

**Mail To:**

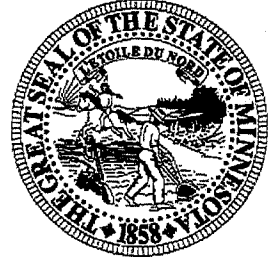
Minnesota Attorney General's Office  
Charities Division  
445 Minnesota Street, Suite 1200  
St. Paul, MN 55101-2130

**Website Address:**

www.ag.state.mn.us/charity

**STATE OF MINNESOTA  
CHARITABLE ORGANIZATION  
ANNUAL REPORT FORM**

(Pursuant to Minn. Stat. ch. 309)



**SECTION A: Organization Information**

Legal Name of Organization Public Record Media

Federal EIN: [REDACTED] Fiscal Year-End: 12/31/2020  
mm/dd/yyyy

Did the organization's fiscal year-end change?  Yes  No

<b>Mailing Address:</b> Martin Owings, President <hr/> Contact Person 1539 Grand Ave. <hr/> Street Address St. Paul, MN 55105 <hr/> City, State, and Zip Code 651-556-1381 <hr/> Phone Number admin@publicrecordmedia.org <hr/> Email Address	<b>Physical Address:</b> Martin Owings, President <hr/> Contact Person 1539 Grand Ave. <hr/> Street Address St. Paul, MN 55105 <hr/> City, State, and Zip Code 651-556-1381 <hr/> Phone Number admin@publicrecordmedia.org <hr/> Email Address
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- Organization's website: www.publicrecordmedia.org
- List all of the organization's alternate and former names (attach list if more space is needed).  
\_\_\_\_\_  Alternate  Former  
\_\_\_\_\_  Alternate  Former
- List all names under which the organization solicits contributions (attach list if more space is needed).  
Public Record Media  
\_\_\_\_\_
- Is the organization incorporated pursuant to Minn. Stat. ch. 317A?  Yes  No
- Total amount of contributions the organization received from Minnesota donors: \$ 9972
- Has the organization's tax-exempt status with the IRS changed?  
 Yes  No If yes, attach explanation.
- Has the organization significantly changed its purpose(s) or program(s)?  
 Yes  No If yes, attach explanation.



CHARITABLE ORGANIZATION ANNUAL REPORT FORM (Continued)

8. Has the organization been denied the right to solicit contributions by any court or government agency? [ ] Yes [x] No If yes, attach explanation.

9. Does the organization use the services of a professional fundraiser (outside solicitor or consultant) to solicit contributions in Minnesota? [ ] Yes [x] No If yes, provide the following information for each (attach list if more space is needed):

Table with 2 columns: Name of Professional Fundraiser, Compensation. Below it, another table with 2 columns: Street Address, City, State, and Zip Code.

10. Is the organization a food shelf? [ ] Yes [x] No If yes, is the organization required to file an audit? [ ] Yes, audit attached [ ] No

Note: An organization that has total revenue of more than \$750,000 is required to file an audit prepared in accordance with generally accepted accounting principles by an independent CPA or LPA. The value of donated food to a nonprofit food shelf may be excluded from the total revenue if the food is donated for subsequent distribution at no charge and is not resold.

11. Do any directors, officers, or employees of the organization or its related organization(s) receive total compensation\* of more than \$100,000? [ ] Yes [x] No If yes, provide the following information for the five highest paid individuals:

Table with 3 columns: Name and title, Compensation\*, Other compensation. Contains 5 empty rows for data entry.

\*Compensation is defined as the total amount reported on Form W-2 (Box 5) or Form 1099-MISC (Box 7) issued by the organization and its related organizations to the individual. See Minn. Stat. § 309.53, subd. 3(i) and Minn. Stat. § 317A.011 for definitions.



CHARITABLE ORGANIZATION ANNUAL REPORT FORM  
(Continued)

**SECTION B: Financial Information**

This section must be completed by organizations that file an IRS Form 990-EZ, 990-PF, or 990-N. Organizations that file an IRS Form 990 may skip Section B and go directly to Section C.

**INCOME**

1. Contributions Received	\$ 9972	1
2. Government Grants	\$	2
3. Program Service Revenue	\$	3
4. Other Revenue	\$	4
<b>5. TOTAL INCOME</b>	<b>\$ 9972</b>	<b>5</b>

**EXPENSES**

6. Program Expenses	\$ 6108	6
7. Management & General Expenses	\$ 3427	7
8. Fund-raising Expenses	\$ 29	8
<b>9. TOTAL EXPENSES</b>	<b>\$ 9564</b>	<b>9</b>
<b>10. EXCESS or DEFICIT</b>	<b>\$ 408</b>	<b>10</b>

(Line 5 minus Line 9)

**ASSETS**

11. Cash	\$ 1691	11
12. Land, Buildings & Equipment	\$	12
13. Other Assets	\$	13
<b>14. TOTAL ASSETS</b>	<b>\$ 1691</b>	<b>14</b>

**LIABILITIES**

15. Accounts Payable	\$	15
16. Grants Payable	\$	16
17. Other Liabilities	\$	17
<b>18. TOTAL LIABILITIES</b>	<b>\$ 0</b>	<b>18</b>

**FUND BALANCE/NET WORTH**

(Line 14 minus Line 18)

\$ 1691	
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**CHARITABLE ORGANIZATION ANNUAL REPORT FORM  
(Continued)**

**Section B (continued): Statement of Functional Expenses**

This expense statement must be prepared in accordance with generally accepted accounting principles. Each column must be completed, and Columns B, C, and D must equal Column A. The amount on Line 25, Column A must match Line 17 of IRS Form 990-EZ or Line 26 of IRS Form 990-PF.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1. Grants and other assistance to governments and organizations in the U.S.				
2. Grants and other assistance to individuals in the U.S.				
3. Grants and other assistance to governments, organizations, and individuals outside the U.S.				
4. Benefits paid to or for members				
5. Compensation of current officers, directors, trustees, and key employees				
6. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)				
7. Other salaries and wages				
8. Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9. Other employee benefits				
10. Payroll taxes				
11. Fees for services (non-employees):				
a. Management				
b. Legal	2870	2370	500	
c. Accounting				
d. Lobbying				
e. Professional fundraising services				
f. Investment management fees				
g. Other	2040	2040		
12. Advertising and promotion				
13. Office expenses	675		675	
14. Information technology	1083	1083		
15. Royalties				
16. Occupancy				
17. Travel	270	270		
18. Payments of travel or entertainment expenses for any federal, state, or local public officials				
19. Conferences, conventions, and meetings	187		187	
20. Interest				
21. Payments to affiliates				
22. Depreciation, depletion, and amortization				
23. Insurance	1851		1851	
24. Other expenses. Itemize expenses not covered above. Expenses labeled miscellaneous may not exceed 5% of total expenses (Line 25).				
a. Postage and subscriptions	187	135	52	
b. Bank and fundraising fees	96		67	29
c. Government fees	95		95	
d. Government record copy fees	210	210		
25. Total functional expenses. Add lines 1 through 24d.	9564	6108	3427	29
26. Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in Column B joint costs from a combined educational campaign and fundraising solicitation				