

"Public Disclosure Requirements"

Form **990**

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

OMB No. 1545-0047

2007

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2007 calendar year, or tax year beginning 07/01, 2007, **and ending** 06/30/2008

<input checked="" type="checkbox"/>	Check if applicable: Address change	C Name of organization WNYC RADIO	D Employer identification number 13-3015230
<input type="checkbox"/>	Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telephone number (646) 829-4400
<input type="checkbox"/>	Initial return	160 VARICK STREET	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
<input type="checkbox"/>	Termination	City or town, state or country, and ZIP + 4	<input type="checkbox"/> Other (specify) ▶
<input type="checkbox"/>	Amended return	NEW YORK, NY 10013	
<input type="checkbox"/>	Application pending		

• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

H and I are not applicable to section 527 organizations.

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

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? (If "No," attach a list. See instructions.) Yes No

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number ▶

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: ▶ WWW.WNYC.ORG

J Organization type (check only one) 501(c)(3) (insert no.) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 47,033,792.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
	a	Contributions to donor advised funds	1a			
	b	Direct public support (not included on line 1a)	1b	40,379,455.		
	c	Indirect public support (not included on line 1a)	1c			
	d	Government contributions (grants) (not included on line 1a)	1d	801,109.		
	e	Total (add lines 1a through 1d) (cash \$ 39,918,971. noncash \$ 1,261,593.)	1e		41,180,564.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		3,942,608.	
	3	Membership dues and assessments	3			
	4	Interest on savings and temporary cash investments	4		920,663.	
	5	Dividends and interest from securities	5		183,397.	
	6a	Gross rents	6a			
	b	Less: rental expenses	6b			
c	Net rental income or (loss). Subtract line 6b from line 6a	6c				
7	Other investment income (describe ▶)	7				
Revenue	8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	8d	
		b	Less: cost or other basis and sales expenses	8a		8b
		c	Gain or (loss) (attach schedule)	8a		8c
		d	Net gain or (loss). Combine line 8c, columns (A) and (B)			
Revenue	9a	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>	Gross revenue (not including \$ 976,824. of STMT 3 contributions reported on line 1b).	STMT. 4	348,068.	
			b	Less: direct expenses other than fundraising expenses	9a	348,068.
			c	Net income or (loss) from special events. Subtract line 9b from line 9a	9b	
Revenue	10a	Gross sales of inventory, less returns and allowances			10c	
			b	Less: cost of goods sold		10a
			c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a		10b
Revenue	11	Other revenue (from Part VII, line 103)	11		458,492.	
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		46,685,724.	
Expenses	13	Program services (from line 44, column (B))	13		25,265,288.	
	14	Management and general (from line 44, column (C))	14		2,453,825.	
	15	Fundraising (from line 44, column (D))	15		7,913,645.	
	16	Payments to affiliates (attach schedule)	16			
	17	Total expenses. Add lines 16 and 44, column (A)	17		35,632,758.	
Net Assets	18	Excess or (deficit) for the year. Subtract line 17 from line 12	18		11,052,966.	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		57,978,198.	
	20	Other changes in net assets or fund balances (attach explanation) STMT. 5. STMT. 6.	20		-774,655.	
	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21		68,256,509.	

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2007)

