Department of the Treasury Internal Revenue Service

### **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.
 Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 2015 Open to Public Inspection

<u>A</u>	For the 2015	calendar year, or tax year beginning 0	7/01/15 , and ending $06/3$	80/16	_	
В	Check if applicable:	C Name of organization			D Employer	identification number
Ш	Address change	West TN P	ublic Television Counci	1,	_	
	Name change	Doing business as				177950
H	Ü	Number and street (or P.O. box if mail is not delive	red to street address)	Room/suite	E Telephone	number 881-7561
닏	Initial return Final return/	P O Box 966  City or town, state or province, country, and ZIP or	foreign postal code		/31-0	901-7301
$\square$	terminated					1 400 400
	Amended return	Martin	TN 38237	<u> </u>	<b>G</b> Gross rec	eipts \$ 1,428,423
H		F Name and address of principal officer:		H(a) Is this a	group return for s	ubordinates? Yes X No
Ш	Application pending	Rodney Freed				<b>.</b>
					subordinates incli	
		<u> </u>		If "N	o," attach a list.	(see instructions)
1_	Tax-exempt status	: <b>X</b> 501(c)(3) 501(c) ( ) ◀	(insert no.) 4947(a)(1) or 527			
J	Website:	www.wljt.org		H(c) Group e	xemption numbe	r <b>&gt;</b>
K	Form of organization	n: X Corporation Trust Association	Other ►	L Year of formation:		M State of legal domicile:
F	Part I	ummary				
	1 Briefly	lescribe the organization's mission or most	significant activities:			
σ		provide Public Broadcasti				
ŭ	Ten	nessee.				
Governance	*******					
ove	2 Check	his box ▶ if the organization discontinu	and its operations or disposed of more th	an 25% of its not a	eeate	
	2 Numbo	of voting members of the governing body				15
త						15
Activities		of independent voting members of the gov				
₹		imber of individuals employed in calendar y				45
Ac		imber of volunteers (estimate if necessary)			6	0
		related business revenue from Part VIII, co			7a	0
	<b>b</b> Net unr	elated business taxable income from Form	990-T, line 34		7b	0
				Prior \		Current Year
ē	8 Contrib	itions and grants (Part VIII, line 1h)			27,515	1,263,826
Revenue	9 Progran				33,202	159,175
ě	10 Investm	ent income (Part VIII, column (A), lines 3, 4	4, and 7d)		5,570	1,854
	11 Other re	evenue (Part VIII, column (A), lines 5, 6d, 8	c, 9c, 10c, and 11e)		22,428	3,568
	12 Total re	venue – add lines 8 through 11 (must equa	al Part VIII, column (A), line 12)	1,38	38 <b>,</b> 715	1,428,423
	13 Grants	and similar amounts paid (Part IX, column	(A), lines 1–3)			0
	14 Benefits	paid to or for members (Part IX, column (A	A), line 4)			0
S	45 Calarias				95,733	729,419
Expenses	16a Profess	, other compensation, employee benefits (I onal fundraising fees (Part IX, column (A), ndraising expenses (Part IX, column (D), lir	line 11e)			0
per	<b>b</b> Total fu	ndraising expenses (Part IX, column (D), lir	ne 25) ▶ 94,571			
Щ	1	xpenses (Part IX, column (A), lines 11a–11	d 11f 24a)	98	32,358	946,161
		penses. Add lines 13–17 (must equal Part			78,091	1,675,580
	1	e less expenses. Subtract line 18 from line			39,376	-247,157
		c 1033 expenses. Oubtract line 10 nonn line	14	Beginning of C		End of Year
Net Assets or	20 Total as	sets (Part X, line 16)			55,289	1,726,828
ASS	21 Total lia	1 "" (D 1 X I" 00)		7.	76,230	684,926
E SE	21 Total lic	ets or fund balances. Subtract line 21 from			39,059	1,041,902
		ignature Block	ille 20	1 2/20	77 7000	1/011/502
					h 4 - 4 l	and advantage to the first of the
		f perjury, I declare that I have examined this retu complete. Declaration of preparer (other than off				owledge and belief, it is
		ocp.oto. Dodardaori or proparor (otrior triair or	, to buood on an information of which pre	pa. 51 Tido dity Kilowic		
٥.		Signature of officer			D-/	
Si	-   \		_		Date	
He	ere	Rodney Freed	Pre	esident		
	<b>/</b>	Type or print name and title	_			
_		pe preparer's name	Preparer's signature	Date	Check	if PTIN
Pai	d David	W. Hart, CPA	David W. Hart, CPA	11/0	1/16 self-em	
Pre	eparer Firm's	ame Alexander Thom	mpson Arnold, PLLC		Firm's EIN	62-1110839
Use	e Only	304 North Line				
	Firm's	Manakin mar 20	3237		Phone no.	731-587-5145
Ma		uss this return with the preparer shown abo				X Yes No
			, , , , , , , , , , , , , , , , , , , ,			

