Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

2022 Open to Public Inspection

interr	iai Reve		ine lateot in		mopeouon				
AF	or th	e 2022 calendar year, or tax year beginning $JUL 1$, 2022 and	ending J	<u>UN 30, 2023</u>					
B c	heck if pplicat	C Name of organization		D Employer identific	ation number				
	Addr	WMHT EDUCATIONAL TELECOMMUNICATIONS IN	c.						
	Name Chan			14-140017	77				
	Initia		Room/suite	E Telephone number					
		A GLOBAL VIEW		518-880-3					
	termi ated			G Gross receipts \$	16,514,522.				
	Amer returr			H(a) Is this a group re	turn				
	Appli tion	F Name and address of principal officer: AN I HON I HAIES		for subordinates?	? Yes X No				
	pend	^{ng} SAME AS C ABOVE		H(b) Are all subordinates inc	cluded? Yes No				
<u> 1</u>	ax-e>	empt status: 🗴 501(c)(3) 🗌 501(c) () (insert no.) 🗌 4947(a)(1) (or 📃 527	If "No," attach a l	list. See instructions				
	Vebs			H(c) Group exemption					
		f organization: 🔀 Corporation 📄 Trust 🦳 Association 🦳 Other	L Year of	of formation: 1967 M	I State of legal domicile: ${f NY}$				
Pa	art I	Summary							
Ð	1	Briefly describe the organization's mission or most significant activities: 1 . T (
Governance		FOUR DISTINCT PUBLIC TELEVISION SERVICES							
erné	2	Check this box if the organization discontinued its operations or dispos	sed of more	1 1					
20K	3				23				
ن ه	4	Number of independent voting members of the governing body (Part VI, line 1b)			22				
Activities &	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)		<u>49</u> 0					
tivit	6								
Act					<u>417,215.</u> 0.				
		Net unrelated business taxable income from Form 990-T, Part I, line 11		7b Prior Year	Current Year				
	8	Contributions and grants (Part VIII, line 1h)		9,119,665.	8,662,734.				
Jue	9			628,744.	519,665.				
Revenue	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		185,344.	209,811.				
Ŗ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		118,384.	49,943.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,052,137.	9,442,153.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
s	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,429,036.	3,886,292.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
<u>þe</u>	b	Total fundraising expenses (Part IX, column (D), line 25) 787, 37	73.						
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		4,803,804.	4,855,037.				
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		8,232,840.	8,741,329.				
	19	Revenue less expenses. Subtract line 18 from line 12		1,819,297.	700,824.				
s or				ginning of Current Year	End of Year				
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		24,630,036.	26,181,900.				
at As	21	Total liabilities (Part X, line 26)		1,732,511.	1,719,942.				
	22	Net assets or fund balances. Subtract line 21 from line 20		22,897,525.	24,461,958.				
	art II	-							
		alties of perjury, I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is				
true,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	lich preparer	has any knowledge.					

Sign	Signature of officer		Date								
Here	ANTHONY HAYES, PRESIDENT										
	Type or print name and title										
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN							
Paid	KEVIN TESTO	KEVIN TESTO	03/25/	/24 self-employed P01435881							
Preparer	Firm's name BONADIO & CO., LL	P		Firm's EIN 16-1131146							
Use Only	Firm's address 6 WEMBLEY CT										
ALBANY, NY 12205 Phone no. (518) 464-4											
May the IF	May the IRS discuss this return with the preparer shown above? See instructions										
232001 12-1	3-22 LHA For Paperwork Reduction Act Notic	ce, see the separate instructions.		Form 990 (2022)							

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2022) WMHT EDUCATIONAL TELECOMMUNICATIONS INC. 14-1400177 Page 2							
Par	t III Statement of Program Service Accomplishments							
1	Briefly describe the organization's mission:							
	WMHT USES MEDIA TO ENRICH OUR COMMUNITIES WITH PROGRAMS AND SERVICES							
	THAT ADVANCE EDUCATION, CULTURE AND CIVIC ENGAGEMENT, EMPOWER							
	INDIVIDUALS, CELEBRATE OUR DIVERSITY, AND REVEAL WHAT WE HAVE IN							
	COMMON.							
2	Did the organization undertake any significant program services during the year which were not listed on the							
	prior Form 990 or 990-EZ?							
	If "Yes," describe these new services on Schedule O.							
•								
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?							
	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.							
	(Code:) (Expenses \$4,992,297. including grants of \$) (Revenue \$105,297.)							
	WMHT PROVIDES WEEKLY LOCAL AND REGIONAL PROGRAMMING ON PUBLIC AFFAIRS,							
	GOVERNMENT, BUSINESS, COOKING, HEALTH, ECONOMIC ISSUES AND ARTS IN NEW							
	YORK'S CAPITAL REGION AND BEYOND.							
	TORK 5 CAFTIAL REGION AND BETOND.							
	PROGRAMMING AT A GLANCE							
	SINCE 1953, WMHT PUBLIC MEDIA HAS PROVIDED PROGRAMS AND SERVICES TO OUR							
	LOCAL COMMUNITIES THAT ENCOURAGE GROWTH AND LEARNING THROUGH THE POWER							
	OF MEDIA. WE ENVISION A COMMUNITY CONFIDENT IN ITS IDENTITY, ITS							
	POTENTIAL FULLY REALIZED, INSPIRED AND CONNECTED THROUGH TRUSTED PUBLIC							
	MEDIA. IN 2023, WE CONTINUED TO ENGAGE OUR COMMUNITY WITH ROBUST							
	CONTENT HIGHLIGHTING THE UNIQUE STORIES AND STRENGTHS HOUSED IN OUR							
	DIVERSE REGION.							
	(Code:) (Expenses \$1,333,771. including grants of \$) (Revenue \$)							
	WMHT HAS 2 RADIO SERVICES WEXT (97.7) A AAA-FORMAT, AND WMHT-FM A							
	CLASSICAL MUSIC STATION. WMHT-FM PROVIDES COMPREHENSIVE CLASICAL MUSIC							
	PROGRAMMING, COMBINING ORIGINAL PRODUCTION, DISTINCTIVE SPECIALITY							
	PROGRAMS, LIVE CONCERT PRESENTATIONS AND THE TALENTS OF LOCALLY AND							
	NATIONALLY-RECOGNIZED HOSTS. THE CLASSICAL MUSIC STATION WMHT-FM IS							
	LOCATED AT 89.1 IN NEW YORK'S CAPITAL REGION AND ON WRHV-FM 88.7 IN THE							
	POUGHKEEPSIE AREA (AND ALSO AVAILABLE VIA HD RADIO), WMHT HELPS KEEP							
	· · · · · · · · · · · · · · · · · · ·							
	THE ARTS THRIVING IN OUR COMMUNITY BY MAKING WONDERFUL CLASSICAL MUSIC							
	ACCESSIBLE TO ALL. WMHT AND WRHV AIRS RENOWNED PROGRAMS SUCH AS							
	"BACH'S LUNCH, "PERFORMANCE TODAY", "SYMPHONYCAST" AND "WMHT LIVE",							
	"COMPOSER'S NOTEBOOK" ALONG WITH NPR NEWS UPDATES. WMHT-FM ALSO							
	CELEBRATES STUDENT MUSICIANS WITH THE MONTHLY FEATURE " CLASSICAL							
	(Code:) (Expenses \$203,560. including grants of \$) (Revenue \$)							
	WHAT DISTINGUISHES WMHT AND PBS FROM OTHER BROADCASTER IS OUR PUBLIC							
	SERVICE COMMITMENT TO FOSTERING LIFELONG LEARNING. THIS COMMITMENT IS							
	REFLECTED IN OUR ON-AIR EDUCATIONAL PROGRAMS, OUR ONLINE SERVICES AND							
	THE WORK WE DO WITHIN THE COMMUNITY. AN ESTABLISHED PBS AFFILIATE							
	SERVING EASTERN NYS AND AREAS OF WESTERN NEW ENGLAND, WMHT-TV OFFERS A							
	RICH ARRAY OF EDUCATIONAL CHILDREN'S TELEVISION PROGRAMS FROM SESAME							
	STREET TO CURIOUS GEORGE. WE ALSO HAVE A DEDICATED CHILDREN'S CHANNEL-							
	PBS KIDS WHICH IS A 24/7 CHANNEL.							
	PBS RIDS WHICH IS A 24// CHANNEL.							
	FY 23 EDUCATION/ LOCAL COMMUNITY OUTREACH FOCUSED ON UNSERVED AND							
	UNDERSERVED AUDIENCES THROUGH PROGRAMS AND SERVICES INCLUDING:							
4d	Other program services (Describe on Schedule O.)							
_	(Expenses \$ 279,381. including grants of \$) (Revenue \$)							
4e	Total program service expenses 6,809,009.							
	Form 990 (2022)							
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Form 990 (2022) WMHT EDUCATI
Part IV Checklist of Required Schedules WMHT EDUCATIONAL TELECOMMUNICATIONS INC. 14-1400177

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
~	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		х
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
'	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
Ŭ	Schedule D, Part III	8		х
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?			
	If "Yes," complete Schedule D, Part IV			
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
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	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			х
d	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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	11d	х	
<u>م</u>	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e	X	
f		110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	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		<u> </u>
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			v
10	foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		X
16		16		х
17	or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	х	
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		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<u> </u>
	complete Schedule G, Part III	19		х
20a		20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	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	21		Х
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 WMHT EDUCATIONAL TELECOMMUNICATIONS INC.
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 Part IV
 Checklist of Required Schedules (continued)
 (continued)
 Figure 4