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b	Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A	508,520.	326,250.	141,489.	40,781.
25b	Compensation of former officers, directors, key employees, etc. listed in Part V-B				
25c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26	Salaries and wages of employees not included on lines 25a, b, and c	16,087,982.	12,057,689.	727,044.	3,303,249.
27	Pension plan contributions not included on lines 25a, b, and c	241,891.	155,597.	34,727.	51,567.
28	Employee benefits not included on lines 25a - 27	1,567,546.	1,136,222.	169,765.	261,559.
29	Payroll taxes	1,197,290.	843,289.	120,790.	233,211.
30	Professional fundraising fees	624,369.			624,369.
31	Accounting fees	129,527.	83,425.	24,735.	21,367.
32	Legal fees	334,455.	7,755.	118,032.	208,668.
33	Supplies	78,215.	63,357.	1,893.	12,965.
34	Telephone	468,288.	412,661.	17,215.	38,412.
35	Postage and shipping	64,905.	35,781.	6,887.	22,237.
36	Occupancy	2,297,545.	1,958,980.	142,937.	195,628.
37	Equipment rental and maintenance	676,093.	412,048.	50,647.	213,398.
38	Printing and publications	81,100.	57,589.	1,088.	22,423.
39	Travel	263,254.	228,956.	21,114.	13,184.
40	Conferences, conventions, and meetings	207,767.	104,249.	26,389.	77,129.
41	Interest	116,420.		116,420.	
42	Depreciation, depletion, etc. (attach schedule)	450,234.	408,600.	16,496.	25,138.
43	Other expenses not covered above (itemize):				
43a	a STMT 7	10,237,357.	6,972,840.	716,157.	2,548,360.
43b	b				
43c	c				
43d	d				
43e	e				
43f	f				
43g	g				
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15).	35,632,758.	25,265,288.	2,453,825.	7,913,645.

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____ ; (ii) the amount allocated to Program services \$ _____ ;
 (iii) the amount allocated to Management and general \$ _____ ; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? SEE STATEMENT 8 All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a RADIO PROGRAMMING AND ACQUISITION OF LIVE AND RECORDED PROGRAMMING FOR BROADCAST ON TWO STATION OUTLETS AND ON-LINE. (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	19,430,250.
b TECHNICAL OPERATIONS FOR THE TRANSMISSION AND SUPPORT OF PROGRAMMING. (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	3,575,922.
c MARKETING SUPPORT SERVICE. (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	2,259,116.
d _____ (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	25,265,288.

Part IV Balance Sheets (See the instructions.)

				(A)		(B)
				Beginning of year		End of year
Assets	45 Cash - non-interest-bearing			30,155.	45	706,079.
	46 Savings and temporary cash investments			39,032,442.	46	39,284,784.
	47a Accounts receivable	47a	3,697,067.			
	b Less: allowance for doubtful accounts	47b	300,000.	3,000,635.	47c	3,397,067.
	48a Pledges receivable	48a	10,627,184.			
	b Less: allowance for doubtful accounts	48b	45,000.	11,554,526.	48c	10,582,184.
	49 Grants receivable				49	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)				50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)				50b	
	51a Other notes and loans receivable (attach schedule)	51a				
	b Less: allowance for doubtful accounts	51b			51c	
	52 Inventories for sale or use				52	
	53 Prepaid expenses and deferred charges			363,242.	53	426,097.
	54a Investments - publicly-traded securities	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		7,103,889.	54a	2,152,734.
	b Investments - other securities (attach schedule)	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		220,066.	54b	246,676.
	55a Investments - land, buildings, and equipment: basis	55a		STMT 9		
	b Less: accumulated depreciation (attach schedule)	55b			55c	
	56 Investments - other (attach schedule)				56	
	57a Land, buildings, and equipment: basis	57a	33,771,003.			
b Less: accumulated depreciation (attach schedule)	57b	4,643,815.	12,630,220.	57c	29,127,188.	
58 Other assets, including program-related investments (describe <input type="checkbox"/> STMT 10)			15,155,136.	58	15,464,604.	
59 Total assets (must equal line 74). Add lines 45 through 58			89,090,311.	59	101,387,413.	
Liabilities	60 Accounts payable and accrued expenses			7,754,079.	60	8,974,453.
	61 Grants payable				61	
	62 Deferred revenue			NONE	62	NONE
	63 Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a Tax-exempt bond liabilities (attach schedule)		STMT. 11 .	23,000,000.	64a	23,000,000.
	b Mortgages and other notes payable (attach schedule)				64b	
	65 Other liabilities (describe <input type="checkbox"/> STMT 12)			358,034.	65	1,156,451.
66 Total liabilities. Add lines 60 through 65			31,112,113.	66	33,130,904.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.					
	67 Unrestricted			45,025,455.	67	54,243,621.
	68 Temporarily restricted			11,733,245.	68	12,793,390.
	69 Permanently restricted			1,219,498.	69	1,219,498.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.					
	70 Capital stock, trust principal, or current funds				70	
	71 Paid-in or capital surplus, or land, building, and equipment fund				71	
	72 Retained earnings, endowment, accumulated income, or other funds				72	
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)			57,978,198.	73	68,256,509.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73			89,090,311.	74	101,387,413.

