

Return of Organization Exempt from Income Tax

2001

Under Section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2001 calendar year, or tax year beginning 10/01, 2001, and ending 9/30, 20 02

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. Please use IRS label or print or type. See specific instructions. INDEPENDENT TELEVISION SERVICES, INC. 501 YORK ST. SAN FRANCISCO, CA 94110. D Employer Identification Number 52-1654276. E Telephone number (415) 356-8383. F Accounting method: Cash, Accrual, Other (specify)

H and I are not applicable to Section 527 organizations. H (a) Is this a group return for affiliates? Yes No. H (b) If 'yes,' enter number of affiliates. H (c) Are all affiliates included? Yes No. H (d) Is this a separate return filed by an organization covered by a group ruling? Yes No. I Enter 4-digit group GEN.

G Web site: N/A

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

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 10, 145, 376.

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

Table with columns for Revenue, Expenses, and Assets. Rows include: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue; 3 Membership dues and assessments; 4 Interest on savings and temporary cash investments; 5 Dividends and interest from securities; 6a Gross rents; 6b Less: rental expenses; 6c Net rental income; 7 Other investment income; 8a Gross amount from sales of assets other than inventory; 8b Less: cost or other basis and sales expenses; 8c Gain or (loss); 8d Net gain or (loss); 9 Special events and activities; 10a Gross sales of inventory; 10b Less: cost of goods sold; 10c Gross profit or (loss); 11 Other revenue; 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess or (deficit) for the year; 19 Net assets or fund balances at beginning of year; 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year.

Application for Extension of Time to File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box. ▶
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time — Only submit original (no copies needed)

Note: Form 990-T corporations requesting an automatic 6-month extension — check this box and complete Part I only. ▶

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization	Employer Identification Number
	INDEPENDENT TELEVISION SERVICES, INC.	52-1654276
	Number, Street, and Room or Suite Number. If a P.O. Box, see instructions	
	501 YORK ST.	
	City, Town or Post Office. For a foreign address, see instructions.	State ZIP Code
	SAN FRANCISCO, CA 94110	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|--|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (Section 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- If the organization does **not** have an office or place of business in the United States, check this box. ▶
- If this is for a **group return**, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the **whole group**, check this box. ▶ . If it is for part of the group, check this box. ▶ and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until 5/15, 20 03, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year 20 ____ or
- ▶ tax year beginning 10/01, 20 01, and ending 9/30, 20 02.

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. \$ _____ 0.

b If this application is for Form 990-PF or 990-T, 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, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ _____ 0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ *Charles Smith*

Title ▶ Associate Director CPA

Date ▶ 2/6/03

BAA For Paperwork Reduction Act Notice, see instructions.

Form 8868 (12-2000)

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (all sch) (cash \$ _____ non-cash \$ _____)	22				
23 Specific assistance to individuals (all sch)	23				
24 Benefits paid to or for members (all sch)	24				
25 Compensation of officers, directors, etc	25	99,729.	99,729.		
26 Other salaries and wages	26	1,706,549.	1,177,247.	529,302.	
27 Pension plan contributions	27				
28 Other employee benefits	28				
29 Payroll taxes	29				
30 Professional fundraising fees	30				
31 Accounting fees	31	19,887.	13,794.	6,093.	
32 Legal fees	32	20,999.	14,105.	6,894.	
33 Supplies	33	27,361.	20,673.	6,688.	
34 Telephone	34	40,940.	37,180.	3,760.	
35 Postage and shipping	35	75,127.	72,181.	2,946.	
36 Occupancy	36	410,277.	189,535.	220,742.	
37 Equipment rental and maintenance	37	17,202.	9,942.	7,260.	
38 Printing and publications	38	151,428.	144,544.	6,884.	
39 Travel	39	66,034.	44,676.	21,358.	
40 Conferences, conventions, and meetings	40	19,739.	13,098.	6,641.	
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42	25,325.	11,151.	14,174.	
43 Other expenses not covered above (itemize):					
a See Statement 3	43a	6,736,509.	6,571,496.	165,013.	
b	43b				
c	43c				
d	43d				
e	43e				
44 Total functional expenses (add lines 22 - 43). Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	9,417,106.	8,419,351.	997,755.	0.