Form	n 990 (2015) West TN Public Television Council, 62-1177950	Page 2
Pa	art III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	,	
1	l'ennessee.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	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?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code: ) (Expenses \$ 1,056,494 including grants of \$ ) (Revenue \$	)
1	(Code: ) (Expenses \$ 1,056,494 including grants of \$ ) (Revenue \$ ) (Revenue \$ )	
	rennessee.	
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4h	(Code: \ /Evnences \$ including greats of \$ \ /Peyenue \$	
70	O (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$	
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40	(Code: \ /Evnences C including grants of C \ /Devenue C	
40	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$	)
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	•	
4d	Other program services (Describe in Schedule O.)	,
4 -	(Expenses \$ 37,382 including grants of \$ ) (Revenue \$ ■ Total program service expenses ► 1,093,876	)
40	• Total program service expenses ► 1,093,876	

#### Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		v	
•	complete Schedule A		X	X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			x
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			х
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			l
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	ا ا		x
_	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			l
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			v
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			37
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			37
	complete Schedule D, Part III	8		X
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			l
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or 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,"			1
	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			l
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a				
	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?			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			I
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
13		15		х
16				- 22
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	40		v
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			v
4.0	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			77
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X) (201)

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<u>20b</u>		
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		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
-	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
,,	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
, ,	Port I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
,,		32		х
33	complete Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
00	" 004 7704 0	,,		х
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			<b>.</b>
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Λ
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			l
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	1	X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

Page 5

Pa	Check if Schedule O contains a response or note to any line in this Part V					П
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	2			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	_		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and					
	reportable gaming (gambling) winnings to prize winners?			1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		4 E			
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	45	<u>ا</u>	х	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b		
3a	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule C			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a			.   52		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		•			
	account)?			4a		x
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 A	ccoun	ts			
	(FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	tion?		. 5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			. <u>5c</u>		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	Э				v
h				. <u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution gifts were not tax deductible?	IS OI		6b		
7	Organizations that may receive deductible contributions under section 170(c).			.   05		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	oods				
-	and services provided to the payor?			7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	required to file Form 8282?			. 7c		
d	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					-
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra					-
g	If the organization received a contribution of qualified intellectual property, did the organization file For			7g		-
h o	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations maintaining donor advised funds. Did a donor advised fund maintained			. 7h		
0	sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained sponsoring organization have excess business holdings at any time during the year?	. , .		8		
9	Sponsoring organizations maintaining donor advised funds.			.		
а	Did the appropriate appropriation made and to the distributions and appropriate 40000			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?					
10	Section 501(c)(7) organizations. Enter:					
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		_		
11	Section 501(c)(12) organizations. Enter:					
a	Gross income from members or shareholders	11a		_		
b	Gross income from other sources (Do not net amounts due or paid to other sources	441.				
120	against amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b	)	120		
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		. 12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	140				
а	In the examination licensed to issue qualified health plane in more than one state?			13a		
_	<b>Note.</b> 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						X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	0		. 14b	ш	

Form 990 (2015) West TN Public Television Council, 62-1177950 Page 6 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 in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 15 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 in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 15 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 anv other officer, director, trustee, or key employee? X 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 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, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a X **10a** Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 14  $\mathbf{X}$ 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records:

Clement Hall

Form **990** (2015)

731-881-7561

TN 38237

Monica Reese

Martin

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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 and/or Box 7 of Form 1099-MISC) 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. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for	(dd box off	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			ne an ee)	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the	
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(1.2.1000.11100)	organization and related organizations
(1) Jim Blankenship	0.00									
Board Member	0.00	x						0	0	0
(2) Jill Holland	0.00	1		$\vdash$	$\vdash$	Н		·		
(2) 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.00									
Board Member	0.00	x						0	0	0
(3) Wayne Minton	0.00	122		$\vdash$						
(a) way ite lillicoil	0.00									
Board Member	0.00	x						0	0	0
(4) John Hatler	0.00	1				Н		·		
(+)	0.00									
Treasurer	0.00			x				0	0	0
(5) Robert Jones	0.00					Н			·	
(9) 110 20 20 20 20 20 20 20 20 20 20 20 20 20	0.00									
VP	0.00			x				0	0	0
(6) Shannon Clark	0.00					Н		Ĭ	·	
(6) 21141111111111111111111111111111111111	0.00									
Secretary	0.00			x				0	0	0
(7) Rodney Freed	0.00									
(1)11041103 11004	0.00									
President	0.00			x				0	0	0
(8)	0.00								•	
(9)										
(10)										
(11)										