Part VI Other Information (continued)

82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? 82b 1,908,835. 83a Did the organization comply with the public inspection requirements for returns and exemption applications? 83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 84a Did the organization solicit any contributions or gifts that were not tax deductible? 84b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 85a 501(c)(4), (5), or (6). Were substantially all dues nondeductible by members? 85b Did the organization make only in-house lobbying expenditures of \$2,000 or less? 85c Dues, assessments, and similar amounts from members N/A 85d Section 162(e) lobbying and political expenditures N/A 85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices N/A 85f Taxable amount of lobbying and political expenditures (line 85d less 85e) N/A 85g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A 85h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A 86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 N/A b Gross receipts, included on line 12, for public use of club facilities N/A 87 501(c)(12) orgs. Enter: a Gross income from members or shareholders N/A b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) N/A 88a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX. X 88b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI. X 89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 NONE; section 4912 NONE; section 4955 NONE b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction. X c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 NONE d Enter: Amount of tax on line 89c, above, reimbursed by the organization NONE e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? X f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? X g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A 90a List the states with which a copy of this return is filed NY, b Number of employees employed in the pay period that includes March 12, 2007 (See instructions.) 163 91a The books are in care of MICHELE RUSNAK Telephone no. 646-829-4400 Located at 160 VARICK STREET NEW YORK, NY ZIP + 4 10013

b 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)? X If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No
 If "Yes," enter the name of the foreign country ▶ _____

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year ▶ **92** | _____ N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a STMT 20					3,942,608.
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	920,663.	
96 Dividends and interest from securities			14	183,397.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b MISCELLANEOUS			01	360,283.	
c ROYALTY FEES			15	28,243.	
d COMM AFFAIRS/PROG					69,966.
e _____					
104 Subtotal (add columns (B), (D), and (E))				1,492,586.	4,012,574.
105 Total (add line 104, columns (B), (D), and (E)) ▶					5,505,160.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	STMT 21

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization **make** any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity. Yes No
N/A

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
Totals				

107 Did the reporting organization **receive** any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity. Yes No
N/A

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above? Yes No
N/A


Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer _____ Date _____

Type or print name and title _____

Paid Preparer's Use Only

Preparer's signature  Date 4/29/09 Check if self-employed

Firm's name (or yours if self-employed), address, and ZIP + 4 ERNST & YOUNG U. S. LLP EIN 34-656596
5451 LAKEVIEW PARKWAY SOUTH DRIVE Phone no. 317-280-3400
INDIANAPOLIS, IN 46268 Form **990** (2007)

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2007, or tax year beginning 07/01, 2007, and ending 06/30, 2008

2007

Department of the Treasury Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

See instructions on back.

Name of exempt organization

Employer identification number

WNYC RADIO

13-3015230

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8453-EO and enter the applicable amount from the return, if any.

- 1a Form 990 check here [X] b Total revenue, if any (Form 990, line 12) 1b 46685724.
2a Form 990-EZ check here [] b Total revenue, if any (Form 990-EZ, line 9) 2b
3a Form 1120-POL check here [] b Total tax (Form 1120-POL, line 22) 3b
4a Form 990-PF check here [] b Tax based on investment income (Form 990-PF, Part VI, line 5) 4b
5a Form 8868 check here [] b Balance due (Form 8868, line 3c) 5b

Part II Declaration of Officer

- 6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account.
If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2007 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete.

Sign Here Signature of officer Date Title

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return.