22 Dot the organization region more than 55,000 of grants or other assistance to one domestic individuals on Part X, coline 4, incred 1, incred 1, and 1, and 5, and 1, and 1				Yes	No
23 Dot the organization answer "Yes" to FarM WL Section A, line 3, 4, of 5, about compensation of the organization's current and former differs, directors, trustees, key employees, and highest compensated employees? If 'Yes, "complete Schedule J. 24 Dot the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the task durit of the year, that was issued after Deamber 31, 2002? If 'Yes, "answer lines 240 through 244 and complete Schedule K. If 'No," around the task durit of the organization matrix any proceeds of tax-exempt bonds beyond a temporary period exception? 24a X 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24a X 24d Did the organization and that in equaged in an excess based transaction. But we are regarized an equal target of the organization and the target and in an excess based transaction with a discussified person in a prior year, and that the transaction have not year do any of the organization go any or any current or form or physibles for any current or form or physibles construction, and store control of any of the appricables for any current or form or physibles for any current or form or fored, director, trustee, key employee, creator or founder, substantial contributor? If 'Yes,' complete Schedule L, Part II. 25b X 25b Did the organization approxes that an discussion to any or the significant approxemation. The divers period as approxemation and the time target of an accession of founder, substantial contributor? If 'Yes,' complete Schedule L, Part IV. 25b X 25b Did the organiza	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directors, trustees, key employees, and highest compensated employees? # 'Yes, ' complete 23 X 240 Did the organization have a tax-exampt 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? # 'Yes,' answer ines 240 through 244 and complete Schedule 1/ No, go to line 25a. 24a X 240 Did the organization invest any proceeds of tax-exampt bonds beyond a temporary paried exception? 24d X 25a Schedule X / No, go to line accrow account the than a refunding second at mut the duning the year to detease any tax-exempt bonds? 24d X 25a Schedule X / No, go to line accrow account the thran a refunding second at mut the users benefit transaction with a disqualified person during the year? 24d X 25a Schedule X / Part / 25a X 25a X 25a Ub the organization across benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization in parts ary amount on Part X, line 6 or 22, for recentables form or payables to any current or former dines, organization activation again or dime assistents to any current or former dines, or complete schedule L, Part I 25b X 25b Did the organization provide again or dime assistent or former dines, or capsite Schedule L, Part I N, instituent or employse thereof, a grant selection commitise members, or to a 50% commolide		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
Schedule J 23 X 4a Dd the organization have a taxe-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the 25 schedule K if Yos,* por to the 25a. 24a X b Dd the organization mustain an earce vacuum construction of the segmentation mustain an earce vacuum to the than a refurcing the search of the organization mustain an earce vacuum to the than a refurcing the search of the search of the organization mustain an earce vacuum to the than a refurcing the search of the search of the organization and that in the organization and that in the organization. But the organization and that in the organization area that in organizations but the organization area that in the organization area that inclus (the organizatinclus (the organizatinclus (the organization area that inclus (the	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
24a Ddt the organization have a tax-exempt bond issue with an outstanding principal enount of more than \$100,000 as of the list 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 X 24b Ddt the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24a X 25a Section 501(c)(3), 501(c)(4), and 501(c)(2)0 organizations. Did the organization at any time during the year to defease any tax-exempt bonds? 24a X 25a Section 501(c)(3), 501(c)(4), and 501(c)(2)0 organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction was not been reported on any of the organization or paylable to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or anyloy the theor of a setting thereable. L Part I 25a X 25 Dd the organization prove again or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 33% controlled entity or churdes, substantial contributor or employee threads for any otherea person? If "Yes," complete Schedule L, Part II 26a X 26 Ub the organization proved as grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 33% controlled entity or a business transaction with one of the following parties (see the Schedule L, Part II 26a X 27 Was the organization neevice more than 825,000 in non-c		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
at day of the year, that was issued after December 31, 2002? // "Yes," answer lines 24b through 24d and complete 24a X b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b X c Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24c X d Did the organization anatian an escrow account offer than a refunding acrow at any time during the year? 24d X 25a Section 50(16)(3, 50(16)(4), and 50(1c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 24d X 25a Section 50(16)(3, 50(16)(4), and 50(1c)(29) organizations. Did the organization in a prior year, and that the transaction has not been reported on any of the organization spitor Forms 980 or 980/E2? # Yes," complete Schedule L, Part I 25b X 25 Did the organization provide a grant or them assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or a 35% concluded any furth infollowing parties (see the Schedule L, Part II) 26b X 27 Did the organization provide a grant or ofamily member of any of these perions? # Yes," complete Schedule L, Part IV 26b X 28 Aurent or forme officer, director, trustee, key employee, creator or founder, or substantial contributor? 27b X 28b X 29 Did the organization exerve or more thand 325,000 in non-cash contributions? # Yes," complete Schedule L, Part		Schedule J	23	X	
Schedule K. If 'Ne,' go to fire 25a 24a X D Od the organization meantain an escrow account other than a refunding secrew at any time during the year to defease any tax exempt bonds? 24d X C Did the organization meantain an escrow account other than a refunding secrew at any time during the year? 24d X Za Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization ange in an excess benefit transaction with a disqualified person uning the year? 25a X Zb the organization accurs as in on behalf of 'issuer for bonds outstanding at any time during the year? 25a X Za Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization spores in a price year, and that the transaction with a disqualified person in a price year, and that the transaction with a disqualified person in a price year, and that the transaction with or dary of these persons? If 'reg,' complete Schedule L, Part I 25a X 27 Did the organization provide a grant or other assistance to any outent of former officer, director, trustee, key employee, creator or founder, substantial contributor, or a 39% controlled drifty of neuron organization secret based of taminy member of any of these persons? If 'reg,' complete Schedule L, Part I 26 X 28 Vast the organization reverse modulus and/or organization secret continuotion of any individual deschedul in the 28a? If 'reg,' complete Schedule L, Part I 26a X 28 A aniny mem	24a				
b Dot the organization meet any proceeds of tax everengb broits beyond a temporary period exception? 24b X c Did the organization meet any proceeds of tax everengb broits beyond a temporary period exception? 24c X d Did the organization and at as an "on behalf O" issuer for bonds outstanding at any time during the year? 24d X d Did the organization act as an "on behalf O" issuer for bonds outstanding at any time during the year? 24d X d Did the organization act as an "on behalf O" issuer for bonds outstanding at any time during the year? 24d X d Did the organization act as an "on behalf O" issuer for bonds outstanding at any time during the year? 24d X d Did the organization act as an the negaden 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 900 or 990-E27. If 'Yes,' complete Schedule L, Part I 26b X 27 Did the organization privide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor? If 'Yes,' complete Schedule L, Part IV 28a X 28 Was the organization aperty but abuses thransacton with one of the following parties (see the Schedule L, Part IV 28a X a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt boods? 24d X 28a Section 501(c)(3), 501(c)(4), and 501(c)(20) organization. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 24d X 24b the organization acts as no to behalf of "issuer for bonds outstanding at any time during the year? 24d X 24b the organization acts as no to behalf of "issuer for bonds outstanding at any time during the year? 24d X 24b the organization avaine that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has no to bean reported on any of the organizations prior Forms 990 or 990 cr 990 cr 990 cr 900 cr 90				X	
any tax-exempt bonds? 24c X 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? 24d X 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? 14d X 25a Dis the organization aware that the engage in an excess benefit transaction with a disqualified person of uring the year? 17 with the transaction has not been reported on any of the organization's prior Forms 980 or 990-E27 17 with "yes," complete Schedule L, Part I 25a X 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% 26 X 27 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, agant selection committee mether or 10 a 35% controlled entity for any limber of any of these persons? 17 with the organization receiver any adapted to the part of any officer, director, trustee, key employee, creator or founder, or substantial contributor? 27 28 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? 17 with, "complete Schedule L, Part N 28a			24b		<u> </u>
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a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? # "yes," complete Schedule L, Part IV 28a X b A family member of any individual described in line 28a? # "yes," complete Schedule L, Part IV 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? # 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? # "yes," complete Schedule M 29 X 30 X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? # "yes," complete Schedule M. Part I 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? # "yes," complete Schedule N, Part I 31 X 32 Did the organization nearty disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? # "yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 X 33 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 34 Was the organization receive any payment from or enage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 35a X 35a Did the organization c	20				
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Form	990 (2022) WMHT EDUCATIONAL TELECOMMUNICATIONS IN	C. 14-1400	177	P	age 5		
Par	t V 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 49					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	IS?	2b	Х			
			3a	Х			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b	Х			
	At any time during the calendar year, did the organization have an interest in, or a signature or other a						
	financial account in a foreign country (such as a bank account, securities account, or other financial a		4a		х		
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 Ac	counts (FBAR)					
5a			5a		Х		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac		5b		X		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the						
Ua			60		х		
L	any contributions that were not tax deductible as charitable contributions?		<u>6a</u>				
D	If "Yes," did the organization include with every solicitation an express statement that such contribution		Ch				
-	were not tax deductible?		<u>6b</u>				
7	Organizations that may receive deductible contributions under section 170(c).		7.	v			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service and the service of the		7a	X X			
			7b	~			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s required			37		
	to file Form 8282?		7c		X		
	If "Yes," indicate the number of Forms 8282 filed during the year	7d					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		7e	Х			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		X		
g	If the organization received a contribution of qualified intellectual property, did the organization file For	m 8899 as required?	7g	Х			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ion file a Form 1098-C?	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				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b				
10	Section 501(c)(7) organizations. Enter:	1					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	-				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1				
11	Section 501(c)(12) organizations. Enter:						
а	Gross income from members or shareholders	11a					
b	Gross income from other sources. (Do not net amounts due or paid to other sources against						
	amounts due or received from them.)	11b					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a				
	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				
	Note: See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which the						
	organization is licensed to issue qualified health plans	13b					
с	Enter the amount of reserves on hand	13c					
			14a		Х		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				<u> </u>		
	excess parachute payment(s) during the year?		15		х		
	If "Yes," see the instructions and file Form 4720, Schedule N.						
16							
10	If "Yes," complete Form 4720, Schedule O.	income?	16		X		
17		ivitios					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act that would result in the imposition of an excise tax under section 4951, 4952 or 49532		17				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.						
000000			Form	990	(2022)		
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Form	990 ((2022)
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WMHT EDUCATIONAL TELECOMMUNICATIONS INC.

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

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

000									
		1			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>	23						
	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 0.		2.2						
b	Enter the number of voting members included on line 1a, above, who are independent	1b	22						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with a	any other						
	officer, director, trustee, or key employee?			2		X			
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	supervision	_		37			
				3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 9		s filed?	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X			
6	Did the organization have members or stockholders?			6		X			
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or								
	more members of the governing body?								
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	lders, or			37			
	persons other than the governing body?			7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ir by the	e following:						
a	The governing body?			8a	X				
b	Each committee with authority to act on behalf of the governing body?			8b	X				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read			_		37			
0	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		Х			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)						
					Yes	No			
	Did the organization have local chapters, branches, or affiliates?			10a		<u> </u>			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?								
11a									
b									
12a									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X				
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	′es," d	escribe		v				
	on Schedule O how this was done			12c	X X				
13	Did the organization have a written whistleblower policy?			13					
14	Did the organization have a written document retention and destruction policy?			14	X				
15	Did the process for determining compensation of the following persons include a review and approva	l by inc	dependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				v				
a	The organization's CEO, Executive Director, or top management official			15a	X				
b	Other officers or key employees of the organization			15b	X				
40-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.								
168	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen			16a		х			
L	taxable entity during the year?								
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ		5	165					
Sec	exempt status with respect to such arrangements?			16b					
17 18	List the states with which a copy of this Form 990 is required to be filed <u>NY, CT, MA, NJ</u> Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	ad 000	T (continue 501(a)(2)a	only	availet				
10		10 990	-1 (Section 501(c)(3)S	only)	avallar	Jie			
	for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other <i>(explain</i>)								
10	▲ Own website ▲ Another's website ▲ Upon request □ Other (explain Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	finan					
19	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 boo	ke on	t records						
20	JULIE RASKIN - 518-880-3400	no di l							
	4 GLOBAL VIEW, TROY, NY 12180-8368								
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Form 990 (2	2022) WMHT	EDUCATIONAL	TELECOMMUNICA	TIONS I	NC. 14-1400177	Page 7				
Part VII	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, Trustee	es, Key Employees, and	d Highest Compensated I	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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

Name and title Average hours per hours of below Description below Description below Pepotable compension from the description organization Repotable compension from related organization Estimated and organization (1) Nobert ALTMAN 40.00 x x 338,829 0. 33,050 (1) Nobert ALTMAN 40.00 x x 154,844 0. 20,091 (2) KATHY BEAM 40.00 x x 154,844 0. 20,091 (3) WILLIAM PEDIGO 40.00 x 140,533. 0. 12,995. (4) JULE RASKIN 40.00 x 126,837. 0. 21,037. (3) KITHY BEAM 40.00 x 112,795. 0. 0. 0. (4) JULE RASKIN 40.00 x 126,837. 0. 21,037. (5) KETT MARTIN 40.00 x 112,795. 0. 0. 0. (1) JULE RASKIN 40.00 x 126,837. 0.	(A)	(B)	(C)		(D)	(E)	(F)				
hours per veck week (list any burner of a section and a section and burner and a section and organizations compensation from the organizations (W-2/1099-NISC/ 1099-NEC) compensation the organizations (W-2/1099-NISC/ 1099-NEC) annount of the organizations (1) ROBERT ALTMAN 40.00 x x 338,829 0. 33,050. (2) RATHE BEAM 40.00 x x 154,844 0. 20,091. (3) WILLIAM PEDICO 40.00 x x 140,533. 0. 12,995. (4) JULE RASKIN 40.00 x 126,837. 0. 21,037. (5) RETH MARTIN 40.00 x 116,716. 0. 20,051. (6) GEORGE RUBERTEN 40.00 x 123,049. 0. 11,700. (7) CHLISE RASKINEN 40.00 x 123,049. 0. 0. 0. (10 SERET ALTMAN 40.00 x 123,049. 0. 11,700. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. <	Name and title	Average	(do	Position		Reportable	Reportable	Estimated			
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(16) BARB NELSON 1.00 X 0. 0. 0. TRUSTEE X 0. 0. 0. 0. (17) KHADIJAH PEEK 1.00 X 0. 0. 0. TRUSTEE X 0. 0. 0. 0.	(15) MARTIN MBUGUA	1.00									
TRUSTEE X 0. <th< td=""><td>TRUSTEE</td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>	TRUSTEE		Х						0.	0.	0.
(17) KHADIJAH PEEK 1.00 X 0. <td>(16) BARB NELSON</td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(16) BARB NELSON	1.00									
TRUSTEE X 0. 0. 0.	TRUSTEE		Х						0.	0.	0.
	(17) KHADIJAH PEEK	1.00									
	TRUSTEE		Х						0.	0.	

