Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ 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.

Α	For the 2	021 calend	dar year, or tax year beginning	07/01/2021	and endin	g	06/30/2	2022	-				
В	Check if a	oplicable:	C Name of organization MID-SOU	TH PUBLIC COMMUN	IICATIONS FOUN	DATIO	N	D Empl	oyer identification	number			
	Address cl	hange	Doing business as WKNO TV F	M					62-0525567				
$\overline{\Box}$	Name chai	Ĭ	Number and street (or P.O. box if		reet address)	Roon	n/suite	E Telepl	hone number				
\exists	Initial retur	Ĭ	7151 Cherry Farms Road		,				901-458-2521				
H		'' /terminated	City or town, state or province, co	untry and ZIP or foreign	nostal code				701 100 2021				
H			Cordova, TN 38016	and 211 of foreign	postar code			G Gross	receints \$ 5	5,857,964			
\vdash	Amended		F Name and address of principal offi	oor: Charles Mal arty			H(a) la thia a ar	G Gross receipts \$ 5,857,964 H(a) Is this a group return for subordinates? Yes No					
Ш	Application	n penaing		_			1		es included? Y	=			
_	Tay ayamı	at atatua:	7151 Cherry Farms Rd, Cordo 501(c)(3) 501(c) (va, 11\ 38016) ◀ (insert no.)	4947(a)(1) or 52	7	1			es 🗀 No			
÷	Tax-exemp) (Insert no.)	4947(a)(1) Or 52	: 1	+		ee instructions.				
		► wkno.o		Doub	1 //		H(c) Group e						
_			Corporation Trust Associat	tion	L Year of fo	ormation	: 1953	M State	of legal domicile:	TN			
F	art I	Summa	•	:f:									
4			cribe the organization's missi							on is a			
Activities & Governance		non-profit corporation created for the purpose of enhancing the educational and cultural opportunities of the community through the development, ownership, and operation of non-commercial radio and television stations.											
ma		-											
Ne.			box ► ☐ if the organization	•	•			1	its net assets.				
Ğ			voting members of the gover		•			3		11			
⊗ v			independent voting member	_		-		4		11			
ij.			per of individuals employed in	•	•			5		42			
ξ			per of volunteers (estimate if r	• •				6		35			
Ă			ated business revenue from F					7a		35,531			
	b N	let unrelat	ted business taxable income	from Form 990-T, P	art I, line 11 .			7b		0			
							Prior Yea	r	Current Ye	ar			
ø	8 0	Contributio	ons and grants (Part VIII, line ⁻	1h)			5,9	85,530	4	,920,440			
Revenue	9 F	rogram se	ervice revenue (Part VIII, line 2		82,232		55,325						
ě	10 lr	nvestment	t income (Part VIII, column (A)	income (Part VIII, column (A), lines 3, 4, and 7d)									
<u> </u>	11 (Other reve	nue (Part VIII, column (A), line	s 5, 6d, 8c, 9c, 10c	and 11e)		6	94,317		516,384			
	12 T	otal reven	ue-add lines 8 through 11 (m	nust equal Part VIII, c	olumn (A), line 12	2)	6,8	80,659	5	5,625,214			
	13 (arants and	d similar amounts paid (Part I)	K, column (A), lines	1–3)			0		0			
	14 E	Benefits pa	aid to or for members (Part IX	0		0							
S	4- 0		her compensation, employee b				2,1	27,156	2	2,048,700			
Expenses	16 a F		al fundraising fees (Part IX, co	•		. —		66,639	63,824				
e d	b T		raising expenses (Part IX, colu	, ,	654,540	5							
ũ	17		enses (Part IX, column (A), line				2.9	17,827	2	2,800,234			
		•	nses. Add lines 13–17 (must e		•			11,622		,912,758			
		-	ess expenses. Subtract line 18	•			•	69,037		712,456			
or es			•				inning of Curr		End of Ye				
ets	20 T	otal asset	ts (Part X, line 16)					73,070	12	2,894,247			
Net Assets or Fund Balances	21 T		ties (Part X, line 26)					22,101		54,913			
E E	22 N		or fund balances. Subtract li	ne 21 from line 20				50,969	12	2,839,334			
	art II		re Block					,,,,,,		10011001			
			, I declare that I have examined this r	eturn, including accompa	nving schedules and	stateme	ents, and to the	e best of	my knowledge and	belief it is			
			e. Declaration of preparer (other than						,	,			
_		<u> </u>											
Sig	an	Signatu	ure of officer				Date						
	ere		Davidson, Director of Finance										
•••			r print name and title										
_		,	preparer's name	Preparer's signature		Date		Ch - : '	☐ ;f PTIN				
Pa			- Fire and a manna			Jaio		Check self-emp	□ ''				
	eparer	Eirm's as	mo. •				Firms!						
Us	se Only	Firm's nan						EIN ►					
Ma	v the IDC	Firm's add	this return with the preparer s	shown above? See in	netructions		Phone	e no.	. Yes				
	-		ion Act Notice, see the separat				44000)/		_	No (2021)			
ror	raperwo	nk neauct	ION ACI NOLICE. SEE THE SEDARAT	LE INSTRUCTIONS.	(at. No.	11282Y		⊦orm S	/ 3U (2021)			