ERO's Use Only ERO's signature Date 4/29/09 Check if also paid preparer [X] Check if self-employed [] ERO's SSN or PTIN EIN 34-6565596 Firm's name (or yours if self-employed), address, and ZIP code ERNST & YOUNG U.S. LLP 5451 LAKEVIEW PARKWAY SOUTH DRIVE INDIANAPOLIS IN 46268 Phone no. 317-280-3400

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer's Use Only Preparer's signature Date Check if self-employed [] Preparer's SSN or PTIN EIN Phone no.

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2007

Name of the organization

WNYC RADIO

Employer identification number

13-3015230

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
SEE STATEMENT 22				

Total number of other employees paid over \$50,000 . . ▶ 125

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
SEE STATEMENT 23		

Total number of others receiving over \$50,000 for professional services ▶ 10

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
SEE STATEMENT 24		

Total number of other contractors receiving over \$50,000 for other services ▶ 2

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

Schedule A (Form 990 or 990-EZ) 2007

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$ 83,686. (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

1 X

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.

2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

a Sale, exchange, or leasing of property?

2a X

b Lending of money or other extension of credit?

2b X

c Furnishing of goods, services, or facilities?

2c X

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? .S.T.M.T. .25

2d X

e Transfer of any part of its income or assets?

2e X

3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)

3a X

b Did the organization have a section 403(b) annuity plan for its employees?

3b X

c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement

3c X

d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?

3d X

4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g

4a X

b Did the organization make any taxable distributions under section 4966?

4b N/A

c Did the organization make a distribution to a donor, donor advisor, or related person?

4c N/A

d Enter the total number of donor advised funds owned at the end of the tax year

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year

f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the rights to provide advice on the distribution or investment of amounts in such funds or accounts

NONE

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year

NONE

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ► _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: (1) **more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) **no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III - Functionally Integrated Type III - Other

Provide the following information about the supported organizations. (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Table with columns: Calendar year (or fiscal year beginning in), (a) 2006, (b) 2005, (c) 2004, (d) 2003, (e) Total. Rows include: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions, merchandise sold or services performed; 18 Gross income from interest, dividends; 19 Net income from unrelated business activities; 20 Tax revenues levied for the organization's benefit; 21 The value of services or facilities furnished; 22 Other income; 23 Total of lines 15 through 22; 24 Line 23 minus line 17; 25 Enter 1% of line 23; 26 Organizations described on lines 10 or 11; 27 Organizations described on line 12; 28 Unusual Grants.

Part V Private School Questionnaire (See page 9 of the instructions.) NOT APPLICABLE
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ----- ----- -----	31	
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities?	33h	
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.) (To be completed ONLY by an eligible organization that filed Form 5768)

Check a if the organization belongs to an affiliated group. Check b if you checked "a" and "limited control" provisions apply.

Table with columns: Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.), (a) Affiliated group totals, (b) To be completed for all electing organizations. Rows include Total lobbying expenditures, Total exempt purpose expenditures, and Lobbying nontaxable amount.

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

Table with columns: Calendar year (or fiscal year beginning in), (a) 2007, (b) 2006, (c) 2005, (d) 2004, (e) Total. Rows include Lobbying nontaxable amount, Lobbying ceiling amount, Total lobbying expenditures, Grassroots nontaxable amount, Grassroots ceiling amount, and Grassroots lobbying expenditures.

Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

NOT APPLICABLE

Table with columns: Description of activity, Yes, No, Amount. Rows include Volunteers, Paid staff or management, Media advertisements, Mailings to members, Publications, Grants to other organizations, Direct contact with legislators, Rallies, and Total lobbying expenditures.