232007 12-13-22

Form 990 (2022)

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	CATIONAL	L L	EL	ιEC	!OM	1MU	ΝI	CATIONS INC.	14-14	<u>00</u> :	177	Page 8
Part VII Section A. Officers, Directors, Tru	stees, Key Em	oloy	ees,	and	d Hig	ghes	st C	ompensated Employee	s (continued)			
(A)	(B)				C)			(D)	(E)		(F)
Name and title	Average	(-1-			sitior			Reportable	Reportable			nated
	hours per	box	, unles	ss pe	rson i	than (is both	n an	compensation	compensation	1	amou	unt of
	week	offi	cer an	nd a d	lirecto	or/trus	tee)	from	from related		otl	her
	(list any	ector						the	organizations		compe	nsation
	hours for	or dir				ted		organization	(W-2/1099-MIS0	C/		n the
	related	stee o	ruste			Densa		(W-2/1099-MISC/	1099-NEC)		•	ization
	organizations	al tru:	onal t		loyee	comb		1099-NEC)				elated
	below line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former				organi	zations
(18) DEL B SALMON	1.00	-	<u> </u>		1×	<u>=</u> =	Œ			\neg		
TREASURER		х		x				0.		0.		0.
(19) TOBI SAULNIER	1.00											
TRUSTEE		x						0.		0.		0.
(20) MARY SIMONI	1.00									<u> </u>		
TRUSTEE	1.00	x						0.		0.		0.
(21) DANIKA VITTORIO	1.00	Δ				-		0.		••		
TRUSTEE	1.00	x						0.		0.		0.
(22) TERESA ZIELINSKI	1.00	Δ						0.		••		
TRUSTEE	1.00	x						0.		0.		0.
(23) BRIDGET BALL SHAW	1.00											
TRUSTEE		х						0.		0.		0.
(24) DORIS FISCHER MALESARDI	1.00									_		
TRUSTEE		х						0.		0.		0.
(25) KATHY JIMINO	1.00											
TRUSTEE		х						0.		0.		0.
(26) TAMMIS GROFT	1.00											
TRUSTEE		Х						0.		0.		0.
1b Subtotal								1,094,264.		0.	<u>138,</u>	,223.
c Total from continuation sheets to Part V								0.		0.		0.
d Total (add lines 1b and 1c)								1,094,264.		0.	138,	,223.
2 Total number of individuals (including but								eceived more than \$100,	000 of reportable			
compensation from the organization												6
											Y	es No
3 Did the organization list any former office	r, director, trust	ee, k	key e	empl	loye	e, or	hig	hest compensated emp	loyee on			
line 1a? If "Yes," complete Schedule J for	such individual										3	X
4 For any individual listed on line 1a, is the s												
and related organizations greater than \$15	0,000? If "Yes.	" со	mple	ete S	Sche	edule	e J f	for such individual			4 Z	X
5 Did any person listed on line 1a receive or												
rendered to the organization? If "Yes." col										[5	X
Section B. Independent Contractors				····,								
1 Complete this table for your five highest c	ompensated inc	lepe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of compe	ensat	ion from	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.			
(A)								(B)			(C)	
Name and busines								Description of s	ervices	<u> </u>	ompensa	ation
CONTRIBUTOR DEVELOPMENT	PARTNERS	ΗI	Ρ									
10 GUEST STREET, BOSTON,	MA 0213	5						FUNDRAISING	SERVICE		653,	,294.
JIM HOPPIN, 14 KING PHIL	IP DRIVE	,	OL	D								
ORCHARD BEACH, ME 04064								EDITOR			133,	,650.
COMPLETE NETWORK SUPPORT	, 14 COR	PO	RA	ΤE								
BLVD. SUITE 217, ALBANY,	NY 1221	1						IT SUPPORT			125,	<u>,670.</u>
									T			
2 Total number of independent contractors	including but a	ot lin	nitor	1 + 2	thee		tod	above) who received m	ore than			
2 Total number of independent contractors \$100,000 of compensation from the organ	-	or in	mec	10		se iis 3	red	above, who received mo				
SEE PART VII, SECTIO		IN	UA	тт	-	-	HE	ETS			Form 99	0 (2022)
_,												·/

SEE PART VII, SECTION A CONTINUATION SHEETS 232008 12-13-22

	CATIONAL	, T	EL	EC	OM	MU	NI	CATIONS INC.	14-140	0177
Part VII Section A. Officers, Directors, Tru		nplo	yee			lighe	est (· · · ·	
(A) Name and title	(B) Average hours	(cł		((Pos all 1			ly)	(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key em ployee	Highest com pensated em ployee	Former	from the organization (W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(27) GINA MINTZER TRUSTEE	1.00	x						0.	0.	0.
(28) SUSAN NOVOTNY	1.00									
TRUSTEE (29) KAREN OPALKA	1.00	Х						0.	0.	0.
TRUSTEE		х						0.	0.	0.
(30) GWEN WRIGHT TRUSTEE	1.00	x						0.	0.	0.
		-								
		-								
		-								
Total to Part VII, Section A, line 1c		<u></u>	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>			

232201 04-01-22

Form					JCATIO	NAL TELEC	COMMUNICAT	LONS INC.	14-1400	177 Page 9
Pa	rt V	/111	Statement of Re	venue						
			Check if Schedule O	contains a	response	or note to any lin	((B)	(C)	
							(A) Total revenue	Related or exempt	Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ស ស	1	а	Federated campaigns		1a					
ran			•• • • • •		1b					
Contributions, Gifts, Grants and Other Similar Amounts			Fundraising events		1c					
Sifts ar /		d	Related organizations		1d					
imi) imil		е	Government grants (contr	ributions)	1e	1,496,586.				
tior S		f	All other contributions, gifts,							
l thu			similar amounts not included		1f	7,166,148.				
ont nd (-	Noncash contributions included in	lines 1a-1f	1g \$		8 662 734			
ы С		h	Total. Add lines 1a-1f	<u></u>	<u></u>	Business Code	8,662,734.			
	2	~	PRODUCTION REVENUE			541900	519,665.	102,450.	417,215.	
Program Service Revenue	_	a b				511500	515,005.	102,100.	11, 113.	
Ser		c								
me S		d								
Be		e								
Pro		f	All other program service	revenue						
		g	Total. Add lines 2a-2f				519,665.			
	3		Investment income (includ	ding divide	ends, intere	est, and				
							256,907.			256,907
	4		Income from investment of							
	5		Royalties				3,274.	3,274.		
	-		a		(i) Real	(ii) Personal				
			Gross rents	6a	31,200. 0.					
			Less: rental expenses Rental income or (loss)	6b 6c	31,200.					
			Net rental income or (loss)	· · · ·			31,200.	31,200.		
			Gross amount from sales of		Securities	(ii) Other	-,			
	•	-	assets other than inventory		618,777.					
		b	Less: cost or other basis							
e			and sales expenses	7b ⁶ ,	654,329.	418,040.				
venue		с	Gain or (loss)	7c	-35,552.	-11,544.				
0		d	Net gain or (loss)				-47,096.	-47,096.		
Other R	8	а	Gross income from fundraisi							
đ			including \$							
			contributions reported on	-						
		I -	Part IV, line 18							
			Less: direct expenses							
			Gross income from gamin		-					
	5	-	Part IV, line 19							
		b	Less: direct expenses							
			Net income or (loss) from			· · · · · · · · · · · · · · · · · · ·				
	10	а	Gross sales of inventory, I	less return	is 🗌					
			and allowances		<u>10a</u>					
		b	Less: cost of goods sold		10b					
$ \rightarrow $		с	Net income or (loss) from	sales of in	iventory					
S			NT 4481 1 1 188 4 18	-		Business Code	45.465	45.45		
leou	11		MISCELLANEOUS INCOM	Б		900003	15,469.	15,469.		
llan /eni		b								
Miscellaneous Revenue		с С								
Ξ			All other revenue				15,469.			
	12		Total revenue. See instruction				9,442,153.	105,297.	417,215.	256,907.
232009							· ·	· · ·	. ,	Form 990 (2022

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ect	ion 501(c)(3) and 501(c)(4) organizations must compl	ete all columns. All othe	r organizations must con	nplete column (A).	
	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
ŀ	Benefits paid to or for members				
	Compensation of current officers, directors,				<i></i>
	trustees, and key employees	889,859.	559,040.	262,407.	68,41
,	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
	persons described in section 4958(c)(3)(B)	0 054 000	1 000 001	150 555	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	Other salaries and wages	2,251,990.	1,778,781.	153,757.	319,45
;	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
)	Other employee benefits				
	Payroll taxes	744,443.	556,870.	96,773.	90,80
	Fees for services (nonemployees):				
а	Management	126,616.	33,864.	92,752.	
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	000 101	0.65 4.00		21 01
	column (A), amount, list line 11g expenses on Sch 0.)	993,101.	865,483.	96,608.	31,01
	Advertising and promotion	17,192.	4,076.	12,552.	56
	Office expenses	112,536.	103,129.	6,720.	2,68
	Information technology	74,355.	70,640.	1,429.	2,28
	Royalties		061 540		
	Occupancy	261,543.	261,543.	100.054	10 50
	Travel	172,159.	49,328.	109,254.	13,57
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings	10 701		12 704	
		13,724.		13,724.	
	Payments to affiliates	616 002	512 207	10 267	E1 10
	Depreciation, depletion, and amortization	616,003.	513,327.	48,267.	54,40
		96,288.		96,288.	
	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 0.)				
а	BROADCAST RIGHTS	930,004.	930,004.		
a b	COMPUTER SERVICES	423,842.	149,586.	82,631.	191,62
с С	NETWORK FEES	290,223.	290,223.		
d	MAINTENANCE	200,727.	200,060.	667.	
	All other expenses	526,724.	443,055.	71,118.	12,55
e	Total functional expenses. Add lines 1 through 24e	8,741,329.	6,809,009.	1,144,947.	787,37
	Joint costs. Complete this line only if the organization	•,,			101101
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

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232010 12-13-22

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Form 990 (2022)

Form 990 (2022)

Part X Balance Sheet

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

					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,661,791.	1	1,587,228.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			579,065.	4	324,982.
	5	Loans and other receivables from any current or					
	•	trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of these				5	
	6	Loans and other receivables from other disqualifi				-	
	-	under section 4958(f)(1)), and persons described				6	
6	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9	_			155,372.	9	146,444.
		Land, buildings, and equipment: cost or other			,.		
		basis. Complete Part VI of Schedule D	10a	19,464,622.			
	b		10b		7,477,551.	10c	7,275,467.
	11	Investments - publicly traded securities			12,177,682.	11	13,898,679.
	12	Investments - other securities. See Part IV, line 1			1,095,250.	12	1,062,410.
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	1,483,325.	15	1,886,690.		
	16	Total assets. Add lines 1 through 15 (must equa			24,630,036.	16	26,181,900.
	17	Accounts payable and accrued expenses			479,487.	17	450,855.
	18	Grants payable				18	
	19	Deferred revenue	425,990.	19	365,533.		
	20	Tax-exempt bond liabilities	779,358.	20	403,119.		
	21	Escrow or custodial account liability. Complete F	Part IV	of Schedule D		21	
S	22	Loans and other payables to any current or form	er offic	er, director,			
Liabilities		trustee, key employee, creator or founder, substa	antial c	contributor, or 35%			
iabi		controlled entity or family member of any of thes	e pers	ons		22	
	23	Secured mortgages and notes payable to unrelate	ted thi	rd parties		23	
	24	Unsecured notes and loans payable to unrelated	third p	oarties		24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X			
		of Schedule D			47,676.	25	500,435.
	26	Total liabilities. Add lines 17 through 25			1,732,511.	26	1,719,942.
s		Organizations that follow FASB ASC 958, chec	ck her	e X			
JCe	~-	and complete lines 27, 28, 32, and 33.			22,782,516.		24 260 017
alaı	27				115,009.	27	24,369,017. 92,941.
dB	28				115,009.	28	92,941.
'n		Organizations that do not follow FASB ASC 95	bo, che				
or F	00	and complete lines 29 through 33.				00	
Net Assets or Fund Balances	29 20	Capital stock or trust principal, or current funds				29	
SSE	30 21	Paid-in or capital surplus, or land, building, or eq				30	
et A	31	Retained earnings, endowment, accumulated inc			22,897,525.	31 32	24,461,958.
ž	32				24,630,036.	32	26,181,900.
	33	Total liabilities and net assets/fund balances			44,030,030.	33	20,101,900.

<u>14-1400177</u> Page **11** WMHT EDUCATIONAL TELECOMMUNICATIONS INC.