Part VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	and Highest Compensated	Employees (continued)			
(A) Name and title	(B) (C)  Average hours per (do not check more than one week box, unless person is both are officer and a director/trusteer hours for					s both or/trust	an ee)	(D)  Reportable compensation from the organization	(E)  Reportable  compensation from  related  organizations  (W-2/1099-MISC)	Estim amou oth comper from	ated int of er nsation	
	related organizations below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organi: and r organiz	elated	
1b Sub-total												
d Total (add lines 1b and 1c)							<u> </u>					
2 Total number of individuals (in reportable compensation from				thos	e list	ted a	bove	e) who received more than	\$100,000 of			
3 Did the organization list any fo	rmer officer dir	octor	or	truet	ا مم	kov s	mnl	lovee or highest compens	ated		Yes	No
employee on line 1a? If "Yes,"	complete Sche	dule	J for	suc	h ind	dividu	ıal			3		Х
4 For any individual listed on line organization and related organ	e 1a, is the sum iizations greater	of re	eport \$15	able 0,00	con 0? If	npens f "Ye	satio s," c	on and other compensation complete Schedule J for su	trom the			
individual	la receive or ac	crue	com	 pens	ation	 n fror	 n ar	nv unrelated organization o	r individual	4		X
for services rendered to the or	ganization? If "Y									5		X
Section B. Independent Contractor  1 Complete this table for your five		ensa	nted i	inder	nend	ent d	contr	ractors that received more	than \$100,000 of			
compensation from the organiz	zation. Report co							lar year ending with or with	nin the organization's tax year.		(C)	
Name and	(A) business address							Descrip	(B) tion of services	С	(C) compensa	ition
2 Total number of independent or received more than \$100,000	contractors (inclu	ıding ı fror	but n the	not l	limite janiz	ed to	thos	se listed above) who	0			

Form 990 (2015) West TN Public Television Council, 62-1177950 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) (B) Related or (D) Revenue excluded from tax Total revenue exempt husiness under sections 512-514 function revenue revenue 1a Federated campaigns **b** Membership dues ..... 1h c Fundraising events ..... 1c 1d d Related organizations e Government grants (contributions) 1,167,432 1e f All other contributions, gifts, grants, and similar amounts not included above 96,394 g Noncash contributions included in lines 1a-1f: 1,263,826 h Total. Add lines 1a-1f. Program Service Revenue Busn. Code 82,605 82,605 Membership Dues 33,333 TN Channel Income 33,333 18,285 18,285 Production Income 17,032 17,032 Education and Community Eng 7,920 7,920 Special Event Income f All other program service revenue ...... 159,175 q Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts) 1,854 1,854 Income from investment of tax-exempt bond proceeds ▶ Royalties ... (i) Real (ii) Personal 6a Gross rents **b** Less: rental exps. c Rental inc. or (loss) **d** Net rental income or (loss) 7a Gross amount from (ii) Other sales of assets other than inventory **b** Less: cost or other basis & sales exps. c Gain or (loss) d Net gain or (loss) ..... **8a** Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses ...... c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses ..... c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances .....  $\textbf{b} \quad \text{Less: cost of goods sold} \quad \dots \dots$ b c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 3,568 3,568 11a Miscellaneous Income d All other revenue .....

> 3,568 1,428,423

164,597

e Total. Add lines 11a-11d

Total revenue. See instructions.