Schedule B

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

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2007

Name of organization

WNYC RADIO

Employer identification number

13-3015230

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

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

General Rule -

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

Special Rules -

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3 % support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

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

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

Name of organization **WNYC RADIO**

Employer identification number
13-3015230

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ <u>3,537,671.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ <u>925,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ <u>2,600,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

FORM 990 - GENERAL EXPLANATION ATTACHMENT
=====

ATTACHMENT 1
FORM 990 PART IV, LINE 57 AND PART II, LINE 42

LINE 57 LAND, BUIDLINGS AND EQUIPMENT
LINE 42 DEPRECIATION EXPENSE

COMPUTER HARDWARE AND SOFTWARE	1,052,446
TRANSMITTERS	3,146,365
LEASEHOLD IMPROVEMENTS	17,509,218
FURNITURE & FIXTURES	1,457,151
EQUIPMENT	10,045,992
CONSTRUCTION IN PROGRESS	559,831
TOTAL	33,771,003
LESS: ACCUMULATED DEPRECIATION	(4,643,815)
NET FIXED ASSETS	29,127,188
DEPRECIATION EXPENSE FOR 6/30/08	450,234

DEPRECIATION EXPENSE IS CALCULATED USING THE STRAIGHT-LINE METHOD OVER THE AVERAGE USEFUL LIFE OF THE ASSETS.

FORM 990 - GENERAL EXPLANATION ATTACHMENT
=====

ATTACHMENT 2
TAX EXEMPT BONDS

FORM 990, PART IV, LINE 64A IN MARCH 2006, WNYC RADIO ISSUED TAX-EXEMPT SERIES 2006 REVENUE BONDS ("SERIES 2006 REVENUE BONDS") THROUGH THE TRUST FOR CULTURAL RESOURCES OF THE CITY OF NEW YORK IN THE AMOUNT OF \$23,000,000. PROCEEDS FROM THE SERIES 2006 REVENUE BONDS, AS WELL AS ANY INTEREST EARNED ON THE PROCEEDS, WILL BE USED TO FINANCE ISSUANCE COSTS, A PORTION OF INTEREST COSTS AND ALL OR A PORTION OF THE COST OF RENOVATION, CONSTRUCTION, STUDIO TECHNICAL FIT-OUT AND FURNISHING OF APPROXIMATELY 76,000 SQUARE FEET OF LEASED SPACE IN A BUILDING TO BE USED AS WNYC RADIO'S PRINCIPAL OFFICES AND BROADCAST STUDIOS. THE UNEXPENDED BOND PROCEEDS ARE HELD AT A BANK UNDER A GUARANTEED INCOME CONTRACT AND ARE REPORTED AS CASH EQUIVALENTS RESTRICTED AS TO USE. AT JUNE 30, 2008, UNEXPENDED PROCEEDS TOTALED APPROXIMATELY \$1,369,643.

THIRD PARTY USE OF FACILITIES FINANCED BY THIS BOND ISSUE WAS 0% AS OF JUNE 30, 2008.

FORM 990, PART I - EXCLUDED CONTRIBUTIONS
=====

DESCRIPTION -----	AMOUNT -----
FUNDRAISING GALA	976,824.
TOTAL	----- 976,824. =====

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

=====

DESCRIPTION -----	GROSS REVENUE -----	DIRECT EXPENSES -----
FUNDRAISING GALA	348,068.	348,068.
TOTALS	348,068.	348,068.
	=====	=====

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES

=====

DESCRIPTION	AMOUNT
-----	-----
UNREALIZED GAIN ON INVESTMENTS	65,700.
TOTAL	-----
	65,700.
	=====

FORM 990, PART I - OTHER DECREASES IN FUND BALANCES

=====

DESCRIPTION	AMOUNT
-----	-----
CHANGE IN FAIR VALUE INT RATE SWAP AGMT	840,355.
TOTAL	----- 840,355.
	=====

FORM 990, PART II - OTHER EXPENSES

=====

DESCRIPTION -----	TOTAL -----	PROGRAM SERVICES -----	MANAGEMENT AND GENERAL -----	FUNDRAISING -----
CONSULTANT FEES	1,013,985.	741,518.	54,036.	218,431.
COMMUNITY EVENTS, ADVERTISING	1,448,836.	904,804.	30,735.	513,297.
PROGRAM ACQUISITION	4,348,571.	4,339,602.	8,969.	
MEMBERSHIP SERVICES	1,775,998.	315.		1,775,683.
PROFESSIONAL SERVICES	862,475.	592,278.	270,197.	
OFFICE EXPENSES	64,566.	44,716.	14,553.	5,297.
INSURANCE	200,733.	157,315.	17,202.	26,216.
BAD DEBT EXPENSE	80,725.		80,725.	
FINANCING COSTS	233,560.		233,560.	
UTILITIES	207,908.	192,292.	6,180.	9,436.
TOTALS	10,237,357.	6,972,840.	716,157.	2,548,360.