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	·
	Mid-South Public Communications Foundation is a non-profit corporation created for the purpose of enhancing the educational and cultural opportunities of the community through the development, ownership, and operation of non-commercial radio and
	television stations.
	Did the appropriation and other any similar at management and wing the appropriation and listed on the
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 936,026 including grants of \$ 0) (Revenue \$ 0)
	FM Radio - Produced and acquired programs for radio broadcast for the purpose of providing non-commercial classical music,
	local news programs, and national news services. We also provide air-time for local community and cultural organizations to
	discuss and promote their community programs and services.
4b	(Code:) (Expenses \$2,752,229 including grants of \$23,000) (Revenue \$55,325)
	Television Broadcasting - Produced and acquired programs for non-commercial, educational public television broadcasting, coordinated instructional literacy programs, and provided community information for the purposes of enhancing educational and
	cultural apportunities
	cuiturai opporturittes.
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
74	Other program services (Describe on Schedule O.)
4d	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
4e	Total program service expenses ► 3,688,255

21

orm 99	90 (2021)		ı	Page
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I			
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		-
7	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	~	
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		,
6	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	6		,
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		,
9	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? <i>If "Yes," complete Schedule D, Part IV </i>	9		,
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	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	11b		,
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		,
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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)? <i>If "Yes," complete Schedule D, Part X</i>	11e		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	_	
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	12b		,
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	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	14b		~
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		\ \
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		,
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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17	~	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	~	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		-
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

20b

Part I	V Checklist of Required Schedules (continued)			
			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		٧
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		~
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		٧
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
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 transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		\ \ \
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		٧
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		_
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
	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		\ \ \
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		~
	conservation contributions? If "Yes," complete Schedule M	30		/
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes,"</i>	31		~
	complete Schedule N, Part II	32		~
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? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		/
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
D	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? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		~
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		· ·
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	,	
Part		_ 33	. •	
	Check if Confedure O contains a response of note to any line in this fact v	• •	Yes	No
b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		

Part '	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 42			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	>	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	~	
	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 authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		_
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	~	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	~	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
_	required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	71 7g		
g h	If the organization received a contribution of qualified intellectual property, did the organization rife rorm 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
1.	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_	the organization is licensed to issue qualified health plans			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14a 14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	. 70		
-	excess parachute payment(s) during the year?	15		~
	If "Yes," see the 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?	16		~
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 11 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. Enter the number of voting members included on line 1a, above, who are independent . 1b 11 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 1 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a 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 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a 1 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 14 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? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► MS, TN 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website Other (explain on Schedule O) ✓ Another's website ✓ Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 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 ▶ Scott Davidson, (901)729-8706

Part VI

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

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

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

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

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

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization no	r any relate	d org	aniz			ompe	ensa	ated any current	otticer, director,	or trustee.
					C)					
(A)	(B)	(do n	ot of		ition	e than o	ono	(D)	(E)	(F)
Name and title	Average					is both		Reportable	Reportable	Estimated amount
	hours per week	officer and a director/trustee)				or/trus	_	compensation from the	compensation from related	of other compensation
	(list any	Individual trustee or director	lns:	Officer	₹ e	Hig em	Former	organization (W-2/	organizations (W-2/	
	hours for	direc	litut	cer	Key employee	hest	mer	1099-MISC/	1099-MISC/	organization and
	related organizations	tor la	ona		oldt	ee cor		1099-NEC)	1099-NEC)	related organizations
	below	rust	Ē		yee	npe				
	dotted line)	ee	Institutional trustee			Highest compensated employee				
						ed				
Charles McLarty	40.00									
President & CEO	0.00	~		~	~	~		106,781	0	10,403
Dr Tyrone Burroughs	1.00									
Trustee	0.00	~						0	0	0
Jim Hartigan	1.00									
Trustee	0.00	~						0	0	0
Ward Mayer	1.00									
Trustee	0.00	~						0	0	0
Molly Wexler	1.00									
Trustee	0.00	~						0	0	0
Jim Rout	1.00									
Board Chairman	0.00	~						0	0	0
Carol Ross-Spang	1.00									
Trustee	0.00	~						0	0	0
Vincent Miraglia	1.00									
Trustee	0.00	~						0	0	0
Herman Morris Jr	1.00									
Trustee	0.00	~						0	0	0
Dave Edmonds	1.00									
Trusee	0.00	~						0	0	0
Dr Craig Esrael	1.00									
Board Vice-Chair	0.00			~				0	0	0
Paul Mattews	1.00									
Board Secretary	0.00			~				0	0	0
]								
	<u> </u>]								

Part	VII Section A. Officers, Directors,	Γrustees,	Key I	Em			s, an	d F	lighest Compe	nsated Emplo	yees (continued)
						C)					
	(A)	(B)	(do n	ot ch		ition mor	e than o	one	(D)	(E)	(F)
	Name and title	Average	box,	unles	ss pe	erson	is both	n an	Reportable	Reportable	Estimated amount of other
		hours per week			_	_	or/trus	T _	compensation from the	compensation from related	compensation
		(list any	Indiv	Insti	Officer	Key employee	High emp	Former		organizations (W-2/	from the
		hours for related	/idu:	tutic	ĕ	emp	lest	ner	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
		organizations	al tr	nal		oloy	Com		, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	
		below dotted line)	Individual trustee or director	Institutional trustee		ee	pen				
		action in to,	0	tee			Highest compensated employee				
							۵				
			-								
			-								
			1								
		 									