Part IX Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must co Check if Schedule O contains a respo			plete column (A).	
Do #	<u> </u>	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		САРСПЭСЭ	general expenses	САРСПОСО
•	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				
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	583,418	402,389	121,950	59,079
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	96,815	70,005	16,334	10,476
10	Payroll taxes	49,186	34,634	9,375	5,177
11	Fees for services (non-employees):				
а	Management	2 550		2	
b	Legal	3,552		3,552	
C	Accounting	7,250		7,250	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
40	(A) amount, list line 11g expenses on Schedule O.)				
12 13	· · · · · · · · · · · · · · · · · · ·				
14	Office expenses Information technology				
15					
16	Royalties	55,768	55,768		
17	Occupancy	2,160	591	1,409	160
	Travel  Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	20,194	12,029	5,360	2,805
20	Interest	,	,	,	•
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	137,632	137,632		
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Programming Expense	297,965	297,965		
b	Dues & Subscriptions	131,105	11,642	119,463	
С	Advertising/Promotions	86,694	1,015	85,679	
d	Insurance - Business	46,032	<b>BO</b> 000	46,032	
е	All other expenses	157,809	70,206	70,729	16,874
25	Total functional expenses. Add lines 1 through 24e	1,675,580	1,093,876	487,133	94,571
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here   if  following SOP 98.2 (ASC 958.720)				

P	art )	Balance Sheet					
		Check if Schedule O contains a response or not	e to any line	e in this Part X			
					<b>(A)</b> Beginning of year		( <b>B</b> ) End of year
	1	Cash—non-interest bearing			1,094,170	1	815,838
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,267	4	3,181
	5	Loans and other receivables from current and former	officers, dire	ectors,	·		•
		trustees, key employees, and highest compensated e	mployees.				
		Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified pe	ersons (as c	defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B)	, and contr	ibuting employers and			
		sponsoring organizations of section 501(c)(9) voluntar					
δ		organizations (see instructions). Complete Part II of So		6			
Assets	7	Notes and loans receivable, net				7	
ğ	8	Inventories for sale or use		[		8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or					
		other basis. Complete Part VI of Schedule D	10a	5,449,965			
	b	Less: accumulated depreciation	10b	4,542,156	969,852	10c	907,809
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line	34)		2,065,289	16	1,726,828
	17	Accounts payable and accrued expenses			73,390	17	490
	18	Grants payable			18		
	19	Deferred revenue			654,002	19	638,656
	20	Tax-exempt bond liabilities		L		20	
	21	Escrow or custodial account liability. Complete Part IV	of Schedul	e D		21	
es	22	Loans and other payables to current and former office		5,			
Ħ		trustees, key employees, highest compensated emplo					
Liabilities		disqualified persons. Complete Part II of Schedule L $_{\scriptscriptstyle \perp}$				22	
_		Secured mortgages and notes payable to unrelated the	ird parties .			23	
	24	Unsecured notes and loans payable to unrelated third				24	
	25	Other liabilities (including federal income tax, payables					
		parties, and other liabilities not included on lines 17-24			40 020		4F 700
		of Schedule D			48,838		45,780
	26	Total liabilities. Add lines 17 through 25			776,230	26	684,926
Ś		Organizations that follow SFAS 117 (ASC 958), che		X and			
nce	27	complete lines 27 through 29, and lines 33 and 34.			319,208	07	12/ 002
ala	27	Unrestricted net assets			969,851	27 28	134,093 907,809
Fund Balances	28 29	Temporarily restricted net assets			909,031	29	301,003
-Ľ	29	Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 98)	EQ) chack	here ▶ and		29	
٥		· ·	ooj, check	niere Daniu			
ts	30	complete lines 30 through 34.  Capital stock or trust principal, or current funds			30		
SSE	31	Paid-in or capital surplus, or land, building, or equipme				31	
Net Assets	32	Retained earnings, endowment, accumulated income,				32	
ž	33				1,289,059	33	1,041,902
	34	Total liabilities and net assets/fund balances			2,065,289	34	1,726,828
	J#	ו טנמו וומטווונופט מוזע וופנ מטטכנט/ועווע טמומוועפט			2,003,203	J4	1,720,020

Form **990** (2015)

Pa	art XI Reconciliation of Net Assets									
	Check if Schedule O contains a response or note to any line in this Part XI									
1	Total revenue (must equal Part VIII, column (A), line 12)	1			28,4					
2	· · · · · · · · · · · · · · · · · · ·									
3	3 Revenue less expenses. Subtract line 2 from line 1									
4										
5	Net unrealized gains (losses) on investments	5								
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 in Schedule O)	9								
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line									
	33, column (B))	10	1	.,04	11,9	902				
Pa	art XII Financial Statements and Reporting									
	Check if Schedule O contains a response or note to any line in this Part XII									
			_		Yes	No				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other									
	If the organization changed its method of accounting from a prior year or checked "Other," explain in									
	Schedule O.		I							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X				
	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:		I							
	Separate basis Consolidated basis Both consolidated and separate basis		I							
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:		I							
	Separate basis Consolidated basis Both consolidated and separate basis		I							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight									
	of the audit, 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 in									
	Schedule O.									
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in									
	the Single Audit Act and OMB Circular A-133?			3a		Х				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		· · · · · · · · · · · · · · · · · · ·							
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			3b						

