other professional fees	18.	31,685	30	0,876	-809
Ш	19.	Occupancy, rent, utilities, and maintenance	19.	2,732		2,861	129
	20.	Depreciation and Depletion	20.	7,223		9,494	2,271
		Other expenses	21.	76,195		9,410	13,215
	22.	Total expenses. Add lines 13 through 21	22.	219,355	248	3,915	29,560
	23.	Excess or (Deficit). Subtract line 22 from line 12	23.	110,128		5,516	-13,612
	24.	Total exempt revenue	24.	329,483	34	5,431	15,948
	25.	Total unrelated revenue	25.				
G	26.	Total excludable revenue	26.	11,764		2,326	
nati	27.	Total assets	27.	597,906		2,975	
orn	28.	Total liabilities	28.	6,756		9,509	
Ē	29.	Retained earnings	29.	591,150	593	3,466	2,316
her	30.	Number of voting members of governing body	30.	7	6		
ō	31.	Number of independent voting members of governing body	31.	7	6		
		Number of employees	32.	2	3		
	1			10	10		

13

33.

Form **990** 

Name

## **Tax Projection Worksheet**

2023 & 2024

Taxpayer Identification Number

G	Sallup Public Radio, Inc.			85-	-0385909
	-		2023	2024	Differences
	1. Contributions, gifts, grants	1.	323,105	323,10	5
	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3.			
ne	4. Program service revenue	4.			
$\Box$	5. Investment income	5.	22,313	22,31	3
<b>v</b>	6. Proceeds from tax exempt bonds	6.			
Вe	7. Net gain or (loss) from sale of assets other than inventory	7.			
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11.	13		3
	12. Total revenue. Add lines 1 through 11	12.	345,431	345,43	1
	13. Grants and similar amounts paid	13.			
	14. Benefits paid to or for members	14.			
Ø	15. Compensation of officers, directors, trustees, etc.	15.	78,129	78,12	9
S	16. Salaries, other compensation, and employee benefits	16.	38,145	38,14	5
eп	17. Professional fundraising fees	17.			
α	18. Other professional fees	18.	30,876	30,87	
ш	19. Occupancy, rent, utilities, and maintenance	19.	2,861	2,86	
	20. Depreciation and Depletion	20.	9,494	9,49	
	21. Other expenses	21.	89,410	89,41	
	22. Total expenses. Add lines 13 through 21	22.	248,915	248,91	
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	96,516	96,51	
	24. Total exempt revenue	24.	345,431	345,43	1
	25. Total unrelated revenue	25.			
He	26. Total excludable revenue	26.	22,326	22,32	
0	27. Total assets	27.	602,975	602,97	
	28. Total liabilities	28.	9,509	9,50	
	29. Retained earnings	29.	593,466		6
	<b>30.</b> Number of voting members of governing body	30.	6	6	
	<b>31.</b> Number of independent voting members of governing body	31.	6	6	
	32. Number of employees	32.	3	3	
	33. Number of volunteers	33.	13	13	

Form <b>990</b>		Тах	Tax Return History			2023
Name Gallup Puk	Gallup Public Radio, Inc.				Employer 85–(	Employer Identification Number 85–0385909
	2019	2020	2021	2022	2023	2024
Contributions, gifts, grants			219, 549	317,719	323, 105	323,105
Membership dues						
Program service revenue			6, 867			
Capital gain or loss						
Investment income			542	11,727	22,313	22,313
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue			175	37	13	13
Total revenue			227,133	329, 483	345, 431	345,431
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.			66,940	68,800	78,129	78,129
Other compensation			46,000	•	-	/
Professional fees				31,685	30,876	30,876
Occupancy costs				2,732	2,861	2,861
Depreciation and depletion	1,754		6, 892	7,223	9,494	9, 494
Other expenses				76,195	89,410	
Total expenses	1,754		_	219,355	, 91	, 91
Excess or (Deficit)	-1,754		-15, 572	110,128	96,516	96,516
Total exempt revenue			219.549	329.483	345.431	345.431
Total unrelated revenue						
Total excludable revenue			6, 867	11,764	22,326	22,326
Total Assets	9,341		586, 496	597, 906	602, 975	602,975
Total Liabilities			8, 276	6,756	605′6	9, 209
Net Fund Balances	218,095		578,220	591,150	593, 466	593,466

3000 Gallup Public Radio, Inc.

85-0385909 FYE: 9/30/2024

## **Federal Statements**

3/30/2025 9:21 AM

**Taxable Interest on Investments** 

Description

Unrelated Exclusion Postal Acquired after US
Business Code Code 6/30/75 Obs (\$ or %)

Interest Income

Total

\$ 22,313 \$ 22,313

Amount

14