Form **990** (2022)

Form	990 (2022) WMHT EDUCATIONAL TELECOMMUNICATIONS INC.	14-	1400177	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,442		
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,743	-	
3	Revenue less expenses. Subtract line 2 from line 1	3),82	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	22,89		
5	Net unrealized gains (losses) on investments	5	942	2,92	<u>27.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-79	9,31	18.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	24,463	1,9!	58.
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis 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 the			_	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		<u>3a</u>		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	

Form **990** (2022)

232012 12-13-22

SCHEE	DULE A		Dublic Che	rity Status on		lia Cu	unnart		OMB No. 1545-0047
(Form 99	90)		omplete if the organ	rity Status an hization is a section 501 47(a)(1) nonexempt cha	l(c)(3) orga	anization			2022
Department o Internal Reve	of the Treasury nue Service		A	ttach to Form 990 or Fo	orm 990-E	Z.	overation		Open to Public Inspection
Name of	the organizati		Go to www.irs.gov/	Form990 for instruction	is and the	e latest inf	ormation.	Employer	identification number
			FDUCATION	AL TELECOMMU	NTC ATT	LONG 1	NC		4-1400177
Part I	Reason	for Public C	Charity Status.	(All organizations must c	complete th	nis part) S	ee instruction		111001//
				For lines 1 through 12, c					
1		-		on of churches described	•		VAVi)		
2	-			Attach Schedule E (Forn			·//~///·		
3				anization described in s)/b)/1)/ Δ //ii	i)		
4	-	-		njunction with a hospital			-)(iii). Enter t	the hospital's name.
• 🗆	city, and state	-		· • • • • • • • • • • • • • • • • • • •				,,,	···- ··,
5	-	-	or the benefit of a co	llege or university owned	l or operat	ed by a go	vernmental u	nit describe	d in
	0	•	Complete Part II.)	o ,	•	, 0			
6				nental unit described in	section 17	70(b)(1)(A)	(v).		
7 X	An organizati	on that norma	Ily receives a substa	ntial part of its support fi	rom a gove	ernmental	unit or from tl	ne general p	ublic described in
	section 170()(1)(A)(vi). (C	omplete Part II.)						
8	A community	trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9	An agricultura	al research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	nction with a	land-grant o	college
	or university of	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	or
	university:								
10	An organizati	on that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	gross receipts from
				t to certain exceptions; a					-
				(less section 511 tax) fro	om busines	sses acqui	red by the ore	ganization at	fter June 30, 1975.
			mplete Part III.)						
11	•	-	-	ively to test for public sa	•				
12 📖	•	-	-	ively for the benefit of, to	-				-
			-	ed in section 509(a)(1) o					heck the box on
- L	-	-		f supporting organization		-		•	
a			-	upervised, or controlled	• • • •	-			-
		0		gularly appoint or elect a	пајопту с	or the direc	tors or truste	es or the su	pporting
b	¬ -		complete Part IV, Se	l or controlled in connect	tion with it	e sunnorte	d organizatio	n(s) by bayi	ina
			-	anization vested in the sa			-		•
		-	t complete Part IV,		anic perso	113 1121 001		ge the supp	
c				g organization operated	in connect	tion with, a	and functiona	llv integrated	d with
-). You must complete I					,
d		-		porting organization oper				rted organiz	ation(s)
	- ,,		• • •	zation generally must sat				0	()
				nplete Part IV, Sections					
е 🗌	Check this	box if the orga	anization received a	written determination fro	m the IRS	that it is a	Туре I, Туре	II, Type III	
	functionally	integrated, or	r Type III non-functio	nally integrated supporti	ng organiz	ation.			
f Ente	er the number	of supported o	organizations						
<u> </u>		0	n about the supporte	<u> </u>	(iv) is the ora:	anization listed			
	i) Name of suppo organization		(ii) EIN	(iii) Type of organization (described on lines 1-10		anization listed ing document?	(v) Amount o support (see ii	,	(vi) Amount of other support (see instructions)
	organization			above (see instructions))	Yes	No		istructions)	
			1	1					

Total

Schedule A (Form 990) 2022 WMHT EDUCATIONAL TELECOMMUNICATIONS INC. 14-1400177 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	8681187.	8423084.	8921328.	9119665.	8662734.	43807998.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3	8681187.	8423084.	8921328.	9119665.	8662734.	43807998.
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.						43807998.
	ction B. Total Support	1	F	[1	1	
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	8681187.	8423084.	8921328.	9119665.	8662734.	43807998.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots	168,492.	154,994.	339,394.	200,637.	256,907.	1120424.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	11,585.	7,206.	2,976.	546.	0.	22,313.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	181,892.	184,572.	145,755.	115,389.		
11	Total support. Add lines 7 through 10						45710459.
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, t	fourth, or fifth tax y	/ear as a section 5	01(c)(3)	
	organization, check this box and stop						
Sec	ction C. Computation of Publi	c Support Per	centage			<u>г г</u>	
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11, o	column (f))		14	95.84 %
	Public support percentage from 2021					15	95.74 %
1 6a	33 1/3% support test - 2022. If the o				14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2021. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	-					
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances te	est. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not o	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	nstances test, cheo	ck this box and st	t op here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a		
						Schedule A	(Form 990) 2022

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Schedule A (Form 990) 2022 WMHT EDUCATIONAL TELECOMMUNICATIONS INC. 14-1400177 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support		,				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (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 per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		1		1		
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
	Amounts from line 6 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 11	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
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	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3) orgai	nization,
_	check this box and stop here		-				
	ction C. Computation of Publi						
	Public support percentage for 2022 (I			column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves						
	Investment income percentage for 20					17	%
	Investment income percentage from						%
19a	33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2021. If the						
00	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check tl	nis box and see ins		
23202	23 12-09-22					Scheo	dule A (Form 990) 2022

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Schedule A (Form 990) 2022

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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

- 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.
- 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).
- **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.
- **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.
- c 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.
- **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.
- **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.*
- **c** 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.*
- 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 designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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 with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If* "Yes." *complete Part I of Schedule L (Form 990).*
- **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.**
- **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.**
- c 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.
- **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.*
- **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.)

17

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Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Schedule A (Form 990) 2022 WMHT EDUCATIONAL TELECOMMUNICATIONS INC. 14-1400177 Page 5

			—	<u> </u>
			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		
Sec	ction B. Type I Supporting Organizations			
			Vaa	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? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization</i> (s) <i>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</i>		
	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.

Section 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								
				1					

or management of the supporting organization was vested in the same persons that controlled or managed	
the supported organization(s).	

Section 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?	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		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the	e Integral Part Test during the year	(see instructions).
•			

a ____ The organization satisfied the Activities Test. Complete line 2 below.

b		The organization is t	he parent of each	of its supported	organizations.	Complete line 3 below.
---	--	-----------------------	-------------------	------------------	----------------	------------------------

с		The organization support	ed a governmental en	tity. Describe in	Part VI how	you supported a	governmental entity	, (see instruction <u>s).</u>
---	--	--------------------------	----------------------	-------------------	-------------	-----------------	---------------------	-------------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- 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.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**

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.* 232025 12-09-22

3b | | Schedule A (Form 990) 2022

2a

2b

3a

Yes No

2

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_	dule A (Form 990) 2022 WMHT EDUCATIONAL TELECO			4-1400177 Page 6					
Pa									
1	Check here if the organization satisfied the Integral Part Test as a qualifying			Part VI). See instructions.					
	All other Type III non-functionally integrated supporting organizations must	complet	e Sections A through E.						
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-functionally integrated Type III supporting organization (see								

instructions).

Schedule A (Form 990) 2022

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		NAL TELECOMMUN			4-1400177	Page 7
Par		allo Supporting Orga	nizations (continu	ied)	A 14	
	on D - Distributions			-	Current Ye	ar
1	Amounts paid to supported organizations to accomplish exer			1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		_		
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	8	3		
4	Amounts paid to acquire exempt-use assets	-		4		
5	Qualified set-aside amounts (prior IRS approval required - pro		5			
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	e organization is responsive		•		
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2022 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount	(1)	()	10	()	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	IS	(iii) Distributab Amount for 2	
1	Distributable amount for 2022 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2022 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2022					
а	From 2017					
	From 2018					
	From 2019					
	From 2020					
е	From 2021					
f	Total of lines 3a through 3e					
	Applied to underdistributions of prior years					
	Applied to 2022 distributable amount					
	Carryover from 2017 not applied (see instructions)					
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2022 from Section D,					
	line 7: \$					
а	Applied to underdistributions of prior years					
	Applied to 2022 distributable amount					
	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2023. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
а	Excess from 2018					
	Excess from 2019					
	Excess from 2020					
	Excess from 2021					
	Excess from 2022					
-						

Schedule A (Form 990) 2022

Schedule A	(Form 990) 2022	WMHT	EDUCATIONAL	TELECOMMUN	NICATIONS	INC. 14-1400177 Pag
Part VI	Supplemental Infor Part IV, Section A, lines 1	mation. , 2, 3b, 3c, lines 2 and	Provide the explanation 4b, 4c, 5a, 6, 9a, 9b, 9c 3; Part IV, Section E, lir	s required by Part II, , 11a, 11b, and 11c nes 1c, 2a, 2b, 3a, ai	, line 10; Part II, line ; Part IV, Section B, nd 3b; Part V, line 1	17a or 17b; Part III, line 12; lines 1 and 2; Part IV, Section C, ; Part V, Section B, line 1e; Part V,
232028 12-09-2	2					Schedule A (Form 990) 2
				21		

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

1	4-	1	4	0	0	1	7	7
	-	_	-	v	v	-		

	WMHT	EDUCATIONAL TELECOMMUNICATIONS INC.	1
Organization type (che	eck one):		
Filers of:	Sec	tion:	
Form 990 or 990-EZ	X	501(c)(3) (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	
		527 political organization	
Form 990-PF		501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set in the set of the parts unless to the set of the parts unless to the set of the set of the set of the parts unless to the set of the set

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

1	GRANTS		Person X
	401 NINTH STREET NW	\$ 1,778,475.	Payroll Noncash
	WASHINGTON, NY 20004		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	NEW YORK STATE DEPARTMENT OF EDUCATION GRANTS		Person X Payroll
	ROOM 510W EB 89 WASHINGTON AVENUE	\$1,496,586.	Noncash (Complete Part II for
	ALBANY, NY 12234		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll
		\$	Noncash
			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
223452 11-15	5-22 23	1	Schedule B (Form 990) (2022)

Part I

(a)

No.

Name of organization

11280325 784124 WMH001001

WMHT EDUCATIONAL TELECOMMUNICATIONS INC.

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(b)

Name, address, and ZIP + 4

CORPORATION FOR PUBLIC BROADCASTING

14-1400177

(c)

Total contributions

Employer identification number

(d)

Type of contribution

Page **2**

art II	EDUCATIONAL TELECOMMUNICATIONS INC.	· · · · · · · · · · · · · · · · · · ·	L4-1400177
	Noncash Property (see instructions). Use duplicate copies of Pa	t ii ii additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
—		—	
		\$	-
(a)		(c)	
No. from Part I	(b) Description of noncash property given	FMV (or estimate) (See instructions.)	(d) Date received
—		<u> </u>	
		\$	_

Employer identification number

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

Name of organization

Schedule	B (Form 990) (2022)			Page 4
Name of c	organization			Employer identification number
WMHT	EDUCATIONAL TELECOMMUNI	CATIONS INC.		14-1400177
Part III		ons to organizations described in se		
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or I	ess for the year. (Enter this inf	fo. once.) \$
(a) No.	Use duplicate copies of Part III if additional	space is needed.		
`from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held
			[
			<u> </u>	
		(e) Transfer of gif	t	
	Transferee's name, address, a	nd ZIP + 4	Relationship of t	transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held
Part I				
		(e) Transfer of gift	l	
	Transferee's name, address, a	nd ZIP + 4	Relationship of t	transferor to transferee
(a) No. from				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held
		(e) Transfer of gif	:	
	Transferee's name, address, a	nd ZIP + 4	Relationship of f	transferor to transferee
		[
(a) Na				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held
<u> </u>				
		(e) Transfer of gif		
		nd 7 ID + 4	Dolationabia -f	transforar to transforas
	Transferee's name, address, a			transferor to transferee
223454 11-1	5-22	I		Schedule B (Form 990) (2022)