Form **990** (2015)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

West TN Public Television Council,

Employer identification number

			west in Publ	ic relevision C	ounci	. L ,	62-117	7950	
P	art I	Reas	on for Public Charity	Status (All organizations	must co	omplete	this part.) See instructio	ns.	
The	orgai	nization is not	a private foundation because	e it is: (For lines 1 through 11, o	check only	one box	.)		
1	Ň	A church, co	nvention of churches, or ass	ociation of churches described	in <b>sectio</b> r	170(b)(	1)(A)(i).		
2	П			A)(ii). (Attach Schedule E (Forn					
3	Н			ce organization described in se			iii).		
4	Н		·	I in conjunction with a hospital			•	ospital's name	
-	Ш	city, and stat	-	The conjunction with a mospital v	acconbca	50000	in 176(b)(1)(A)(iii). Enter the fi	oopitaro riarrio,	
5		•		of a college or university owned	or operate	ad by a d	overnmental unit described in		
5	Ш	_			or operati	eu by a g	overnmental unit described in		
•			(b)(1)(A)(iv). (Complete Part	·		-0/1 \/4\/4			
6	175		•	overnmental unit described in s					
7	X	•	•	substantial part of its support fro	om a gove	ernmental	unit or from the general public	;	
			section 170(b)(1)(A)(vi). (C	•					
8	Н	A community	trust described in <b>section</b>	<b>170(b)(1)(A)(vi)</b> . (Complete Part	: II.)				
9	Ш	An organizati	on that normally receives: (1	) more than 33 1/3% of its sup	port from	contributi	ons, membership fees, and gro	oss	
		receipts from	activities related to its exem	pt functions—subject to certain	exception	s, and (2	) no more than 33 1/3% of its		
		support from	gross investment income ar	nd unrelated business taxable in	come (les	ss section	511 tax) from businesses		
	_	acquired by t	he organization after June 3	0, 1975. See <b>section 509(a)(2)</b> .	. (Comple	te Part III	.)		
10		An organizati	on organized and operated	exclusively to test for public safe	ety. See s	section 5	09(a)(4).		
11		An organizati	on organized and operated of	exclusively for the benefit of, to	perform th	ne function	ns of, or to carry out the purpo	ses of	
		one or more	publicly supported organizat	ions described in section 509(a	a)(1) or se	ction 509	9(a)(2). See section 509(a)(3).	Check	
		the box in line	es 11a through 11d that des	cribes the type of supporting org	ganization	and com	plete lines 11e, 11f, and 11g.		
а		Type I. A sup	oporting organization operate	ed, supervised, or controlled by	its suppo	rted organ	nization(s), typically by giving		
	_	the supported	d organization(s) the power t	o regularly appoint or elect a ma	ajority of t	he directo	ors or trustees of the supporting	q	
			You must complete Part IV		, ,				
b		•	•	ised or controlled in connection	with its s	supported	organization(s), by having		
	Ш			organization vested in the same					
			s). You must complete Par	•			in a manage are cappened		
С		-		orting organization operated in	connection	n with an	d functionally integrated with		
Ū	Ш			tions). You must complete Par					
d			• , , ,	supporting organization operate					
u	Ш			ganization generally must satisfy					
			, ,	complete Part IV, Sections A					
•		•	` '	•					
е	Ш			d a written determination from the			ype i, Type ii, Type iii		
£	Ent	•	. ,	nctionally integrated supporting	organizati	OH.		ſ	
t			r of supported organizations ving information about the s	unnorted organization(s)				l	
g					(ha) in the				,
(		e of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1–9		organization ur governing	(v) Amount of monetary support (see	(vi) Amount other support	
	3			above (see instructions))	docur		instructions)	instructions	
					<b>—</b>				
					Yes	No			
(A)									
					<u> </u>				
(B)									
					-				
(C)									
(D)									
(E)									
<b>-</b> - 4 -									