											
			1								
1b	Subtotal							>	106,781	0	10,403
С	Total from continuation sheets to Part							>			
d	Total (add lines 1b and 1c)							<u> </u>	106,781	0	.01.00
2	Total number of individuals (including bu		d to th	ose	e list	ted	above	e) w	ho received mor	e than \$100,000) of
	reportable compensation from the organi	ization >							1		1 1
_	D. I. I. I. I. I.										Yes No
3	Did the organization list any former of							mp	loyee, or nignes	st compensated	
	employee on line 1a? If "Yes," complete										3 /
4	For any individual listed on line 1a, is the organization and related organizations										
	individual	greater th	ан ф	150,	,000): 1	1 16	٥,	complete ochet	dule o loi suci	
5	Did any person listed on line 1a receive of	· · · · ·	···	nca	tion	fro.	m anı		rolated organizat	 tion or individua	4 🗸
3	for services rendered to the organization										5
Secti	on B. Independent Contractors				-			-			5 1
1	Complete this table for your five high	nest comp	ensati	ed	inde	ene	ndent	CC	ontractors that r	eceived more	than \$100,000 of
•	compensation from the organization. Rep										
	1 3 1							, -			
	(A) Name and business add	lress							(B) Description of serv	vices	(C) Compensation
None								\vdash	<u> </u>		
110110											
2	Total number of independent contractor							th	nose listed abov	e) who	
	received more than \$100,000 of compens	ation from	the or	gan	izat	ion	▶		0		

Page 8

Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	se or note to an	y line in this Pa	rt VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
is,	1a	Federated campaig	ns .		1a	0				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues			1b	0				
ည် ရု	С	Fundraising events			1c	0				
fts,	d	Related organization	ns .		1d	0				
ia gi	е	Government grants			1e	2,213,125				
ns, Sir	f	All other contribution	ns, gif	ts, grants,						
tio er		and similar amounts no	ot inclu	uded above	1f	2,707,315				
혈된	g	Noncash contribution								
a d		lines 1a-1f			1g	\$ 0				
Contributions, Gifts, Grants, and Other Similar Amounts	h	Total. Add lines 1a-	-1f .				4,920,440			
						Business Code				
Ce	2a	2a TV Contract Productions b Education Programs				513100	29,700	29,700	0	0
e Z	b					513100	25,625	25,625	0	0
gram Ser Revenue	С	-								
am	d									
g &	е									
Program Service Revenue	f	All other program se					0	0	0	0
_	g	Total. Add lines 2a-	-2f .			•	55,325			
	3	Investment income	(incl	uding divid	dends	s, interest, and				
		other similar amounts)			•	54,242	54,242	0	0	
	4	Income from investment of tax-exempt bor		ond proceeds ►	0	0	0	0		
	5	Royalties				🕨	700	700	0	0
				(i) Real		(ii) Personal				
	6a	Gross rents	6a	37	9,245	12,000				
	b	Less: rental expenses	6b		0	0				
	С	Rental income or (loss)	6с	37	9,245	12,000				
	d	Net rental income o	r (loss	s)		•	391,245	379,245	12,000	0
	7a	Gross amount from		(i) Securit	ies	(ii) Other				
		sales of assets		24	0 (4 4					
		other than inventory	7a	31	0,644	0				
ě	b	Less: cost or other basis								
Revenue		and sales expenses .	7b	23	1,821	0				
Ş		Gain or (loss)	7с	7	8,823	0				
	d	Net gain or (loss)				<u> </u>	78,823	78,823	0	0
Other	8a	Gross income from		ndraising						
0		events (not including		0						
		of contributions rep								
		1c). See Part IV, line			8a	17,610				
	b	Less: direct expens			8b	929				
	C	Net income or (loss)			g eve	nts >	16,681		0	16,681
	9a	Gross income f								
		activities. See Part I			9a	0				
		Less: direct expens			9b	0				
		Net income or (loss)			CTIVITIE	es >	0	0	0	0
	iua	Gross sales of ir returns and allowan		•	40	_				
					10a	0				
		Less: cost of goods			10b	0				
	С	Net income or (loss)	ırom	sales of in	vento		0	0	0	0
Sn	4.4					Business Code				
ee ne	11a	Art sales/misc incon				513100	3,367	3,367	0	0
scellaneo Revenue	b	Car donation income				513100	80,860	80,860	0	0
3è	C	Advertising revenue				513100	23,531	0	23,531	0
Miscellaneous Revenue	d	All other revenue					0	0	0	0
	e	Total reverse See			•	🕨	107,758	(50.510	05 501	44.65
	12	Total revenue. See	มนเบทร .			5,625,214	652,562	35,531	16,681	