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

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

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? <u>Diverse & innovative TV programming.</u> <small>All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) & (4) organizations and section 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants & allocations to others.)</small>	Program Service Expenses <small>(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)</small>
a <u>Continues to operate in the public interest, to enhance the diversity & innovativeness of TV programming available addressing the needs of unserved/under-served audiences.</u> (Grants and allocations \$ _____)	8,419,351.
b _____ (Grants and allocations \$ _____)	
c _____ (Grants and allocations \$ _____)	
d _____ (Grants and allocations \$ _____)	
e Other program services	(Grants and allocations \$ _____)
f Total of Program Service Expenses (should equal line 44, column (B), program services)	8,419,351.

Part IV Balance Sheets (See instructions)

				(A)		(B)
				Beginning of year		End of year
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.						
ASSETS	45 Cash – non-interest-bearing			300.	45	300.
	46 Savings and temporary cash investments			1,417,167.	46	2,288,811.
	47 a Accounts receivable	47 a	6,203.			
	b Less: allowance for doubtful accounts	47 b		3,182.	47 c	6,203.
	48 a Pledges receivable	48 a				
	b Less: allowance for doubtful accounts	48 b			48 c	
	49 Grants receivable			11,518,553.	49	10,742,642.
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)				50	
	51 a Other notes & loans receivable (attach sch) See St. 4	51 a	100,811.			
	b Less: allowance for doubtful accounts	51 b		250,000.	51 c	100,811.
	52 Inventories for sale or use				52	
	53 Prepaid expenses and deferred charges			66,093.	53	42,672.
	54 Investments – securities (attach schedule)			1,730,373.	54	1,448,437.
	55 a Investments – land, buildings, & equipment: basis	55 a				
	b Less: accumulated depreciation (attach schedule)	55 b			55 c	
	56 Investments – other (attach schedule)				56	
	57 a Land, buildings, and equipment: basis	57 a	335,375.			
b Less: accumulated depreciation (attach schedule) Statement 5	57 b	272,853.	59,730.	57 c	62,522.	
58 Other assets (describe)				58		
59 Total assets (add lines 45 through 58) (must equal line 74)			15,045,398.	59	14,692,398.	
LIABILITIES	60 Accounts payable and accrued expenses			196,631.	60	235,998.
	61 Grants payable			4,174,215.	61	3,331,744.
	62 Deferred revenue				62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64 a Tax-exempt bond liabilities (attach schedule)				64 a	
	b Mortgages and other notes payable (attach schedule)				64 b	
	65 Other liabilities (describe See Statement 6)				65	1.
66 Total liabilities (add lines 60 through 65)			4,370,846.	66	3,567,743.	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.					
	67 Unrestricted			10,674,552.	67	11,124,655.
	68 Temporarily restricted				68	
	69 Permanently restricted				69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.					
	70 Capital stock, trust principal, or current funds				70	
	71 Paid-in or capital surplus, or land, building, and equipment fund				71	
	72 Retained earnings, endowment, accumulated income, or other funds				72	
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21)			10,674,552.	73	11,124,655.	
74 Total liabilities and net assets/fund balances (add lines 66 and 73)			15,045,398.	74	14,692,398.	