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	tion A. Public Support							
Caler	dar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	<b>(e)</b> 201	5	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,649,241	1,436,656	1,369,206	1,227,515	1,263	,826	6,946,444
2	Tax revenues levied for the organization'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							
4 5	Total. Add lines 1 through 3  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)	1,649,241	1,436,656	1,369,206	1,227,515	1,263	,826	6,946,444
6	Public support. Subtract line 5 from line 4.							6,946,444
Sec	tion B. Total Support							
Caler	dar year (or fiscal year beginning in) ▶	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	<b>(e)</b> 201	5	(f) Total
7	Amounts from line 4	1,649,241	1,436,656	1,369,206	1,227,515	1,263	,826	6,946,444
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		2,977	3,531				6,508
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
11	Total support. Add lines 7 through 10							6,952,952
12	Gross receipts from related activities, etc.	(see instructions)					12	164,597
13	First five years. If the Form 990 is for the							
	organization, check this box and stop her	e						▶
Sec	tion C. Computation of Public S							
14	Public support percentage for 2015 (line 6			n (f))			14	99.91 %
15	Public support percentage from 2014 Sche						15	99.85 %
16a	33 1/3% support test—2015. If the organ			· ·	33 1/3% or more, o	check this		, ==
	box and <b>stop here</b> . The organization qual							<b>&gt;</b> X
b	33 1/3% support test—2014. If the organ							
47-	check this box and <b>stop here</b> . The organi							🟲 🗀
17a	10%-facts-and-circumstances test—201	_						
	10% or more, and if the organization mee							
	Part VI how the organization meets the "footganization							<b>&gt;</b>
b	10%-facts-and-circumstances test—201	_						
	15 is 10% or more, and if the organization				•			
	Explain in Part VI how the organization m			•		•		. □
40								▶ ∟
18	<b>Private foundation.</b> If the organization did instructions							<b>&gt;</b>

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

(Complete only if you checked the box on line 9 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	tion A. Public Support	, ,		· •	•	,	
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities 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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
<del></del>	line 6.)						
	etion B. Total Support	(-) 0044	(h) 0040	(-) 0040	(-1) 0044	(-) 0045	(D. T-+-)
	ndar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in 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	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop her	_		•			-
Sec	tion C. Computation of Public Su						·····
15	Public support percentage for 2015 (line 8			nn (f))		15	%
16	Public support percentage from 2014 Sche	edule A, Part III, li	ne 15			16	%
	tion D. Computation of Investme						
17	Investment income percentage for 2015 (I			3, column (f))		17	%
18	Investment income percentage from 2014		101 P 47			1.0	%
19a	33 1/3% support tests—2015. If the orga	nization did not ch					_
	17 is not more than 33 1/3%, check this bo		-				▶ □
b	33 1/3% support tests—2014. If the orga						, _
	line 18 is not more than 33 1/3%, check th		_				▶ 🏻
20	<b>Private foundation.</b> If the organization did	d not check a box	on line 14, 19a, or	19b, check this bo	ox and see instruc	tions	

#### **Supporting Organizations**

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 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.
- 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).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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.
- 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.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- 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.
- 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 (b) and (c) 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).
- 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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? С
- 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.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in 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.
- 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 10b below.
  - 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.)

		Yes	No
	1		
	2		
	3a		
	3b		
	3c		
	4a		
	44		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	10b		
orn	n 990	or 990-E	Z) 2015

3a

trustees of each of the supported organizations? Provide details in Part VI.

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.

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

<u>4</u> 5

۹,	hodul	ΔΔ	(Form	aan	or	990-EZ)	201

4 Enter greater of line 2 or line 3

instructions).

Income tax imposed in prior year

emergency temporary reduction (see instructions)

Distributable Amount. Subtract line 5 from line 4, unless subject to

Par	t V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organiza	tions (continued)				
Secti	on D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish exempt purp						
2	? Amounts paid to perform activity that directly furthers exempt purposes of supported						
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purposes of sup	ported organizations					
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.						
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which the organizations	zation is responsive					
	(provide details in Part VI). See instructions.						
9	Distributable amount for 2015 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount						
		(i)	(ii)	(iii)			
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2015	Distributable Amount for 2015			
1	Distributable amount for 2015 from Section C, line 6		F16-2013	Amount for 2013			
	Underdistributions, if any, for years prior to 2015						
2	(reasonable cause required-see instructions)						
3	Excess distributions carryover, if any, to 2015:						
	Excess distributions carryover, if any, to 2015.						
a							
b							
	From 2012						
	From 2014						
	From 2014						
	Total of lines 3a through e						
	Applied to underdistributions of prior years						
	Applied to 2015 distributable amount						
<u>-</u>	Carryover from 2010 not applied (see instructions)						
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2015 from Section						
	D, line 7: \$						
	Applied to underdistributions of prior years						
	Applied to 2015 distributable amount						
	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2015, if						
	any. Subtract lines 3g and 4a from line 2 (if amount						
	greater than zero, see instructions).						
6	Remaining underdistributions for 2015. Subtract lines 3h						
	and 4b from line 1 (if amount greater than zero, see						
	instructions).						
7	Excess distributions carryover to 2016. Add lines 3j						
	and 4c.						
8	Breakdown of line 7:						
a							
b							
c	Excess from 2013						
d	Excess from 2014						
е	Excess from 2015						