25 2022.05080 WMHT EDUCATIONAL TELECOMM WMH00101

SCHEDULE C	Po	litical Campaign a	nd Lobbyin	g Activities		OMB No. 1545-0047
(Form 990)	7	2022				
	-	anizations Exempt From Income if the organization is described b				Open to Public
Department of the Treasury Internal Revenue Service	Go	to www.irs.gov/Form990 for in	structions and the lat	test information.		Inspection
If the organization ans	wered "Yes," on	Form 990, Part IV, line 3, or For	m 990-EZ, Part V, lin	e 46 (Political Campa	ign Activ	rities), then
 Section 501(c)(3) or 	ganizations: Com	plete Parts I-A and B. Do not com	plete Part I-C.		-	
 Section 501(c) (othe 	r than section 50	1(c)(3)) organizations: Complete P	arts I-A and C below.	Do not complete Part I	-В.	
 Section 527 organiz 	ations: Complete	e Part I-A only.				
-		Form 990, Part IV, line 4, or For			-	
		nave filed Form 5768 (election und		•	•	
		nave NOT filed Form 5768 (election	. ,	· ·		•
Tax) (See separate inst		Form 990, Part IV, line 5 (Proxy	Tax) (See separate in	istructions) or Form s	<i>9</i> 90-Е Z , Р	Part V, line 35C (Proxy
		ions: Complete Part III.				
Name of organization	,, (., g			E	Employer	r identification number
	WMHT ED	UCATIONAL TELECOM	MUNICATIONS	INC.	1	4-1400177
Part I-A Compl		anization is exempt under			' organ	ization.
1 Provide a description	on of the organiz	ation's direct and indirect political	campaign activities in	n Part IV.		
2 Political campaign	activity expendit	ures			. \$	
3 Volunteer hours for	political campai	gn activities			·	
Dout L D Compl	ata if tha ara	anization is exempt under	- acation E01/a)/2			
-	-	•		-		
		incurred by the organization under			··· ·	
		incurred by organization managers n 4955 tax, did it file Form 4720 fo				Yes No
b If "Yes," describe in						
		anization is exempt under	[·] section 501(c), e	except section 50)1(c)(3).	
1 Enter the amount c	lirectly expended	l by the filing organization for secti	on 527 exempt function	on activities	. \$	
		ization's funds contributed to othe				
exempt function ac	tivities				. \$	
3 Total exempt funct	ion expenditures	. Add lines 1 and 2. Enter here and	d on Form 1120-POL,			
					\$	
						Yes No
		ployer identification number (EIN)				
	-	tion listed, enter the amount paid to a sometry and directly delivered to a sometry delivered to a s				-
		additional space is needed, provid			arace seg	gregated fund of a
(a) Name		(b) Address	(c) EIN	(d) Amount paid fro	om (e) Amount of political
(u) Harris	5			filing organization	's cor	ntributions received and
				funds. If none, enter		promptly and directly lelivered to a separate
						political organization.
						If none, enter -0
E. D	ion Act Nation	and the Instructions for Form 00		1		dula C (Farm 000) 0000

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

Schedule C (Form 990) 2022

232041 11-08-22

				OMMUNICATION		
Part II-A Complete if the orga	anizatio	n is exer	npt under sectior	n 501(c)(3) and file	ed Form 5768 (ele	ection under
section 501(h)).						
			• • •	Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and share			• •			
B Check if the filing organizat	tion check	ed box A ar	nd "limited control" pro	ovisions apply.		1
Limit	s on Lob	oying Expe	nditures		(a) Filing	(b) Affiliated group
			ints paid or incurred.))	organization's totals	totals
1a Total lobbying expenditures to influ	-					
b Total lobbying expenditures to influ						
c Total lobbying expenditures (add lir		11b)				
d Other exempt purpose expenditure						
e Total exempt purpose expenditures						
f Lobbying nontaxable amount. Ente						
If the amount on line 1e, column (a) or	r (b) is:		bying nontaxable am			
Not over \$500,000		20% of	the amount on line 1e.			
Over \$500,000 but not over \$1,000			00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,50			00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,0	000,000		00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000		\$1,000,	000.			
g Grassroots nontaxable amount (ent		,				
h Subtract line 1g from line 1a. If zero						
i Subtract line 1f from line 1c. If zero						
j If there is an amount other than zer		r line 1h or	line 1i, did the organiza	ation file Form 4720	r	
reporting section 4911 tax for this y	/ear?					Yes No
			eraging Period Under			
(Some organizations th			ate instructions for lir		of the five columns be	elow.
		-				
	LODI		nditures During 4-Yea			
Calendar year	(2) (2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
(or fiscal year beginning in)	(a) 4	2010	(0) 2020		(d) 2022	(e) rotar
O - Labla in a saturable and sat						
2a Lobbying nontaxable amount						
 b Lobbying ceiling amount (150% of line 2a, column(e)) 						
Tabal labor in a survey difference						
c Total lobbying expenditures						
d. Cressreate pertovable emount						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots Johnving avaanditures						
f Grassroots lobbying expenditures			1	1		1

Schedule C (Form 990) 2022

232042 11-08-22

Schedule C (Form 990) 2022 WMHT EDUCATIONAL TELECOMMUNICATIONS INC 14-1400177 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

(election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(i	a)	(b)		
of the lobbying activity.	Yes	No	Amo	ount	
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:		v			
a Volunteers?		X X			
 b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Madia advantiacements2 		X			
c Media advertisements?d Mailings to members, legislators, or the public?		X			
		X			
		X			
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X			
i Other activities?	X		52	,691.	
j Total. Add lines 1c through 1i				,691.	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		х		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	ו 501(c)(5), or sec	tion		
			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 Did the organization agree to carry over lobbying and political campaign activity expenditures from the					
Part III-B Complete if the organization is exempt under section 501(c)(4), section				0 :-	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered " answered "Yes."	NO" UR	(b) Part I	II-A, IINe	3, IS	
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al				
expenses for which the section 527(f) tax was paid).					
a Current year					
b Carryover from last year		<u>2</u> b			
c Total					
		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce					
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical				
expenditures next year?		4			
5 Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information		5			
	Red): Devit II	A 11 4			
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group instructions); and Part II-B, line 1. Also, complete this part for any additional information. PART II-B, LINE 1, LOBBYING ACTIVITIES:	iist), Part II .	A, ines i a	10 2 (See		
WMHT MAKES QUARTERLY PAYMENTS TO HELP SUPPORT THE OFFI	CE OF	THE			
ASSOCIATION OF PUBLIC BROADCASTING STATIONS OF NEW YOR	K STAT	TE (AP	BS). A		
PORTION OF THE TIME OF THE EXECUTIVE DIRECTOR OF THE A	PBSNYS	S IS S	PENT		
SEEKING APPROPRIATIONS FOR THE STATE'S PUBLIC TELEVISI	ON ANI	O RADI	0		
STATIONS FROM THE NEW YORK STATE LEGISLATURE IN SUPPOR	TOFT				
232043 11-08-22		Schedu	lle C (Form	990) 2022	

Schedule C (Form 990) 2022 WMHT EDUCATIONAL TELECOMMUNICATIONS INC 14-1400177 Page 4
Part IV Supplemental Information (continued)

ACTIVITIES. THE AMOUNT PAID BY WMHT TO APBS IN FY 23 WAS \$25,101

ADDITIONALLY, WMHT MAKES AN ANNUAL PAYMENT TO HELP SUPPORT THE OFFICE OF AMERICA'S PUBLIC TELEVISION STATIONS (APTS) IN WASHINGTON, DC. APTS FUNCTIONS AS A SOURCE OF INFORMATION ON MATTERS RELATING TO PUBLIC TELEVISION EXPENDITURES, PROGRAMMING EFFORTS, AND ACCOMPLISHMENTS FOR MEMBERS OF THE U.S. CONGRESS, THEIR STAFFS, AND OTHER CONCERNED INDIVIDUALS IN THE FEDERAL GOVERNMENT. THE AMOUNT PAID BY WMHT TO APTS IN FY 23 WAS \$27,590

Schedule C (Form 990) 2022

232044 11-08-22

SCHEDU	ILE D
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(Form 9	90)
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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.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.



Department of the Treasury Internal Revenue Service Name of the organization

WMHT EDUCATIONAL TELECOMMUNICATIONS INC.

 $\begin{array}{c} \text{Employer identification number} \\ 14-1400177 \end{array}$

	organization answered "Yes" on Form 990, Part IV, lin		(h) Evende a de la d
		(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		funda
5	Did the organization inform all donors and donor advisors in	-	
~	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a for charitable purposes and not for the benefit of the donor o	0 0	•
		, , , , , ,	ě – –
Par		canization answered "Yes" on Form 990. Par	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recrea		historically important land area
	Protection of natural habitat	<i>'</i>	certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of a	a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
с	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a		
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the or	ganization during the tax
	year		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserv	vation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservatior	n easements during the year
8	Does each conservation easement reported on line 2(d) abov		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense sta	atement and
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statements	s that describes the
Dor	organization's accounting for conservation easements.	Art Historical Tracquires or Othe	r Similar Acceta
Fai	t III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form		er Similar Assets.
10	If the organization elected, as permitted under FASB ASC 95		balanco shoot works
Ia	of art, historical treasures, or other similar assets held for put	· ·	
	service, provide in Part XIII the text of the footnote to its finar		
h	If the organization elected, as permitted under FASB ASC 95		ance sheet works of
b	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:		ance of public service,
			¢
	(i) Revenue included on Form 990, Part VIII, line 1(ii) Assets included in Form 990, Part X		<u>.</u>
2	If the organization received or held works of art, historical tree	asures or other similar assets for financial or	
2	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1	-	\$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2022
	09-01-22		
-02001		30	

	dule D (Form 990) 2022 WMHT EDU	JCATIONAL 7							14-14 r Assot			Pa	age 2
	•										<u>ntinue</u>	ed)	
3	Using the organization's acquisition, accessio	on, and other records	s, check any o	f the f	ollowing that	t make s	signifi	icant u	use of its				
	collection items (check all that apply):												
а	Public exhibition	d			hange progr								
b	Scholarly research	е	Other										
С	Preservation for future generations												
4	Provide a description of the organization's co								se in Par	t XIII.			
5	During the year, did the organization solicit or									_			1
Der	to be sold to raise funds rather than to be ma					<u></u>				_ Yes			No
Far	t IV Escrow and Custodial Arrang reported an amount on Form 990, Parl		ete if the organ	iizatio	n answered	"Yes" or	n ⊦ori	m 990	, Part IV,	line 9,	or		
10	Is the organization an agent, trustee, custodia		any for contrib	ution	or other as	eote not	inclu	Idad					
Id	on Form 990, Part X?								Г	Yes			No
h	If "Yes," explain the arrangement in Part XIII a								∟		I		INU
D			owing table.				ſ			Amo	unt		
с	Beginning balance						ŀ	1c					
	Additions during the year							1d					
	Distributions during the year							1e					
f	Ending balance							1f					
	Did the organization include an amount on Fo									Yes			No
	If "Yes," explain the arrangement in Part XIII.						•						ĺ
Par													
		(a) Current year	(b) Prior ye		(c) Two yea			Three y	/ears back	(e) F	our ye	ears t	back
1a	Beginning of year balance	7,000.	7,	000.		7,000.			7,000			7,0	000.
	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	7,000.	7,	000.		7,000.			7,000			7,0	000.
2	Provide the estimated percentage of the curre	ent year end balance	e (line 1g, colu	mn (a)) held as:								
а	Board designated or quasi-endowment		_%										
b	Permanent endowment	%											
с	Term endowment9	6											
	The percentages on lines 2a, 2b, and 2c should	ıld equal 100%.											
3a	Are there endowment funds not in the posses	sion of the organiza	tion that are h	eld ar	nd administe	red for tl	he						
	organization by:											es	No
	(i) Unrelated organizations									3a		\rightarrow	<u>X</u>
	(ii) Related organizations											_	Х
	If "Yes" on line 3a(ii), are the related organizat	-		e R?						3	,		
4 Par	t VI Land, Buildings, and Equipme		vment funds.										
Fai	Complete if the organization answered		Dort IV line :	10.0	00 Eorm 000		line	10					
			· · ·			i i				(.1) D		1	
	Description of property	(a) Cost or of basis (investm	•		or other (other)			nulate iation	a	(d) B	ook v	alue	ţ
19	Land	· · · · · · · · · · · · · · · · · · ·			(
	Land Buildings		9	. 21	5,849.	4	610	0,02	29.	4,6	0.5	.82	20.
	Leasehold improvements			,	-,-1/1	<u>, ,</u>		.,		- / 0		, 52	
	Equipment		10	.24	8,773.	7	579	9,12	26.	2,6	69	. 64	17.
	Other			,	. ,	<u> </u>	- / -	,		_,,			
	. Add lines 1a through 1e. (Column (d) must ec		X column (R)	lino 1		1				7,2	75.	, 46	57.
		juuri unin 330, Falla	<u>. counn (D).</u>		<i></i>				<u></u>				

Schedule D (Form 990) 2022

232052 09-01-22

Complete if the organization answered "Yes"			and of your montration
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
1) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C) (D)			
(E)			
(F)			
(G)			
(H)			
Total . (Col. (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 IV. line	11c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1)			,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Fotal . (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.		·	
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1) BROADCASTING LICENSE, NET			869,755
(2) BROADCASTING RIGHTS			12,438
(3) RIGHT OF USE LEASE ASSET			1,004,497
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities.	e 15.)		1,886,690
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	
I. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) CHARITABLE GIFT ANNUITY A	GREEMENT		49,459
(3) LEASE LIABILITY			450,976
(4)			
(5)			_
(6)			_
(7)			
(8)			
(9)			
	o 25 \		500,435
otal. (Column (b) must equal Form 990, Part X, col. (B) lin Liability for uncertain tax positions. In Part XIII, provide			