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

	Check if Schedule O contains a response		FIII IIIIS FAIL IA .		<u> </u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .	0	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	-			
3	Grants and other assistance to foreign	0	0		
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0 187,516	0 46,879	93,758	46,879
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .	0	0	0	0
7	Other salaries and wages	1,573,942	1,141,895	126,185	305,862
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	20.427	00.005		0.740
9	Other employee benefits	38,637 120,851	23,035 79,365	6,854 22,216	8,748 19,270
10	Payroll taxes	127,754	82,099	22,996	22,659
11	Fees for services (nonemployees):		·		
а	Management	42,522	0	0	42,522
b	Legal	19,198	0	19,198	0
C	Accounting	101,215	0	101,215	0
d e	Lobbying	30,821 63,824	30,821	0	63,824
f	Investment management fees	03,824	0	0	03,824
g	Other. (If line 11g amount exceeds 10% of line 25, column	-	-	-	
	(A), amount, list line 11g expenses on Schedule O.) .	78,281	78,281	0	0
12	Advertising and promotion	3,141	3,141	0	01.000
13 14	Office expenses	213,157 55,682	57,100 34,658	64,077 11,430	91,980 9,594
15	Royalties	0	0	0	9,574
16	Occupancy	192,801	163,307	17,855	11,639
17	Travel	6,777	3,543	3,148	86
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	0	0	0	0
20 21	Interest	0	0	0	0
22	Depreciation, depletion, and amortization .	284,780	226,980	27,203	30,597
23	Insurance	15,567	7,962	6,719	886
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.)				
а	Utilities/Satellite Lines	208,785	208,785	0	0
b	Program Acquisition & Production	1,397,417	1,397,417	0	0
С	Maintenance & Repairs	150,090	102,987	47,103	0
d			-		
е	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24e	4,912,758	3,688,255	569,957	654,546
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)				

Part X Balance Sheet

		Check if Schedule O contains a response or	note	to any line in this Par	tX		
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			2,250,377	1	2,804,378
	2	Savings and temporary cash investments			0	2	
	3	Pledges and grants receivable, net			549,204	3	158,846
	4	Accounts receivable, net		[79,038	4	73,140
	5	Loans and other receivables from any current of trustee, key employee, creator or founder, substantially active or family members of any of these	antial	contributor, or 35%			
	•	controlled entity or family member of any of thes			0	5	0
	6	Loans and other receivables from other disqual under section 4958(f)(1)), and persons described				6	•
"	7			0	7	0	
Assets	7 8	Notes and loans receivable, net			0	8	0
Ass	9	Prepaid expenses and deferred charges			17,353	9	
'	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			17,353	9	21,137
	b	Less: accumulated depreciation			7,681,454	10c	7,641,982
	11	·		2,095,644		2,194,764	
	12	Investments—other securities. See Part IV, line 1		2/0/0/011	12		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	F		15		
	16	Total assets. Add lines 1 through 15 (must equa	ıl line	33)	12,673,070	16	12,894,247
	17	Accounts payable and accrued expenses			117,569	17	54,913
	18	Grants payable		[0	18	0
	19	Deferred revenue	4,532	19	0		
	20	Tax-exempt bond liabilities		0	20	0	
	21	Escrow or custodial account liability. Complete F			0	21	0
Liabilities	22	Loans and other payables to any current or trustee, key employee, creator or founder, substantially a strike as formula and the control of th	antial	contributor, or 35%			
iab		controlled entity or family member of any of thes	-	-	0		0
_	23	Secured mortgages and notes payable to unrela		· · · · · · · · · · · · · · · · · · ·	0		0
	24 25	Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, parties, and other liabilities not included on lines	payab	les to related third	0	24	0
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			122,101	26	54,913
nces		Organizations that follow FASB ASC 958, che and complete lines 27, 28, 32, and 33.	ck he	re ▶ ☑			
ala	27	Net assets without donor restrictions			10,456,359	27	10,957,839
J B	28				2,094,610	28	1,881,495
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 98 and complete lines 29 through 33.	58, ch	neck here ► □			
9 0	29	Capital stock or trust principal, or current funds				29	
et	30	Paid-in or capital surplus, or land, building, or eq	Juipm	ent fund		30	
ASS	31	Retained earnings, endowment, accumulated inc	come,	or other funds		31	
et 🖊	32				12,550,969	32	12,839,334
Z	33	Total liabilities and net assets/fund balances .			12,673,070	33	12,894,247

Par	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			~
1	Total revenue (must equal Part VIII, column (A), line 12)		5,62	5,214
2	Total expenses (must equal Part IX, column (A), line 25)		4,91	2,758
3	Revenue less expenses. Subtract line 2 from line 1		71:	2,456
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4		12,55	0,969
5	Net unrealized gains (losses) on investments		-42	2,233
6	Donated services and use of facilities		1	1,276
7	Investment expenses		-14	4,063
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain on Schedule O)			929
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))		12,83	9,334
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Other If the organization changed its method of accounting from a prior year or checked "Other," explain or Schedule O.	ī		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		~
Za	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	V	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	a 🗀		
	separate basis, consolidated basis, or both:			
	☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	f 🔲		
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .	2c	~	
	If the organization changed either its oversight process or selection process during the tax year, explain or Schedule O.	1		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		~
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** (2021)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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.

► Attach to Form 990 or Form 990-EZ.

Open to Public

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

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

MID-SOUTH PUBLIC COMMUNICATIONS FOUNDATION 62-0525567 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12a, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . Provide the following information about the supported organization(s). (iii) Type of organization (i) Name of supported organization (ii) EIN (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D)

(E)
Total

18

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2017 **(b)** 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . 4,608,796 6,025,905 4,549,365 5,198,689 4,940,414 25,323,169 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 0 0 0 0 0 The value of services or facilities 3 furnished by a governmental unit to the organization without charge 0 0 0 0 0 0 Total. Add lines 1 through 3. . . . 4 4,608,796 4,549,365 5,198,689 6,025,905 4,940,414 25,323,169 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) **Public support.** Subtract line 5 from line 4 25,323,169 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2017 **(b)** 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total 7 Amounts from line 4 4,608,796 4,549,365 5,198,689 6,025,905 4,940,414 25,323,169 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 396,171 400,759 402,631 568,084 2,201,832 434,187 Net income from unrelated business 9 activities, whether or not the business is regularly carried on 15,560 15,580 16,609 16,610 11,051 75,410 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 246,234 239,959 193.968 130,669 107,758 918,588 **Total support.** Add lines 7 through 10 11 28,518,999 Gross receipts from related activities, etc. (see instructions) 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) 88.79 % Public support percentage from 2020 Schedule A, Part II, line 14 15 331/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 331/3% support test-2020. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