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

BAA

Part VI Other Information (See specific instructions.)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity.		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes.		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
78b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement.		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		X
81a	Enter direct or indirect political expenditures. See line 81 instructions. <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81b	Did the organization file Form 1120-POL for this year?		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
82b	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	N/A	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
84b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85a	501(c)(4), (5), or (6) organizations. Were substantially all dues nondeductible by members?	N/A	
85b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	N/A	
85c	Dues, assessments, and similar amounts from members.	N/A	
85d	Section 162(e) lobbying and political expenditures.	N/A	
85e	Aggregate nondeductible amount of Section 6033(e)(1)(A) dues notices.	N/A	
85f	Taxable amount of lobbying and political expenditures (line 85d less 85e).	N/A	
85g	Does the organization elect to pay the Section 6033(e) tax on the amount on line 85f?	N/A	
85h	If Section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	
86a	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12.	N/A	
86b	Gross receipts, included on line 12, for public use of club facilities.	N/A	
87a	501(c)(12) organizations. Enter: a Gross income from members or shareholders.	N/A	
87b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	N/A	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations Sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX.		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: Section 4911 <u>0.</u> ; Section 4912 <u>0.</u> ; Section 4955 <u>0.</u>		
89b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any Section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction.		X
	c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under Sections 4912, 4955, and 4958.		0.
	d Enter: Amount of tax on line 89c, above, reimbursed by the organization.		0.
90a	List the states with which a copy of this return is filed <u>California</u>		
90b	Number of employees employed in the pay period that includes March 12, 2001 (see instructions).		37
91	The books are in care of <u>Independent Television Servic</u> Telephone number <u>(415) 356-8383</u> Located at <u>501 York St., S.F., CA</u> ZIP + 4 <u>94110</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here. <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year. <u>92</u>	N/A	N/A

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a Ancillary Income					47,918.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts.			14	87,643.	
96 Dividends & interest from securities			14	12,500.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop.					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			1	-57,743.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				42,400.	47,918.
105 Total (add line 104, columns (B), (D), and (E))					90,318.

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

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

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
1	See Statement 8

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

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

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

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

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

Please Sign Here

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

Signature of Officer: Judy Tam, CFO, C00 Date: _____

Paid Preparer's Use Only

Preparer's Signature: Charlene R. Smith Date: 2/17/03 Check if self-employed: Preparer's SSN or PTIN (see General Instruction W): P00237963

Firm's name (or yours if self-employed) and address, and ZIP + 4: Grant & Smith, LLP
505 Fourteenth St., Suite 950
Oakland, CA 94612 EIN: 94-3169649 Phone no: (510) 832-0257

INDEPENDENT TELEVISION SERVICES, INC.

52-1654276

Statement 1
Form 990, Part I, Line 8
Net Gain (Loss) from Noninventory Sales

Publicly Traded Securities _____

Gross Sales Price: 157,368.
 Cost or Other Basis: 215,111.

Total Gain (Loss) Publicly Traded Securities \$ -57,743.

Total Net Gain (Loss) From Noninventory Sales \$ -57,743.

Statement 2
Form 990, Part I, Line 20
Other Changes in Net Assets or Fund Balances

Immaterial Diff in Losses..... \$ 596.
 Unrealized Loss on Investments..... -63,652.
 Total \$ -63,056.

Statement 3
Form 990, Part II, Line 43
Other Expenses

	(A) Total	(B) Program Services	(C) Management & General	(D) Fundraising
Ads, Promotion & Sampler Reel	4,673.	4,673.		
Awards & Entry Fees	27,732.	20,627.	7,105.	
Board Expenses	85,474.		85,474.	
Clipping & on-Line Services	17,034.	17,034.		
Dubbing Services	39,422.	39,334.	88.	
Insurance	21,275.	15,041.	6,234.	
Memberships & Entry Fees	10,190.	9,475.	715.	
Mentorship	22,828.	22,828.		
Outreach	66,691.	66,691.		
Panelists	63,228.	63,228.		
Producer Licensing Fees	5,570,309.	5,570,309.		
Producer Orientation	22,940.	22,940.		
Production Handbook	5,072.	5,072.		
Professional Services	406,171.	341,374.	64,797.	
Program Dev. Licensing Fees	269,000.	269,000.		
Satellite Time	2,308.	2,308.		
Search & Hiring	1,366.	766.	600.	
Website	100,796.	100,796.		
Total	\$ 6736509.	\$ 6571496.	\$ 165,013.	\$ 0.

INDEPENDENT TELEVISION SERVICES, INC.