=====

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

=====

WNYC RADIO, AN INDEPENDENT NOT-FOR-PROFIT ORGANIZATION, OPERATES TWO PUBLIC RADIO STATIONS, WNYC-FM AND WNYC-AM, AND WNYC.ORG. WNYC RADIO IS ONE OF AMERICA'S MOST LISTENED-TO PUBLIC RADIO STATIONS AND REACHES NEARLY ONE MILLION LISTENERS EACH WEEK. WNYC 93.9 FM BROADCASTS A BROAD RANGE OF DAILY NEWS, TALK, CULTURAL AND CLASSICAL MUSIC PROGRAMMING, WHILE WNYC AM 820 MAINTAINS A STRONGER FOCUS ON BREAKING NEWS AND INTERNATIONAL NEWS REPORTING. WNYC'S CONTENT LAYS THE FOUNDATION FOR THE CREATION OF A RICH TAPESTRY OF STORIES THAT DRAWS LISTENERS TO WNYC.ORG AND EXTENDS THEIR RELATIONSHIP FAR BEYOND BROADCAST. WNYC.ORG FEATURES LIVE STREAMING, LISTENING ON DEMAND, BLOGS, PODCASTS, SLIDESHOWS, VIDEOS, AND ONLINE COMMUNITY FORUMS. AS A FLAGSHIP STATION OF THE AMERICAN PUBLIC RADIO NETWORK, WNYC RADIO EMBODIES ITS MISSION "TO MAKE THE MIND MORE CURIOUS, THE HEART MORE TOLERANT, AND THE SPIRIT MORE JOYFUL THROUGH EXCELLENT RADIO PROGRAMMING. "

FORM 990, PART IV - INVESTMENTS - OTHER SECURITIES

=====

DESCRIPTION	ENDING BOOK VALUE	COST OR FMV
-----	-----	-----
LIMITED LIABILITY COMPANY	246,676.	FMV
TOTALS	----- 246,676. =====	

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION -----	ENDING BOOK VALUE -----
FCC LICENSES	14,317,470.
DUE FROM PTR IN COLLAB. ARR.	606,893.
OTHER ASSETS	540,241.

TOTALS	15,464,604.
	=====

FORM 990, PART IV - TAX-EXEMPT BOND LIABILITIES

=====

DESCRIPTION -----		ENDING BOOK VALUE -----
SERIES 2006 REVENUE BONDS		23,000,000.
UNEXPENDED PROCEEDS:	1,369,643.	
THIRD PARTY PERCENTAGE:	0	
	TOTALS	----- 23,000,000. =====

FORM 990, PART IV - OTHER LIABILITIES

=====

DESCRIPTION	ENDING BOOK VALUE
-----	-----
CAPITAL CONTRIBUTION PAYABLE	4,704.
OTHER LIABILITIES	576,040.
FAIR VALUE OF SWAP	575,707.
TOTALS	----- 1,156,451. =====

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

=====

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
-----	-----	-----	-----	-----
VICKEE JORDAN ADAMS 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
JEAN B ANGELL 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE, VICE CHAIR 1.00	NONE	NONE	NONE
THOMAS A BERNSTEIN 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
DAVID R CAPLAN 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
SCHUYLER G CHAPIN 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
ANDREA COLLINS 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
CHARLES M DIKER	TRUSTEE 1.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
160 VARICK STREET NEW YORK, NY 10013				
JERRY DELLA FEMINA 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
MARTHA J FLEISCHMAN 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
SUSAN K FREEDMAN 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
ALEXANDER KAPLEN 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
KATE D LEVIN 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
ANTON J LEVY 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JOANNE MATTHEWS 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
ZARIN MEHTA 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
EDUARDO G MESTRE 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
JONATHAN F MILLER 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
RICHARD A PACE 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
ELLEN POLANER 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