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

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

	if the organization falls to quality	under the te	ists listed bei	ow, piease co	implete rait	II. <i>)</i>	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
•	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
Ū	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	 		1				
ı a	received from disqualified persons .						
	· · · · · ·		-				
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	· · · · · · · · · · · · · · · ·						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
01:	line 6.)						
	on B. Total Support	/) 0047	# N 0040	() 0040	/ IN 0000	() 0004	(n =
	dar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the	organization'	s first, second	, third, fourth,	or fifth tax ye	ar as a sectio	n 501(c)(3)
	organization, check this box and stop her	·е					🕨 🗆
Secti	on C. Computation of Public Suppor	t Percentag	ie				
15	Public support percentage for 2021 (line 8	B, column (f), c	divided by line	13, column (f))		15	%
16	Public support percentage from 2020 Sch		•			16	%
Secti	on D. Computation of Investment Inc					-	
17	Investment income percentage for 2021 (I	ine 10c, colur	nn (f), divided l	oy line 13, colu	mn (f))	17	%
18	Investment income percentage from 2020			-		18	%
19a	331/3% support tests-2021. If the organi					ore than 331/39	
	17 is not more than 33 ¹ / ₃ %, check this box a						
b	331/3% support tests-2020. If the organize	_	_	-		=	
-	line 18 is not more than 33 ¹ / ₃ %, check this b						
20	Private foundation If the organization did	_	=	*	-		_

Part IV Supporting Organizations

(Complete only if you checked a box in 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

Cu	on A. All Supporting Organizations			
			Yes	No
1	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.	1		
2	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).	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.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	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.	3c		
4a	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.	4a		
b	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.	4b		
С	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)			
	purposes.	4c		
5a	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).			
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	5a		
	designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.			
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity	6		
8	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		
_	7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	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.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer line 10b below.	10a		
b	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.)	10b		

Schedule A (Form 990 or 990-EZ) 2021

Part	IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	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,			
	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
2		1		
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 Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Secti	on 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 i	nstru	ctions	s).
a b c	 ☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity. 			
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 Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3h		

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	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 Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 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-functional		ntegrated Type III suppo	orting organization
,	(see instructions).	any I	megrated Type III suppo	nung organization

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continue	d)	
Sect	ion D-Distributions				Current Year
1 2	Amounts paid to supported organizations to accomplish a Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity		orted	2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required-	-provide details in Part	VI)	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	sponsive		
				8	
10	Distributable amount for 2021 from Section C, line 6 Line 8 amount divided by line 9 amount			9 10	
	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021		(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D, line 7: \$				
a	Applied to underdistributions of prior years			_	
b	Applied to 2021 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2017				
b	Excess from 2018				
С	Excess from 2019				
d	Excess from 2020				
6	Excess from 2021				

Part VI

	III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Schedule A,	Part II, Line 10 - Art sales, Advertising, Car Donations and Miscellaneous.

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

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

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

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

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

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

• Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization **Employer identification number** MID-SOUTH PUBLIC COMMUNICATIONS FOUNDATION 62-0525567 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for 1 definition of "political campaign activities." Volunteer hours for political campaign activities. See instructions Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 \$ Enter the amount of any excise tax incurred by organization managers under section 4955 . 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . Yes No Yes No If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function 2 Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 3 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (c) EIN (a) Name (b) Address (d) Amount paid from (e) Amount of political filing organization's contributions received and funds. If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-. (1) (2)(3)(4)(5) (6)

Page	2
------	---

Part II-A Complete if the organization is exempt under section 501(c)(3) and fil section 501(h)).					01(c)(3) and filed	iled Form 5768 (election under					
A	Check ►	if the filing organization beloaddress, EIN, expenses, and		liated group memb	er's name,						
В	Check ►	if the filing organization check			·						
_	OHOOK P		bying Expendit			(a) Filing	(b) Affiliated				
	(The term "expenditures" means amounts paid or incurred.)					organization's totals	group totals				
1	a Total lo	obbying expenditures to influence	•								
	b Total lobbying expenditures to influence a legislative body (direct lobbying)										
		obbying expenditures (add lines	•	, ,	,						
		exempt purpose expenditures .	,								
		xempt purpose expenditures (ac									
		ng nontaxable amount. Enter		•							
	columr	=	the amount in	on the lenewing	, table in beth						
	If the ar	nount on line 1e, column (a) or (b) i	s: The lobbying	nontaxable amoun	t is:						
		r \$500,000		nount on line 1e.							
		00,000 but not over \$1,000,000		15% of the excess	over \$500.000.						
		,000,000 but not over \$1,500,000		10% of the excess							
		,500,000 but not over \$17,000,000		5% of the excess o							
		7,000,000	\$1,000,000.								
	g Grassr	oots nontaxable amount (enter 2	25% of line 1f)								
	-	ct line 1g from line 1a. If zero or									
	i Subtra	ct line 1f from line 1c. If zero or	ess, enter -0-								
	j If there	e is an amount other than zer	o on either line	1h or line 1i, did	the organization	file Form 4720					
		ng section 4911 tax for this yea					Yes No				
	(Som	e organizations that made a s	ection 501(h) ele	Period Under Sec ection do not hav ructions for lines	e to complete all	of the five columi	ns below.				
		Lobbyir	g Expenditures	During 4-Year Av	veraging Period						
	Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total				
2	a Lobbyi	ng nontaxable amount									
		ng ceiling amount of line 2a, column (e))									
	c Total lo	obbying expenditures									
	d Grassr	oots nontaxable amount									
		oots ceiling amount of line 2d, column (e))									
	f Grassr	oots lobbying expenditures									