WMHT EDUCATIONAL TELECOMMUNICATIONS INC. 14-1400177 Page 3

Schedule D (Form 990) 2022

232053 09-01-22

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 WMH'T EDUCATIONAL TELECO	MMUNICATI	ONS INC.	14-	1400177 Page 4
Part XI Reconciliation of Revenue per Audited Financial Sta	tements With	Revenue per Re ⁻	turn.	
Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.			
1 Total revenue, gains, and other support per audited financial statements			1	10,305,762.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a Net unrealized gains (losses) on investments	2a	942,927.		
b Donated services and use of facilities	2b			
c Recoveries of prior year grants				
d Other (Describe in Part XIII.)		-79,318.		
e Add lines 2a through 2d			2e	863,609.
3 Subtract line 2e from line 1			3	9,442,153.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b Other (Describe in Part XIII.)	4b			
c Add lines 4a and 4b			4c	0.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	5	9,442,153.		
Part XII Reconciliation of Expenses per Audited Financial St		Expenses per F	letur	n.
Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.			
1 Total expenses and losses per audited financial statements			1	8,741,329.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		1	8,741,329.
	1 1		1	8,741,329.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	2a		1	8,741,329.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:a Donated services and use of facilities	2a 2b		1	8,741,329.
 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) 	2a 2b 2c 2d		1	8,741,329.
 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 	2a 2b 2c 2d		2e	0.
 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 	2a 2b 2c 2d			8,741,329. 0. 8,741,329.
 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 	2a 2b 2c 2d		2e	0.
 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 	2a 2b 2c 2d 2d		2e	0.
 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: 	2a 2b 2c 2d 4a		2e	0. 8,741,329.
 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 	2a 2b 2c 2d 2d 4a 4b		2e 3	0. 8,741,329. 0.
 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) 	2a 2b 2c 2d 2d 4a 4b		2e 3	0. 8,741,329.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

DONOR RESTRICTED ENDOWMENT FUNDS HAVE BEEN SET ASIDE FOR LONG-TERM SUPPORT

OF THE ORGANIZATION.

PART X, LINE 2:

WMHT IS EXEMPT FROM INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL

REVENUE CODE AND COMPARABLE NEW YORK STATE LAW. WMHT HAS BEEN CLASSIFIED

AS A PUBLICLY-SUPPORTED ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION.

PART XI, LINE 2D - OTHER ADJUSTMENTS:	
EQUITY LOSS ON SHARE OF INVESTEE COMPANIES	-70,604.
CHANGE IN CHARITABLE GIFT ANNUITY AGREEMENTS	-8,714.
232054 09-01-22 33	Schedule D (Form 990) 2022

2022.05080 WMHT EDUCATIONAL TELECOMM WMH00101

Schedule	D (Forr	n 990) 2022 pplemental Ir	form	WMHT	EDUC	ATION	AL	TELECOMMUNICATIONS	INC. 14-1400177	Page 5
TOTAL	ТО	SCHEDULE	D,	PART	XI,	LINE	2D		-79,3	18.
									Schedule D (Form 99	00 2022

Schedule D (Form 990) 202

232055 09-01-22

SCHEDULE G	Suppleme	ental Information Regarding	Fund	Iraisi	ng or Gaming A	ctivi	ties	OMB No. 1545-0047		
(Form 990)	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.							2022		
Department of the Treasury	Attach to Form 990 or Form 990-EZ. Open to Put									
Internal Revenue Service										
							14-140			
	complete this par	 Complete if the organization answer 	ered "Y	es" or	n Form 990, Part IV, I	ine 17	7. Form 990-	EZ filers are not		
 Indicate whether the a X Mail solicitat b X Internet and c X Phone solicit d In-person so 2 a Did the organization key employees list 	e organization rais ions email solicitations tations licitations on have a written c ed in Form 990, P highest paid indiv	sed funds through any of the followin e Solicita f Solicita g Special or oral agreement with any individual vart VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (includ	non-g gover iising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Y	'es X No be		
(i) Name and address or entity (fund		(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	tò (o	Amount paid r retained by fundraiser red in col. (i)	y) to (or retained by)		
CONTRIBUTOR DEVELOR	PMENT		Yes	No						
PARTNERSHIP - 10 GU	JEST	COLLABORATIVE FUNDRAISING		Х	2,806,290.		653,29	4. 2,152,996.		
ACD DIRECT INC - 24	10 N EAST									
PROMOTORY, STE. 200),	CALL CENTER SERVICE		х	845,816.		40,97	0. 804,846.		
Total					3,652,106.		694,26	4. 2,957,842.		
	ch the organizatio	on is registered or licensed to solicit o	contrib	utions		it is e	,	, ,		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS Schedule G (Form 990) 2022

232081 10-27-22

WMHT EDUCATIONAL TELECOMMUNICATIONS INC. 14-1400177 Page 2

Part II F

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.

		3		,		<u> </u>				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))				
e			(event type)	(event type)	(total number)					
Revenue	1	Gross receipts								
	2	Less: Contributions								
	3	Gross income (line 1 minus line 2)								
	4	Cash prizes								
S	5	Noncash prizes								
bense	6	Rent/facility costs								
Direct Expenses	7	Food and beverages								
	8	Entertainment								
	9	Other direct expenses								
		5								
Pa	11 Irt	Net income summary. Subtract line 10 from line Gaming. Complete if the organization a		000 Part IV line 19 or						
		\$15,000 on Form 990-EZ, line 6a.	answered res on on	330, 1 art IV, inte 13, 011	eponed more man					
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))				
Rev										
	1	Gross revenue								
ses	2	Cash prizes								
Direct Expenses	3	Noncash prizes								
Direct	4	Rent/facility costs								
	5	Other direct expenses								
			Yes %	── Yes %	Yes %					
	6	Volunteer labor	No	No	No					
	7	Direct expense summary. Add lines 2 through	5 in column (d)							
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)							
		ter the state(s) in which the organization condu								
		the organization licensed to conduct gaming ac		states?		Yes No				
D	· II	No," explain:								
10-	a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?									
		Yes," explain:	vonca, suspendea, of le			Yes No				
2320	32 10)-27-22			Sche	dule G (Form 990) 2022				
		· -·			00110					

Sche	edule G (Form 990) 2022	WMHT	EDUCATIONAL	TELECOMMUNICATIONS INC.	14-1400177 Page 3
11	Does the organization conduct ga	aming activ	ities with nonmembers?		Yes No
12				ember of a partnership or other entity formed	
					Yes No
	Indicate the percentage of gaming				
				ation's gaming/special events books and reco	
			no prepares the organiz		43.
	Name				
	Address				
15a	Does the organization have a con	tract with a	third party from whom	the organization receives gaming revenue?	Yes No
b	If "Yes," enter the amount of gam	ing revenue	e received by the organi	zation \$ and the ar	nount
	of gaming revenue retained by the				
с	If "Yes," enter name and address	of the third	l party:		
	Name				
	Address				
	Address				
16	Gaming manager information:				
	Name				
	O	¢			
	Gaming manager compensation	\$			
	Description of services provided				
	· · ·				
		— -			
	Director/officer	Emp	loyee	Independent contractor	
17	Mandatory distributions:				
	•	r state law t	to make charitable distri	butions from the gaming proceeds to	
	retain the state gaming license?				Yes No
b	Enter the amount of distributions	required ur	nder state law to be dist	ributed to other exempt organizations or spent	in the
Da	organization's own exempt activit rt IV Supplemental Infor				hand Dart III, lines 0, 0h, 10h
ı a				s required by Part I, line 2b, columns (iii) and (v ional information. See instructions.); and Part III, lines 9, 90, 100,
	100, 100, 10, and 170, as	applicable			
SC	HEDULE G, PART I,	LINE	2B, LIST OF	TEN HIGHEST PAID FUNDRA	ISERS:
<i>(</i> т) אאשר היי די איז איז איז איז איז איז איז א	crp. o	י מרשוזם ד משוורי	EVELOPMENT PARTNERSHIP	
<u>(I</u>) NAME OF FUNDRAL	SER: C	UNIKIBUIUK L	EVELOPMENT PARTNERSHIP	
(I) ADDRESS OF FUND	RAISER	: 10 GUEST S	TREET, BOSTON, MA 0213	5
<u> </u>	,			,	-
/ -					
<u>(I</u>) NAME OF FUNDRAI:	SER: A	CD DIRECT IN		
(I) ADDRESS OF FUND	RATSER	•		
<u>, </u>	, individed of round		•		
24	0 N EAST PROMOTORY	<u>Y, ST</u> E	. 200, FARMI	NGTON, UT 84025	
23208	3 10-27-22			37	Schedule G (Form 990) 2022

2022.05080 WMHT EDUCATIONAL TELECOMM WMH00101

Schedule G	G (Form 990)	WMHT EDUCAT	IONAL TE	LECOMMUNICA	TIONS INC	c. 14-1400177	Page 4
Part IV	G (Form 990) Supplemental Info	rmation (continued)					
						Schedule G (Form 990)

SC	SCHEDULE J							
(Fo	rm 990)	- For certain Officers, Directors, Trustees, Key Employees, and Highest		20	20)		
		Compensated Employees		20	22	-		
Dena	tment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic		
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe				
Nam	e of the organization			identificatio		nber		
		WMHT EDUCATIONAL TELECOMMUNICATIONS INC.	14-1	140017	7			
Ра	rt I Question	s Regarding Compensation						
					Yes	No		
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	990,					
		line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or c							
	Travel for com							
	Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef)							
		spending account Personal services (such as maid, chauffer	ir, chet)					
h	If any of the house	on line to an abacked did the exception follow a written policy recording powerst or						
b	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain							
2				<u>1b</u>				
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all directors, rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2	х			
	trustees, and onice			····· <u> </u>				
3	Indicate which if a	ny, of the following the organization used to establish the compensation of the organization's	:					
•		ector. Check all that apply. Do not check any boxes for methods used by a related organization						
		ation of the CEO/Executive Director, but explain in Part III.						
	Compensation committee X Written employment contract							
	·	compensation consultant X Compensation survey or study						
	X Form 990 of o		ommittee					
		5						
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
	organization or a re	lated organization:						
а	Receive a severance	e payment or change-of-control payment?		4a		X		
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?		4b		X		
с	Participate in or rec	eive payment from an equity-based compensation arrangement?		4c		X		
	If "Yes" to any of lin	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n					
	contingent on the r							
						X		
b		ation?		<u>5</u> b		X		
~		or 5b, describe in Part III.						
6	•	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	'n					
	contingent on the r					v		
						X X		
a		ation?		<u>6b</u>				
7		or 6b, describe in Part III.						
'	-	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		7	х			
0		nes 5 and 6? If "Yes," describe in Part III reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th			Δ			
8				8		x		
9		id the organization also follow the rebuttable presumption procedure described in		····· o				
IJ		a 53.4958-6(c)?		9				
ΙHΔ		eduction Act Notice, see the Instructions for Form 990.		ule J (Forn	n 990)	2022		
			00.100					

232111 10-18-22

WMHT EDUCATIONAL TELECOMMUNICATIONS INC. 14-1400177

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) ROBERT ALTMAN	(i)	327,729.	0.	11,100.	21,350.	11,700.	371,879.	0.
PRESIDENT & CEO (EX OFFICI	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) KATHY BEAM	(i)	154,844.	0.	0.	11,037.	9,054.	174,935.	0.
DIRECTOR OF CORPORATE SUPP	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) WILLIAM PEDIGO	(i)	140,533.	0.	0.	2,544.	10,451.	153,528.	0.
VP, CHIEF CONTENT AND ENGA	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	<u>(ii)</u>							
	(i)							
	(ii)							

Schedule J (Form 990) 2022

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 7:

IN ITS SOLE AND ABSOLUTE DISCRETION, THE BOARD OF TRUSTEES MAY CHOSE TO PAY

A DISCRETIONARY BONUS IN AN AMOUNT NOT TO EXCEED 10% OF THE BASE SALARY FOR

THE FISCAL YEAR IN WHICH THE BOARD DECIDES TO PAY THE BONUS; DECISION TO BE

NO LATER THAN JUNE 30TH OF EACH YEAR AND PAYMENT WITHIN 30 DAYS AFTER THE

DAY ON WHICH THE BOARD DECIDES TO AWARD THE BONUS.