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (I	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
	mice 2, c, and c. 7 nee complete time part for any deduction information. (eco meaded only)
•	
•	

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

#### 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.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2015
Open to Public Inspection

Name of the organization Employer identification number West TN Public Television Council, 62-1177950 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990. Part X

5,449,965

907,809

4,542,156

**d** Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

e Other

Part VII	Investments—Other Securities.  Complete if the organization answered "Yes	es" on Form 990 Part IV line	11h See Form 990 Part X line 12	
-	(a) Description of security or category	(b) Book value	(c) Method of valuation:	
	(including name of security)	(,,	Cost or end-of-year market value	
(1) Financial	derivatives			
(2) Closely-he	eld equity interests			
(0) 011				
(A)				
(B)				
	n (h) must agual Form 000. Part V. cal. (D) ling 12.)			
Part VIII	n (b) must equal Form 990, Part X, col. (B) line 12.) ► Investments—Program Related.			
rait viii	Complete if the organization answered "Ye	es" 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:	
	(4) = 330., p. 30	(3, 2231 1332	Cost or end-of-year market value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.		444 Cas Farms 000 Dark V line 45	
	Complete if the organization answered "Ye			
(4)	(a) Descrip	DUOTI	(b) Book val	ue
(1)				
(2)				
(4)				
(5)				
(6)		-		
(7)				
(8)				
(9)				
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 15.)		<b>&gt;</b>	
Part X	Other Liabilities.			
	Complete if the organization answered "Ye	es" on Form 990, Part IV, line	11e or 11f. See Form 990, Part X,	
	line 25.			
1.	(a) Description of liability	(b) Book value		
	income taxes	45 700		
	ued Annual Pay	45,780		
(3)				
(4)				
(5)				
(6) (7)				
(8)				
(9)		<del>-  </del>		
	n (b) must equal Form 990, Part X, col. (B) line 25.) ▶	45,780		
	uncertain tax positions. In Part XIII, provide the text o		nancial statements that reports the	

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

sche	edule D (Form 990) 2015 West IN Public Television	Council, 62	-11//950	Page 4
Pa	Reconciliation of Revenue per Audited Financial State Complete if the organization answered "Yes" on Form 99		nue per Return.	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d			
3			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIII.)  Add lines <b>4a</b> and <b>4b</b>		40	
	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12.)		4c 5	
	art XII Reconciliation of Expenses per Audited Financial St			
•	Complete if the organization answered "Yes" on Form 9		mood por rectarm	
1	Total expenses and losses per audited financial statements		1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)			
b c	Other (Describe in Part XIII.) Add lines <b>4a</b> and <b>4b</b>	4b		
b c 5	Other (Describe in Part XIII.) Add lines <b>4a</b> and <b>4b</b> Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.	4b		
b c 5	Other (Describe in Part XIII.)  Add lines <b>4a</b> and <b>4b</b> Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.  art XIII Supplemental Information.		5	
b c 5 Pa	Other (Describe in Part XIII.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.  art XIII Supplemental Information.  ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; I	Part IV, lines 1b and 2b; Pa	5 art V, line 4; Part X, line	
b c 5 Pa	Other (Describe in Part XIII.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.  art XIII Supplemental Information.  ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; I art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p	Part IV, lines 1b and 2b; Parcovide any additional inform	art V, line 4; Part X, line nation.	
b c 5 Pa	Other (Describe in Part XIII.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.  art XIII Supplemental Information.  ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; I	Part IV, lines 1b and 2b; Parcovide any additional inform	art V, line 4; Part X, line nation.	
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b c 5 Pa	Other (Describe in Part XIII.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.  art XIII Supplemental Information.  ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; If art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p	Part IV, lines 1b and 2b; Parovide any additional inform	art V, line 4; Part X, line nation.	
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b c 5 Pa	Other (Describe in Part XIII.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.  art XIII Supplemental Information.  ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; If art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p	Part IV, lines 1b and 2b; Parovide any additional inform	art V, line 4; Part X, line nation.	
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b c 5 Pa	Other (Describe in Part XIII.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.  art XIII Supplemental Information.  ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; If art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p	Part IV, lines 1b and 2b; Parovide any additional inform	art V, line 4; Part X, line nation.	
b c 5 Pa	Other (Describe in Part XIII.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.  art XIII Supplemental Information.  ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; If art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p	Part IV, lines 1b and 2b; Parovide any additional inform	art V, line 4; Part X, line nation.	
b c 5 Pa	Other (Describe in Part XIII.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.  art XIII Supplemental Information.  ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; If art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p	Part IV, lines 1b and 2b; Parovide any additional inform	art V, line 4; Part X, line nation.	
b c 5 Pa	Other (Describe in Part XIII.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.  art XIII Supplemental Information.  ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; If art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p	Part IV, lines 1b and 2b; Parovide any additional inform	art V, line 4; Part X, line nation.	