Schedule C (Form 990 or 990-EZ) 2021

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768		
For a	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(a	a)		(b)	
	iption of the lobbying activity.	Yes	No	Ar	nount	t
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?		~			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		~			
С	Media advertisements?		~			
d	Mailings to members, legislators, or the public?		~			
е	Publications, or published or broadcast statements?		~			
f	Grants to other organizations for lobbying purposes?		~			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	~				0
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		~			
i	Other activities?	~			3	0,821
j	Total. Add lines 1c through 1i				3	0,821
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?		~			
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u></u>				
Part l)(5), c	or se	ction		
	501(c)(6).					
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3	 	
3 Part	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	•				
rait.	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OI answered "Yes.")(5), (R (b)	or se Part	ction III-A, I	ine 3	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby	ying				
_	and political expenditure next year?		4	<u> </u>		
5	Taxable amount of lobbying and political expenditures. See instructions		5	<u> </u>		
Part	''					
	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information.	up lis	t); Par	t II-A, li	nes 1	l and
	lule C, Part II-B, Line 1 - Schedule C, Part II-B, Line 1 - Payments made to Tennessee Public Television Co sion Stations to support its efforts to retain appropriations from the State of Tennessee and Federal Gove					
public	broadcasting programming activities.					

SCHEDULE D (Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

vaille C	or the organization		Employer identification number
MID-S	OUTH PUBLIC COMMUNICATIONS FOUNDATION		62-0525567
Par	Organizations Maintaining Donor Advi	sed Funds or Other Similar Fund	ls or Accounts.
	Complete if the organization answered "		
	γ το στο στο στο στο στο στο στο στο στο	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		.,
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a	Ladvisors in writing that the assets he	ld in donor advised
•	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, ar		
	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		
Par	t II Conservation Easements.		
ı aı	Complete if the organization answered "	Ves" on Form 990 Part IV line 7	
1	Purpose(s) of conservation easements held by the o		
•	Preservation of land for public use (for example, recreations)		f a historically important land area
	Protection of natural habitat	•	f a certified historic structure
	Preservation of open space	Freservation of	a certified historic structure
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution	in the form of a conservation
_	easement on the last day of the tax year.	a a quamica conscivation contribution	Held at the End of the Tax Year
_			
a	Total acreage restricted by conservation easements		
b	Number of conservation easements on a certified hi		
c d	Number of conservation easements included in (
<u> </u>			· 2d
3	Number of conservation easements modified, trans		
J	tax year ►	refred, released, extinguished, or term	inlated by the organization during the
4	Number of states where property subject to conserv	vation easement is located	
5	Does the organization have a written policy region		ection, handling of
_	violations, and enforcement of the conservation eas		
6	Staff and volunteer hours devoted to monitoring, inspec	ting handling of violations and enforcing	
Ū	b	ung, nanding of violations, and emoreing	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting	handling of violations, and enforcing o	conservation easements during the year
-	▶ \$	g,aag cc.acc, aa ccg c	Jensen vanen easenneme aannig ane year
8	Does each conservation easement reported on line 2	2(d) above satisfy the requirements of s	section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports co	onservation easements in its revenue a	and expense statement and
	balance sheet, and include, if applicable, the text of	the footnote to the organization's fina	ncial statements that describes the
	organization's accounting for conservation easemer	nts.	
Part	Organizations Maintaining Collections	of Art, Historical Treasures, or 0	Other Similar Assets.
	Complete if the organization answered "		
1a	If the organization elected, as permitted under FAS		e 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		
b	If the organization elected, as permitted under FAS	B ASC 958, to report in its revenue s	tatement and balance sheet works of
	art, historical treasures, or other similar assets held		
	provide the following amounts relating to these item		·
	-		▶ \$
	(i) Revenue included on Form 990, Part VIII, line 1(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art,	historical treasures. or other similar	assets for financial gain, provide the
•	following amounts required to be reported under FA		
а	Revenue included on Form 990, Part VIII, line 1 .	=	> \$
	Assets included in Form 990, Part X		