Schedule J (Form 990) 2022

(For i Depar	SCHEDULE K (Form 990) Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Open Department of the Treasury Internal Revenue Service Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. Open										2()pen t				
_	e of the organization	WMHT EDUCAT									loyer i 4 – 1			n num	ber
Par	t I Bond Issues	SE	E PART VI	FOR COLUMI	N (F) CONT	TINUATI	ONS	1							
	(a) Issuer	name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issu	ie price	(f) Descripti	on of purpose	(g) De	efeased	(h) On	n) On behalf (i) Pooled		oled
												of is	suer	finan	cing
										Yes	No	Yes	No	Yes	No
(CIVIC FACILI	CILITY REVENUE VARIOUS													
Δ]	BOND SERIES 2	2003A	14-1400177	759921СНО	12/23/03	5,235	,000.	CONSTRUC	TION PROJ		x		х		Х
					. · ·	,									
в															
с															
<u> </u>															
-															
D	. II Duranda														
Par	t II Proceeds							_	-						
					Α			В	С		_		D		
_1	Amount of bonds retire										_				
_2	Amount of bonds legal	1									_				
3	Total proceeds of issue	э				0,745.									
_4	Gross proceeds in rese	erve funds									_				
5	Capitalized interest fro	m proceeds			7	2,262.									
_6	Proceeds in refunding	escrows													
_7	Issuance costs from pr	roceeds				4,700.									
8	Credit enhancement fr	om proceeds			11	9,554.									
9	Working capital expen	ditures from proceeds													
10	Capital expenditures fr	om proceeds			5,01	0,746.									
11	Other spent proceeds														
12	Other unspent proceed	ds													
13	Year of substantial cor	npletion													
					Yes	No	Yes	No	Yes	No		Yes		No	
14	Were the bonds issued	as part of a refunding i	ssue of tax-exempt h	onds (or.											
		a current refunding issu	•			х									
15		as part of a refunding is													
		n advance refunding iss				х									
16		of proceeds been mad			v										
17		maintain adequate bool													
	final allocation of proce			•	x										

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

Schedule K (Form 990) 2022

Schedule K (Form 990) 2022 WMHT EDUCATIONAL TELECOMMUNICATIONS INC. 14-1400177

Page 2	
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Par	III Private Business Use									
			4	E	3	(2	Ľ)	
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No	
	which owned property financed by tax-exempt bonds?		X							
2	Are there any lease arrangements that may result in private business use of									
	bond-financed property?		x						l	
3a	Are there any management or service contracts that may result in private									
	business use of bond-financed property?		x						l	
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside									
	counsel to review any management or service contracts relating to the financed property?								l	
c	Are there any research agreements that may result in private business use of									
-	bond-financed property?		x						I	
b	If "Yes" to line 3c, does the organization routinely engage bond counsel or other									
u	outside counsel to review any research agreements relating to the financed property?								I	
4	Enter the percentage of financed property used in a private business use by entities									
	other than a section 501(c)(3) organization or a state or local government		%		%		%		%	
5	Enter the percentage of financed property used in a private business use as a		/0		/0		/0		/0	
Ű	result of unrelated trade or business activity carried on by your organization,									
	another section 501(c)(3) organization, or a state or local government		%		%		%		%	
6	Total of lines 4 and 5		%		<u> </u>		%		<u></u> %	
7	Does the bond issue meet the private security or payment test?		X		/0		70			
	Has there been a sale or disposition of any of the bond-financed property to a non-									
oa	governmental person other than a 501(c)(3) organization since the bonds were issued?		x						l	
h	If "Yes" to line 8a, enter the percentage of bond-financed property sold or		21							
D			%		%		%		%	
	disposed of		%		%		<u>%</u>		<u> </u>	
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								I	
	sections 1.141-12 and 1.145-2?									
9	Has the organization established written procedures to ensure that all								l	
	nonqualified bonds of the issue are remediated in accordance with the		x						l	
David	requirements under Regulations sections 1.141-12 and 1.145-2?		Ā							
Par	IV Arbitrage			-				_		
			A 		3					
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No X	Yes	No	Yes	No	Yes	No	
	Penalty in Lieu of Arbitrage Rebate?									
	If "No" to line 1, did the following apply?									
	Rebate not due yet?		X							
	Exception to rebate?		X							
C	No rebate due?		X						. <u> </u>	
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was									
	performed									
3	Is the bond issue a variable rate issue?	Х							I	

Schedule K (Form 990) 2022 WMHT EDUCATIONAL TELECOMMUNICATIONS INC. 14-1400177

Page 3

Part IV Arbitrage (continued)								
	A		E	3	ç		D	
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		Х						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х						
7 Has the organization established written procedures to monitor the								
requirements of section 148?		Х						
Part V Procedures To Undertake Corrective Action			-					
	A		E	3	(<u>ç</u>	D)
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?		Х						
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	K. See instru	uctions.					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: CIVIC FACILITY REVENUE BOND SERI	ES 2003	BA						
(F) DESCRIPTION OF PURPOSE:								
VARIOUS CONSTRUCTION PROJECTS FOR ADDITIONS, IMPR	OVEMENT	S, AND	INSTAL	LATION				

SCHEDULE	Μ
(Form 990)	

Department of the Treasury Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

Inspection

2

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

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

Name of the organization

Employer identification number

ſ ΖU Open to Public

	WMHT EDUCATI	ONAL T	ELECOMMUN	CATIONS INC.	1	4-1400	177	
Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1	noncash co	(d) I of determin Intribution ar	•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods		1.00					
6	Cars and other vehicles	X	169	67,980	•			
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other $_{\dots}$							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organized	zation during	g the tax year for co	ontributions				
	for which the organization completed Form 828	83, Part V, D	onee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 thro	ugh 28, that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ch isn't required to be use	ed for			
	exempt purposes for the entire holding period?	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	oolicy that re	equires the review o	of any nonstandard contrib	outions?	31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncas	h			
	contributions?					32a	Х	
b	If "Yes," describe in Part II.							

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

232141 09-09-22

Schedule N	1 (Form 990) 2022	WMHT	EDUCATIONAL	TELECOMMUNICA	TIONS IN	NC. 14-140017	7 Page 2
Part II	Supplemental	Inform	ation. Provide the info	ormation required by Part I,	lines 30b, 32b,	and 33, and whether the org	anization
		: I, column	(b), the number of cont			a combination of both. Also	

SCHEDULE M, LINE 32B:

THE ORGANIZATION WORKS WITH A VENDOR, CHARITABLE AUTO TRUSTS, THAT

HANDLES ALL VEHICLE DONATIONS INCLUDING SALE OF THE DONATED VEHICLES,

APPRAISALS AND FILING OF ALL IRS PAPERWORK AND DOCUMENTATION.

Schedule M (Form 990) 2022

232142 09-09-22

SCHEDULE O (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



Employer identification number WMHT EDUCATIONAL TELECOMMUNICATIONS INC.

14 - 1400177

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

WMHT 17.3 (PBS WORLD) AND WMHT 17.4 (PBS KIDS) WHICH REACH (CREATE)

MORE THAN HALF A MILLION HOUSEHOLDS IN EASTERN NY AND WESTERN NEW

ENGLAND AND TWO PUBLIC RADIO STATIONS WITH DISTINCT MUSICAL FORMATS.

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

AGING TOGETHER IN NY

AGING TOGETHER IN NY IS A UNIQUE MULTI-PLATFORM STORYTELLING PROJECT

COVERING THE RISE OF SOCIAL ISOLATION AMONG SENIORS AND COMMUNITY-BASED

SOLUTIONS TO COUNTER IT. AGING PRESENTS A UNIQUE STAGE OF LIFE, ONE

THAT HAS NOT BEEN ADEQUATELY EXPLORED. AS LIFE EXPECTANCY GROWS, OUR

SOCIETY HAS NOT KEPT UP WITH THE POTENTIAL OF AN ADDED GENERATION OF

POTENTIALLY DECADES BEYOND AGE SIXTY-FIVE. WHILE PROJECTED EXPERIENCE,

LONGEVITY AND INCREASED QUALITY OF LIFE PRESENTS OPPORTUNITIES, THERE

ARE CHALLENGES THAT NEED ATTENTION NOW.

WORK IN PROGRESS

ACROSS THE LIFE COURSE, PEOPLE NEED DIFFERENT THINGS TO SUCCESSFULLY

NAVIGATE A RAPIDLY CHANGING ECONOMY. FROM CONVERSATIONS WITH MIDDLE

SCHOOLERS AROUND WHAT THE FUTURE OF WORK COULD LOOK LIKE TO MID-LIFE

CAREER SHIFTS, EFFORTS TO RETAIN EXPERIENCED WORKERS AND PEOPLE OF ALL

AGES SEEKING FLEXIBILITY IN THEIR EMPLOYMENT OPTIONS, WMHT SHARED JOB

SEEKING STORIES FROM ACROSS THE LIFESPAN IN A NEW SERIES

WORK IN PROGRESS.

FIELD TRIP

2022.05080 WMHT EDUCATIONAL TELECOMM WMH00101

Schedule O (Form 990) 2022	Page 2
Name of the organization WMHT EDUCATIONAL TELECOMMUNICATIONS INC.	Employer identification number $14 - 1400177$
WMHT'S FIELD TRIP IS A PUBLIC-POWERED PROJECT. YOU TELL US	ABOUT THE
PLACES YOU LOVE, WE GO AND VISIT, AND YOUR EPISODE BECOMES	A VIRTUAL
POSTCARD FROM THE SPOTS THAT MAKE OUR REGION AMAZING. IN 2	023, THE
FIELD TRIP TEAM TIED ON SOME SKATES AND TOOK A FEW TRIPS AND	ROUND THE
RINK AT EMPIRE STATE PLAZA, TESTED THE REGION'S BEST MINI	HOTDOGS, AND
LEARNED HOW STEWART'S MAKES ITS FAMOUS ICE CREAM.	
TVFILM	
TVFILM IS AN ENGAGING SHOWCASE FOR SHORT, CREATIVE WORKS OF	F A DIVERSE

REGIONAL COMMUNITY OF INDEPENDENT FILM AND MEDIA ARTISTS IN UPSTATE NEW

YORK. TVFILM OFFERS FILMMAKERS IN OUR AREA THE CHANCE TO SHARE THEIR

THOUGHTS ON THE CHALLENGES AND TRIUMPHS OF INDEPENDENT FILMMAKING. WE

WELCOME SUBMISSIONS FROM ALL FILMMAKERS AND ENCOURAGE ENTRIES FROM

FILMMAKERS. TVFILM SEASON 15 FEATURED A RECORD NUMBER OF FILMS FROM

AHA!

UNDERREPRESENTED FILMMAKERS ACROSS A VARIED SELECTION OF GENRES.

WOMEN, BIPOC, DISABLED, AND OTHER TYPICALLY UNDERREPRESENTED

WMHT'S WEEKLY ARTS AND CULTURE SHOW, AHA! A HOUSE FOR ARTS, CONTINUED TO PUT A SPOTLIGHT ON REGIONAL ARTISTS OF ALL MEDIUMS AND STYLES. AHA! WELCOMED ARTIST JADE WARRICK AS ITS NEW HOST AND EXPANDED ITS COVERAGE OF DIVERSE AND UNDERREPRESENTED VOICES. EACH EPISODE FEATURES AN IN-THE-FIELD ARTIST PROFILE, A STUDIO INTERVIEW WITH CREATIVES AND LEADERS OF LOCAL ARTS INSTITUTIONS, AND A PERFORMANCE BY A LOCAL MUSICIAN OR BAND.