=====

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
-----	-----	-----	-----	-----
NORMAN REDLICH 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
JOHN S ROSE 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
JON W ROTENSTREICH 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
JOSHUA SAPAN 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
HERB SCANNELL 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
IRWIN SCHNEIDERMAN 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
JACK P SCHWEBEL	TRUSTEE 1.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
160 VARICK STREET NEW YORK, NY 10013				
SUSAN R SOLOMON 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
HOWARD S STEIN 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE, TREASURER 1.00	NONE	NONE	NONE
ANDREA L TAYLOR 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
NICKI NEWMAN TANNER 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE, CHAIR 1.00	NONE	NONE	NONE
KEITH THOMAS 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
WILMA S TISCH 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
CYNTHIA KING VANCE 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE 1.00	NONE	NONE	NONE
LULU C WANG 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE, SECRETARY 1.00	NONE	NONE	NONE
ALAN G WEILER 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE, VICE CHAIR 1.00	NONE	NONE	NONE
FRANK D YEARY 160 VARICK STREET NEW YORK, NY 10013	TRUSTEE, VICE CHAIR 1.00	NONE	NONE	NONE
PETER H DARROW 160 VARICK STREET NEW YORK, NY 10013	HONORARY TRUSTEE 1.00	NONE	NONE	NONE
ANNE KLEPPER 160 VARICK STREET NEW YORK, NY 10013	HONORARY TRUSTEE 1.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

=====

NAME AND ADDRESS -----	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
ELI MASON 160 VARICK STREET NEW YORK, NY 10013	HONORARY TRUSTEE 1.00	NONE	NONE	NONE
THOMAS B MORGAN 160 VARICK STREET NEW YORK, NY 10013	HONORARY TRUSTEE 1.00	NONE	NONE	NONE
LAURA WALKER 160 VARICK STREET NEW YORK, NY 10013	PRESIDENT/CEO 35.00	474,808.	33,712.	NONE
GRAND TOTALS		----- 474,808. =====	----- 33,712. =====	----- NONE =====

FORM 990, PART VII - PROGRAM SERVICE REVENUE

=====

DESCRIPTION -----	BUSINESS CODE ----	AMOUNT -----	EXCLUSION CODE ----	AMOUNT -----	RELATED OR EXEMPT FUNCTION INCOME -----
PRODUCTION					1,665,898.
USE OF FACILITY					122,232.
UPLINK REVENUE					22,000.
SATELLITE RADIO					36,923.
SUBCARRIER INCOME					178,500.
COLLABORATIVE ARRANGEMENT					1,917,055.
TOTALS		-----		-----	-----
		=====		=====	=====

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

=====

LINE NO. ---	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES -----
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93	WNYC EARNED PRODUCTION INCOME, UPLINK INCOME, SATELLITE RADIO INCOME AND FACILITIES USE REVENUE IN THE PROCESS OF PROVIDING DIVERSE NON-COMMERCIAL PROGRAMMING. WNYC HAS AN AGREEMENT WITH PUBLIC RADIO INTERNATIONAL, INC. WHEREBY WNYC PRODUCES THE RADIO SHOW STUDIO 360. WNYC WAS REIMBURSED FOR ITS DIRECT AND INDIRECT COSTS UP TO AN AMOUNT SPECIFIED IN AN APPROVED BUDGET. FACILITIES AND SATELLITE UPLINK REVENUE WAS EARNED BY PROVIDING THEIR USE TO OUTSIDE NOT-FOR-PROFIT ORGANIZATIONS. WNYC ALSO ENTERED AN AGREEMENT TO DEVELOP, PRODUCE, AND DISTRIBUTE NON-COMMERCIAL PUBLIC RADIO PROGRAMMING AND DIGITAL CONTENT.
103	MISCELLANEOUS REVENUES GENERALLY SUPPORT THE PRODUCTION OF PROGRAMMING BROADCAST ON WNYC.