	le D (Form 990) 2021								Page 2
Part						•			
3	Using the organization's acquisition, accollection items (check all that apply):	cession, and othe	er recor	ds, check	cany of th	e follov	ving that make	significant	use of its
а	Public exhibition		d	☐ Loan o	or exchang	e progi	ram		
b	☐ Scholarly research								
C	☐ Preservation for future generations		•						
4	Provide a description of the organization XIII.	n's collections an	d expla	ain how th	ney further	the org	ganization's exe	empt purpos	se in Par
5	During the year, did the organization so assets to be sold to raise funds rather th								s □ No
Part									
	Complete if the organization are 990, Part X, line 21.								Form
1a	Is the organization an agent, trustee, co							not	
	included on Form 990, Part X?							· 🗌 Yes	□ No
b	If "Yes," explain the arrangement in Part	XIII and complete	e the fo	llowing ta	ıble:				
		•		•				Amount	
С	Beginning balance					10	:		
d	Additions during the year					10	_		
e	Distributions during the year					16			
f	Ending balance					11			
	Did the organization include an amount of							V.	. □ Na
2a	•							•	
b	If "Yes," explain the arrangement in Part Endowment Funds.	XIII. Check here	ir the ex	xpianatior	nas been	provide	ed on Part XIII		
Par				000 5)t	- 10			
	Complete if the organization ar							. 1	
		(a) Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years ba	ck (e) Four y	ears back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance								
ົ້	Provide the estimated percentage of the	current vear end	halanc	e (line 1a	column (a	a)) held	as.		
a	Board designated or quasi-endowment	-	%	o (iiilo 19,	, ooiaiiiii (c	ijj Hola	ao.		
b	Permanent endowment ▶	%	70						
-	Term endowment ▶ %	70							
С		-11-11 400	207						
3a	The percentages on lines 2a, 2b, and 2c Are there endowment funds not in the p organization by:			zation tha	t are held	and ad	ministered for t	_	<u> </u>
	•								es No
	(i) Unrelated organizations							. 3a(i)	
	(-,							. 3a(ii)	
b	If "Yes" on line 3a(ii), are the related orga							. 3b	
4	Describe in Part XIII the intended uses of		's endo	wment fu	ınds.				
Part									
	Complete if the organization ar	nswered "Yes"	on For	m 990, F	art IV, lin	e 11a.	See Form 990), Part X, lii	ne 10.
	Description of property	(a) Cost or other	r basis	(b) Cost or	r other basis	(c)	Accumulated	(d) Book	value
		(investmen	t)	(ot	her)	d	epreciation		
1a	Land	1.6	20,684		0				1,620,684
b	Buildings		213,973		0		2,814,714		5,399,259
	Leasehold improvements	5,2	0		0		0		0

	besorption of property	(investment)	(other)	depreciation	(d) Book value
1a	Land	1,620,684	0		1,620,684
b	Buildings	8,213,973	0	2,814,714	5,399,259
С	Leasehold improvements	0	0	0	0
d	Equipment	11,545,973	0	10,923,934	622,039
е	Other	0	0	0	0
Total.	Add lines 1a through 1e. (Column (d) must e	egual Form 990, Part)	X, column (B), line 10	0c.) ▶	7.641.982

Part VII	Investments – Other Securities.	V 5 11- C E		Doub V. line 10
	Complete if the organization answered "Yes" on Form 990, Part I (a) Description of security or category	(b) Book value		ethod of valuation:
	(including name of security)	(b) Book value		nd-of-year market value
(1) Financial				
	eld equity interests			
(3) Other				
(B)				
(C)				
(D)				
(E) (F)				
(G)				
(H)				
	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ▶			
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11c. See Fo	orm 990,	Part X, line 13.
	(a) Description of investment	(b) Book value	(c) M	ethod of valuation:
			Cost or en	nd-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	mn (b) must equal Form 990, Part X, col. (B) line 13.) . ▶			
Part IX	Other Assets.			
T dit ix	Complete if the organization answered "Yes" on Form 990, Part I	V. line 11d. See F	orm 990.	Part X. line 15.
	(a) Description	.,		(b) Book value
(1)				.,,
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	was the mount against Farma 000. Bort V. and t. (D.) line 15.)			
Part X	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
PartA	Complete if the organization answered "Yes" on Form 990, Part I	V line 11e or 11f	See For	m 990 Part X
	line 25.	v, iiilo i io oi i ii.	000 1 011	11 550, 1 411 7,
1.	(a) Description of liability			(b) Book value
(1) Federal ir				(4) = 2 2 1 1 1 1 1 1 1 1
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 25.)		•	
	r uncertain tax positions. In Part XIII, provide the text of the footnote to the organ			
organization	s liability for uncertain tax positions under FASB ASC 740. Check here if the text	or the loothote has b	een provid	eu III Parl XIII .

Schedule D (Form 990) 2021 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements 5,213,328 2 Amounts included on line 1 but not on Form 990. Part VIII, line 12: 2a Donated services and use of facilities 11,276 2c 0 2d -929 -411,886 2e Subtract line **2e** from line **1** 3 3 5,625,214 Amounts included on Form 990. Part VIII. line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . . 4a 4b 0 Add lines **4a** and **4b** 4c 0 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 5,625,214 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Part XII Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 4.924.963 2 Amounts included on line 1 but not on Form 990. Part IX. line 25: Donated services and use of facilities 2a 11,276 2b 2c 0 2d 929 2e 12,205 3 Subtract line **2e** from line **1** 3 4,912,758 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b 0

Schedule D, Part XI, Line 2d - Special Event expenses.
Schedule D, Part XII, Line 2d - Special events expenses

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.

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) .

Supplemental Information.