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NEW YORK NOW

232212 10-28-22

NEW YORK NOW, WMHT'S EMMY AWARD WINNING, IN-DEPTH PUBLIC AFFAIRS

11280325 784124 WMH001001

Schedule O (Form 990) 2022	Page
Name of the organization WMHT EDUCATIONAL TELECOMMUNICATIONS INC.	Employer identification number 14-1400177
PROGRAM, CONTINUED REPORTING ON ISSUES OF STATE-WIDE IMPOR	RTANCE.
MANAGING EDITOR DAN CLARK PROVIDED CONSTANT, TIMELY COVERA	AGE OF THE
LATEST IN NEW YORK WHILE MAINTAINING A ROSTER OF INFORMED	AND
PASSIONATE GUESTS THROUGHOUT THE YEAR. EXPLORE ALL THE CON	
THE YEAR ON AIR EACH WEEKEND, ONLINE ANYTIME ON NYNOW.ORG	
THE NEW YORK NOW PODCAST WHEREVER YOU PLAY YOUR FAVORITE A	
AS A PUBLIC-CENTERED MEDIA ORGANIZATION IT'S OUR GREATEST	
THE STORIES OF OUR STATE FROM LOCAL CREATORS AND STORYTELI	
THEMSELVES. HERE IS A SELECTION OF THE BEST WE OFFERED AUI	DIENCES THIS
PAST YEAR:	
ROOTED OUT	
A GAY COUPLE'S RIGHT TO MARRY IS CHALLENGED WHEN A RURAL 7	TOWN CLERK
REFUSES TO SIGN THE COUPLE'S MARRIAGE LICENSE. TOWN RECORD	OS DEFLATE THE
IMPORTANCE OF THE ISSUE AT ENSUING BOARD MEETINGS WHILE PH	ROPONENTS OF
THE COUPLE STRUGGLE TO MAINTAIN AN OFFICIAL PRESENCE IN PU	JBLIC RECORDS.
PRODUCED BY JULIE CASPER ROTH	
TO WADE OR ROW	
WHEN JANE VISITS AN UNDERGROUND MOTEL, SHE PUTS HER TRUST	IN ITS COVERT
CLINIC, BUT THE SHERIFF'S ARRIVAL PUTS HER FUTURE IN JEOPA	ARDY. PRODUCED
BY REBECCA VANDERMEULEN	
NEW YORK STATE CELEBRATES DR. MARTIN LUTHER KING, JR. PAT	THS TO CHANGE
IN THIS ONE-HOUR TRIBUTE TO THE LIFE AND LEGACY OF DR. KIN	NG, NEW YORK
STATE INTRODUCES VIEWERS TO PEOPLE AND ORGANIZATIONS IN OU	JR GREAT STATE
WHO EMBODY THE PRINCIPLES OF AMERICA'S GREATEST LEADER FOR	R SOCIAL
JUSTICE, FREEDOM AND EQUALITY FOR ALL. PRODUCED BY NYS OFF	
232212 10-28-22 49	Schedule O (Form 990) 2022
30325 784124 WMH001001 2022.05080 WMHT EDUCATI	ONAL TELECOMM WMH0

Schedule O (Form 990) 2022		Page 2
Name of the organization		Employer identification number
WMHT EDUCATIONAL TELECOMMUNICATIONS IN	NC.	14-1400177

GENERAL SERVICES.

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

STUDENT MUSICIAN OF THE MONTH."

WMHT HAS WORKED TO ASSIST THE LOCAL MUSIC ORGANIZATIONS WITH THEIR

PRESENTATION OF LIVE MUSIC, AND FOR WAYS TO HIGHLIGHT THEIR WORK.

PARTNERS INCLUDED THE ALBANY SYMPHONY, ALBANY PRO MUSICA, MUSICIANS OF

MA'ALWYCK, HUDSON VALLEY PHILHARMONIC, MAVERICK CONCERT SERIES, FRIENDS

OF CHAMBER MUSIC, TROY CHROMATIC CONCERTS, GLIMMERGLASS OPERA,

TANGLEWOOD, SARATOGA PERFORMING ARTS CENTER, TROY SAVINGS BANK MUSIC

HALL, AND CAPITAL REGION CLASSICAL, AND MORE.

WMHT ALSO OPERATES RISE WHICH IS A 24 HOUR RADIO INFORMATION SERVICES FOR THE BLIND AND PRINT DISABLED IN NEW YORK'S CAPITAL REGION AND HUDSON VALLEY.

BESIDES WMHT/WRHV AND RISE, WMHT ALSO OPERATES 97.7 AND 106.1. WEXT IS THE CAPITAL REGION'S LISTENER-SUPPORTED ROOTS AND ROCK STATION FROM WMHT PUBLIC MEDIA. WITH 30,000 TO 35,000 LISTENERS, WEXT'S GOAL IS TO PROVIDE A UNIQUE LISTENING EXPERIENCE WITH MUSIC THAT KNOWS NO BOUNDARY OF GENRE. WEXT CELEBRATED 16 YEARS OF MUSIC DISCOVERY. EXCITING GUEST PERFORMANCES FROM ARTISTS LIKE WILLIAM PRINCE, MARK ERELLI, TAYLOR RAE AND OTHERS PLAYED ALONGSIDE LOCAL 518 SESSIONS WITH SAWYER FREDERICKS,

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TIA VICTORIA, MARTY WENDELL, HOLD ON HONEYS, THOMASINA WINSLOW, GIRL

LOVE AND OTHERS

HE LOCAL 518).

232212 10-28-22

Name of the organization

WMHT EDUCATIONAL TELECOMMUNICATIONS INC.

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

COMMUNITY SCREENINGS AND EVENTS

CASA SUSANNA COMMUNITY SCREENING

IN THE 1950S AND '60S, AN UNDERGROUND NETWORK OF TRANSGENDER WOMEN AND

CROSS-DRESSING MEN FOUND REFUGE AT A MODEST HOUSE IN THE CATSKILLS

REGION OF NEW YORK, KNOWN AS CASA SUSANNA. WMHT HELD A FREE FILM

SCREENING OF THE DOCUMENTARY 'CASA SUSANNA' AT THE AVALON LOUNGE IN

CATSKILL TO A PACKED CROWD. HOSTED BY LOCAL DRAG ARTIST DAVON, THE

NIGHT WAS FILLED WITH LAUGHTER, TEARS, DISCUSSION, AND COMMUNITY. HELD

JUNE 20TH, 2023

INDIE LENS POP-UP SCREENINGS

INDIE LENS POP-UP IS A NEIGHBORHOOD SERIES THAT BRINGS PEOPLE

TOGETHERVIRTUALLY AND IN- PERSONFOR FILM SCREENINGS AND

COMMUNITY-DRIVEN CONVERSATIONS. FEATURING DOCUMENTARIES SEEN ON PBS'S

INDEPENDENT LENS, INDIE LENS POP-UP DRAWS LOCAL RESIDENTS, LEADERS, AND

ORGANIZATIONS TO DISCUSS WHAT MATTERS MOST, FROM NEWSWORTHY TOPICS AND

SOCIAL ISSUES TO FAMILY AND COMMUNITY RELATIONSHIPS. WMHT SCREENED

SEVERAL FILMS IN THE COMMUNITY, INCLUDING 'MOVE ME' AND 'LOVE IN THE

TIME OF FENTANYL." HELD THROUGHOUT THE YEAR

LEARNING AT WMHT

TEACHER APPRECIATION WEEK

IN CELEBRATION OF THE AMAZING EDUCATORS IN OUR REGION, WE ASKED OUR

51

ONLINE AUDIENCE TO NOMINATE THEIR FAVORITE TEACHERS FOR TEACHER

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Name of the organization WMHT EDUCATIONAL TELECOMMUNICATIONS INC.	Employer identification number 14-1400177
APPRECIATION WEEK 2023. WE WERE OVERWHELMED WITH NOMINATIO	NS AND IN THE
END, TEN TEACHERS WERE RECOGNIZED WITH A SPECIAL GIFT FROM	OUR
EDUCATION TEAM AND A HIGHLIGHT ON WMHT'S WEBSITE.	
EARLY LITERACY AT WMHT	
WMHT'S EARLY LITERACY PROGRAM PROVIDES RESOURCES, TRAINING	, AND FAMILY

TEACHERS, AND FAMILIES. IN-PERSON WORKSHOPS AND COMMUNITY PROGRAMS USE PUBLIC BROADCASTING'S MEDIA CONTENT TO SIGNIFICANTLY EXPAND THE

LITERACY SKILLS OF CHILDREN. PROGRAMS MAY BE HELD AT LIBRARIES,

ENGAGEMENT ACTIVITIES FOR CHILD- CARE PROVIDERS, EARLY EDUCATION

SCHOOLS, DAYCARE CENTERS, FAITH-BASED ORGANIZATIONS, OR COMMUNITY

CENTERS.

PBS LEARNINGMEDIA

PBS LEARNINGMEDIA PROVIDES FREE ACCESS TO THOUSANDS OF STANDARDS-BASED LESSON PLANS. WMHT HAS CREATED NEW RESOURCES BASED ON LOCAL CONTENT BY WMHT. UTILIZING THE WORK IN PROGRESS COLLECTION, THESE RESOURCES INTRODUCE CAREER EXPLORATION AND NECESSARY TOOLS TO EXCEL IN TODAY'S ECONOMY. AN ARTS EDUCATION COLLECTION INCLUDES A VIDEO OF A STUDIO VISIT WHERE A LOCAL ARTIST, FEATURED ON AHA!, REVEALS THEIR SOURCES OF INSPIRATION AND DEMONSTRATES HOW THEY MAKE THEIR ART. ADDITIONAL RESOURCES INCLUDE TEACHING OBJECTIVES, TIPS, AND ART ACTIVITIES, ALL AT PBSLEARNINGMEDIA.ORG

FORM 990, PART VI, SECTION B, LINE 11B: THE 990 IS PREPARED BY WMHT'S EXTERNAL AUDITORS AND WMHT'S VP OF FINANCE AND ACCOUNTING. THE COMPLETED 990 IS SENT TO THE FINANCE COMMITTEE FOR REVIEW AND DISCUSSION. ONCE THE 990 IS APPROVED BY THE FINANCE COMMITTEE, 232212 10-28-22 52

2022.05080 WMHT EDUCATIONAL TELECOMM WMH00101

THESE CONFLICTS, AND CONTINUALLY MONITORS ANY POTENTIAL CONFLICT.

FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE COMMITTEE ANNUALLY REVIEWS THE SALARY OF THE CHIEF EXECUTIVE OFFICER. THE COMMITTEE USES SAS AND APTS PEER INFORMATION AND ANALYSIS OF OTHER PUBLIC BROADCASTING STATIONS 990 SALARY INFORMATION.

INTERESTS THAT COULD RISE TO CONFLICTS. THE EXECUTIVE COMMITTEE IS AWARE OF

FORM 990, PART VI, SECTION C, LINE 19:

THE AUDITED FINANCIAL STATEMENTS ARE ON THE WEBSITE. ALSO ON THE WEBSITE

ARE MINUTES FROM BOARD MEETINGS. ALL OTHER GOVERNING DOCUMENTS ARE

AVAILABLE BY REQUEST AT NO CHARGE.

FORM 990, PART IX, LINE 11G, OTHER FEES:

PROFESSIONAL SERVICES:

PROGRAM SERVICE EXPENSES	865,483.
MANAGEMENT AND GENERAL EXPENSES	96,608.
FUNDRAISING EXPENSES	31,010.
TOTAL EXPENSES	993,101.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	993,101.

CHANGE I	IN CHARITABLE	GIFT ANNUITY	AGREEMENT			-8,72	14.
232212 10-28-22			50		:	Schedule O (Form 99	0) 2022
			53				
11280325 78	4124 WMH001001	1	2022.05080	WMHT	EDUCATIONAL	TELECOMM W	MH00101

Schedule O (Form 990) 2022	
Name of the organization WMHT EDUCATIONAL TELECOMMUNICATIONS INC.	Employer identification number 14-1400177
EQUITY LOSS ON SHARE OF INVESTEE COMPANIES	-70,604.
TOTAL TO FORM 990, PART XI, LINE 9	-79,318.
PART XII, LINE 2C	
THE ORGANIZATION'S AUDIT OVERSIGHT AND SELECTION PROCES	HIRED AND
EVALUATED BY THE AUDIT COMMITTEE.	

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(Rev. January 2022)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Туре о						Taxpayer identification number (TIN)		
print	WMHT EDUCATIONAL TELECOMMUNICATIONS INC.					00177		
File by the due date f filing your return. See instruction	e by the e date for ng your urn. See 4 GLOBAL VIEW							
	TROY, NY 12180-8368					0 7		
Applica	e Return Code for the return that this application is for (fination	Return		<u></u>				
Is For		Code	Application Is For			Code		
	90 or Form 990-EZ	01	Form 1041-A			08		
	720 (individual)	03	Form 4720 (other than individual)			09		
Form 9		04	Form 5227			10		
	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
	90-T (trust other than above)	06	Form 8870			12		
Form 9	90-T (corporation)	07						
 If thi box 1 the state of the stat	e organization does not have an office or place of business is is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box ▶ request an automatic 6-month extension of time until ne organization named above. The extension is for the org calendar year or X tax year beginning JUL 1, 2022 the tax year entered in line 1 is for less than 12 months, Change in accounting period	Group Exe	mption Number (GEN)	f this is fo all memb	r the whole g ers the exten npt organizat 	group, check this asion is for.		
	this application is for Forms 990-PF, 990-T, 4720, or 606 ny nonrefundable credits. See instructions.	9, enter the	tentative tax, less	3a	\$	0.		
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.					\$	0.		
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by					\$	0.		
	n: If you are going to make an electronic funds withdrawa				Ť	_		
I HA	For Privacy Act and Paperwork Reduction Act Notice	see instru	ictions.		Form 8	868 (Rev 1-2022)		