52-1654276

Statement 4
Form 990, Part IV, Line 51
Other Notes and Loans Receivable

<u>Notes and Loans Reported Separately</u>	<u>Balance Due</u>	<u>Doubtful Accounts Allowance</u>
Borrower's Name: Link Media		
Borrower's Title: Producer		
Date of Note:		
Maturity Date:		
Repayment Terms: 45 days		
Interest Rate:		
Security Provided:		
Purpose of Loan: Broadcast Production		
Borrower Relationship: none		
Consideration:		
Consideration FMV:		
Original Amount:		
Balance Due:	\$ 100,000.	
Doubtful Acct. Allow.:		\$ 0.
Total Notes and Loans Reported Separately	<u>\$ 100,000.</u>	<u>\$ 0.</u>

<u>Other Notes and Loans</u>	<u>Balance Due</u>	<u>Doubtful Accounts Allowance</u>
Other Notes Receivable	\$ 811.	0.
Total Other Notes and Loans	<u>\$ 811.</u>	<u>\$ 0.</u>
Total Net Receivables	<u>\$ 100,811.</u>	

Statement 5
Form 990, Part IV, Line 57
Land, Buildings, and Equipment

<u>Category</u>	<u>Basis</u>	<u>Accum. Deprec.</u>	<u>Book Value</u>
Furniture and Fixtures	\$ 1,500.	\$ 450.	\$ 1,050.
Machinery and Equipment	36,745.	5,399.	31,346.
Miscellaneous	297,130.	267,004.	30,126.
Total	<u>\$ 335,375.</u>	<u>\$ 272,853.</u>	<u>\$ 62,522.</u>

Statement 6
Form 990, Part IV, Line 65
Other Liabilities

Rounding.....	\$ 1.
Total	<u>\$ 1.</u>

INDEPENDENT TELEVISION SERVICES, INC.

52-1654276

Statement 7
Form 990, Part V
List of Officers, Directors, Trustees, and Key Employees

<u>Name and Address</u>	<u>Title and Average Hours Per Week Devoted</u>	<u>Compen- sation</u>	<u>Contri- bution to EBP & DC</u>	<u>Expense Account/ Other</u>
Kevin Martin-KERA/KDTN 3000 Harry Hines Blvd. Dallas, TX 75201	Chairman 2	\$ 0.	\$ 0.	\$ 0.
Cynthia Gehrig-The Jerome Foun 125 Park Square Saint Paul, MN 55101	Vice Pres. 2	0.	0.	0.
Juanita Anderson-Legacy Prod. 20 Thwing St. House Roxbury, MA 02119	Secretary 2	0.	0.	0.
Kristine Samuelson-Stanford Un Dept. Communi. -Bldg. 120, Rm. 110 Stanford, CA 94305-2050	Treasurer 2	0.	0.	0.
Mary Pruess-VP, PTS&WHR0-TV 5200 Hampton Blvd. Norfolk, VA 23508-1598	At-Large Elect 2	0.	0.	0.
Judy Tam, CFO, COO 51 Federal St., #100 San Francisco, CA 94107	CFO, COO 45	99,729.	4,795.	0.
Lillian Jimenez-LatinoEduca.Me 31 E. 32nd St., 4th Floor New York, NY 10016	At-Large Elect 2	0.	0.	0.
David Haugland-David H.Produc. 1230 Horn Ave. #630 West Holltwood, CA 90069	Director 2	0.	0.	0.
Total		<u>\$ 99,729.</u>	<u>\$ 4,795.</u>	<u>\$ 0.</u>

Statement 8
Form 990, Part VIII
Relationship of Activities to the Accomplishment of Exempt Purposes

<u>Line #</u>	<u>Explanation of Activities</u>
93b	Ancillary Income derived from the sale of programming rights in accordance with funding/donors requirements, enables an extensive audience to view specialized programs.

INDEPENDENT TELEVISION SERVICES, INC.

52-1654276

Statement 9
Schedule A, Part IV-A, Line 22
Other Income

Description	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
Misc. Income	\$ 0.	\$ 0.	\$ 975.	\$ 123,972.	\$ 124,947.
Total	<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ 975.</u>	<u>\$ 123,972.</u>	<u>\$ 124,947.</u>