4c

5

0

4,912,758

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

MID-S	SOUTH PUBLIC COMMUNICATIONS FOUNDATION 62-0525567						
Par	Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.						
1	Indicate whether the organization	n raised funds t	hrough any	of the follo	owing activities. C	heck all that apply.	
а	Mail solicitations		e 🖟	Solicitati	on of non-govern	ment grants	
b	Internet and email solicitation	IS	f	Solicitati	on of government	t grants	
С	Phone solicitations		g 🖟	Special 1	fundraising events	3	
d	In-person solicitations						
2a	Did the organization have a writt	en or oral agree	ement with	any individ	lual (including offi	cers, directors, truste	es,
b	or key employees listed in Form If "Yes," list the 10 highest paid compensated at least \$5,000 by	individuals or e	ntities (fun		=	=	
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	ndraiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
	to a Colonadula C. Dant IV. Statement		Yes	No			
1 1	ee Schedule G, Part IV, Statement						
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total					376,583	63,824	312,759
3	List all states in which the organ	nization is regis	tered or lic	ensed to s	olicit contribution	s or has been notifie	d it is exempt from
MS, T	registration or licensing. N						
	·						

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events		
			Online auction	((total number)	(add col. (a) through col. (c))		
d)			(event type)	(event type)	(total number)			
ű								
Revenue	1	Gross receipts	17,610			17,610		
æ								
	2	Less: Contributions	0			0		
	3	Gross income (line 1 minus						
		line 2)	17,610			17.610		
		,				17/010		
	4	Cash prizes	0			0		
	_	Cash phizes	U			0		
	_		_			_		
	5	Noncash prizes	0			0		
S								
se	6	Rent/facility costs	0			0		
je								
X	7	Food and beverages	0		0	0		
ᇴ		G						
Direct Expenses	8	Entertainment	0		0	0		
	J	Entertainment	0		0			
	•	Oth an aline at annuare and						
	9	Other direct expenses .	929			929		
	10	Direct expense summary. Ac	_			929		
	11	Net income summary. Subtra	act line 10 from line 3, c	olumn (d)	🕨	16,681		
Pa	rt III	Gaming. Complete if the	e organization answe	ered "Yes" on Form	990, Part IV, line 19,	or reported more than		
		\$15,000 on Form 990-E	Z, line 6a.					
a)				(b) Pull tabs/instant		(d) Total gaming (add		
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))		
ĕ								
æ	4	Cross revenue						
	1	Gross revenue						
	_							
ses	2	Cash prizes						
Direct Expenses								
ă	3	Noncash prizes						
Щ								
ec	4	Rent/facility costs						
ä		•						
	5	Other direct expenses .						
		Other direct expenses :	☐ Yes %	☐ Yes %	☐ Yes %			
	6	Volunteer labor	□ les	□ Tes				
	6	volunteer labor	L NO		I NO			
	_							
	7	Direct expense summary. Ac	dd lines 2 through 5 in c	olumn (d)				
		Net gaming income summary. Subtract line 7 from line 1, column (d) ▶						
	8	Net gaming income summar	y. Subtract line 7 from li	ine 1, column (d)	•			
9	Er	Enter the state(s) in which the organization conducts gaming activities:						
	a Is	nter the state(s) in which the organization conducts gaming activities: s the organization licensed to conduct gaming activities in each of these states?						
	"	If "No," explain:						
. د			. , ,					
10	a 1/1/	lere any of the organization's g	aming licenses revoked	ı, suspended, or termin	ated during the tax year'	? . \square Yes \square No		
		-	,	.,				
		"Van " averlain.	_	-				
		"Van " averlain.	_	-				

Jileuu	ile a (i offi 990 of 990-E2) 2021		rage u
11	Does the organization conduct gaming activities with nonmembers?	☐ Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity		_
	formed to administer charitable gaming?	☐ Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:		0.4
a	The organization's facility		%
b	An outside facility		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ►		
	Address►		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	□Yes	□No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ If "Yes," enter name and address of the third party:		
	Name ►		
	Address ►		
16	Gaming manager information:		
	Name ►		
	Gaming manager compensation ► \$		
	Description of services provided ►		
	□ Director/officer □ Employee □ Independent contractor		
17 a b	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$	☐ Yes	□No
Part			

Schedule G, Part IV, Statement 1

MID-SOUTH PUBLIC COMMUNICATIONS FOUNDATION

Form: **Schedule G (2021)** EIN: **62-0525567**

Page: 1

Part I, Line 2b

Fundraiser Activity Information

Name and Address	Activity	C1	Gross	C2	C3
			Receipts		
Allegiance Fundraising LLC 36 Cordage Park Circle Suite 225 Plymouth, MA 02360	Allegiance provides mailing services for direct mail for new acquisitions and additional gifts.	No	376,583	63,824	312,759
Total:			376,583	63,824	312,759

C1 = Fundraiser control of funds?

C2 = Amount paid to (or retained by) fundraiser

C3 = Amount paid to (or retained by) organization

SCHEDULE 0 (Form 990 or 990-EZ)

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

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

name of the organization	Employer identification number
MID-SOUTH PUBLIC COMMUNICATIONS FOUNDATION	62-0525567
Form 990, Part VI, Section B, Line 11b - The 990 is prepared in-house and given to our independent account	ntants and finance committee for
review.	
Form 990, Part VI, Section B, Line 12c - At least on an annual basis Board members report any conflicts of	interest with the organization to
the Board Chair. Amy material conflicts are reported in the 990 and in the notes to the audited financial sta	itements.
Form 990, Part VI, Section B, Line 15 - Each year the Board of Directors review the performance of the Pre	sident & CEO and approve their
annual pay.	
uman pay.	
Form 990, Part VI, Section C, Line 19 - Most all public documents are placed on our website at wkno.org for	r inspection. Any documents not
there are mailed upon request.	
Form 000 Part VI Line 0. Fundarizing overseas natted against success	
Form 990, Part XI, Line 9 - Fundraising expenses netted against revenue.	