SCHEDULE A, PART I - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

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NAME AND ADDRESS -----	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCOUNT -----
VINCENT GARDINO 160 VARICK STREET NEW YORK, NY 10013	EXC DIR-UNDERWRITING 35.00	262,834.	15,575.	NONE
DEAN CAPPELLO 160 VARICK STREET NEW YORK, NY 10013	CCO / SVP - PROG. 35.00	272,072.	31,472.	NONE
MARC SIEGEL 160 VARICK STREET NEW YORK, NY 10013	SR DIR UNDERWRITING 35.00	248,923.	21,305.	NONE
NOREEN OLOUGHLIN 160 VARICK STREET NEW YORK, NY 10013	VP MKT & DIG MEDIA 35.00	222,815.	18,157.	NONE
ADAORA UDOJI 160 VARICK STREET NEW YORK, NY 10013	HOST 35.00	221,538.	23,212.	NONE
	TOTAL COMPENSATION	----- 1,228,182. =====	----- 109,721. =====	----- NONE =====

SCH. A, PART II-A COMPENSATION OF THE 5 HIGHEST PAID FOR PROF. SERV.

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NAME AND ADDRESS -----	TYPE OF SERVICE -----	COMPENSATION -----
TPG PLANNING AND DESIGN LLC 360 PARK AVENUE SOUTH NEW YORK, NY 10010	ARCHITECTS	316,763.
APPLIED DESIGN 1115 BROADWAY NEW YORK, NY 10010	PROJECT MANAGER	241,488.
ARIA COMMUNICATIONS 717 WEST ST. GERMAIN STREET ST CLOUD, MN 56301	PROF FUNDRAISER	240,376.
AMA CONSULTING 250 WEST 39TH STREET NEW YORK, NY 10018	DESIGN CONSULTANT	223,388.
PTS CONSULTING 1 PENN PLAZA SUITE 732 NEW YORK, NY 10119	IT CONSULTANT	190,025.
TOTAL COMPENSATION		----- 1,212,040. =====

SCH. A, PART II-B COMPENSATION OF THE 5 HIGHEST PAID FOR OTHER SERV.

NAME AND ADDRESS	TYPE OF SERVICE	COMPENSATION
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EU SERVICES PO BOX 17164 BALTIMORE, MD 21297	PRINTING & MAILSHOP	445,555.
THREESPOT MEDIA LLC 3333 14TH STREET WASHINGTON, DC 20010	WEB DESIGNERS	274,819.
BFI PRINT COMMUNICATIONS 602 BEDFORD STREET WHITMAN, MA 02382	PRINTING & MAILSHOP	152,987.
RAS TEMPORARY SERVICES INC 6 EAST 39TH STREET NEW YORK, NY 10016	TEMPORARY HELP	134,844.
WILLIAM MORRIS AGENCY 1325 AVENUE OF AMERICAS, 15TH FLOOR NEW YORK, NY 10019	TALENT AGENCY	100,833.
TOTAL COMPENSATION		----- 1,109,038. =====

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

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SEE FORM 990, PART V.

SCHEDULE A, PART IV-A - OTHER INCOME

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DESCRIPTION -----	2006 ----	2005 ----	2004 ----	2003 ----	TOTAL -----
ACCRUED EXPENSE REVERSAL	415,000.	403,000.	828,826.	11,091.	1,657,917.
ROYALTY FEES	32,939.	45,745.	1,081.	NONE	79,765.
MISCELLANEOUS	67,920.	38,169.	50,409.	NONE	156,498.
COMM AFFAIRS/PROG	45,725.	NONE	NONE	NONE	45,725.
TOTALS	561,584.	486,914.	880,316.	11,091.	1,939,905.

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