Schedule D (Fo	orm 990) 2015	West TN	Public	Television	Council,	62-1177950	Page <b>5</b>
Part XIII	Supplementa	al Informatio	n (continued	Television			
			-				

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

West TN Public Television Council,	62-1177950	
Form 990, Part III, Line 4d - All Other Accomplishment		
To provide Public Broadcasting Services to all of West	Tennessee.	
Form 990, Part VI, Line 11b - Organization's Process t	o Review Form 990	
No review was or will be conducted.		
Form 990, Part VI, Line 19 - Governing Documents Discl	osure Explanation	
Governing documents are available both by request and/	or on the	
Organization's website.		
Form 990, Part XI, Line 9 - Other Changes in Net Asset	s Explanation	
In Wind Contributions	\$ 0	
In-Kind Contributions	<del>.</del>	
In-Kind Contributions	\$ 0	

Form **4562** 

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

Attachment Sequence No. 179

Department of the Treasury
Internal Revenue Service
Name(s) shown on return

(99)

West TN Public Television Council,

Identifying number 62-1177950

	ss or activity to which this form relates	ion						
	rt I Election To Exper		erty Under Sec	ction 179				
	Note: If you have		-		omplete Par	t I.		
1	Maximum amount (see instruction						1	500,000
2	Total cost of section 179 property	placed in service (se	ee instructions)				2	
3	Threshold cost of section 179 pro	operty before reduction	n in limitation (see i	nstructions)			3	2,000,000
4	Reduction in limitation. Subtract li	ne 3 from line 2. If ze	ro or less, enter -0-				4	
5	Dollar limitation for tax year. Subtract li	ne 4 from line 1. If zero	or less, enter -0 If ma	rried filing separately,	see instructions .		5	
6	(a) Descriptio	n of property		(b) Cost (business use	only) (c	) Elected cost		
					_			
7	Listed property. Enter the amount	from line 29			7			
8	Total elected cost of section 179		•				8	
9	Tentative deduction. Enter the sn						10	
10	Carryover of disallowed deduction	the emaller of busine	2014 F0111 4562	than zara) ar lina	E (ann instruction		11	
11	Business income limitation. Enter Section 179 expense deduction. A					ons)	12	
12 13	Carryover of disallowed deduction.				13		12	
	: Do not use Part II or Part III belo		<u> </u>		13			
	rt II Special Depreciat				ot include lis	ted prope	rtv )	(See instructions)
14	Special depreciation allowance fo			•		tou prope	,	100000000000000000000000000000000000000
•	during the tax year (see instruction						14	
15	Property subject to section 168(f)	(1) election					15	
16	Other depreciation (including ACI	RS)					16	137,632
Pa	rt III MACRS Depreciat						•	-
	•	•	Section		•			
17	MACRS deductions for assets pla	aced in service in tax	years beginning bef	ore 2015		<u></u>	17	0
18	If you are electing to group any assets place	ed in service during the tax ye	ear into one or more gene	ral asset accounts, check	here	. ▶		
	Section B—	Assets Placed in Sei	rvice During 2015	Tax Year Using th	e General Dep	reciation S	ystem	<u> </u>
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreci (business/investment only–see instruction	use	(e) Convention	(f) Meth	od	(g) Depreciation deduction
19a	3-year property							
b	5-year property							
c	7-year property							
<u>d</u>	10-year property							
<u>e</u>	15-year property	_						
f_	20-year property	_						
g	- /   /			25 yrs.		S/L		
h	Residential rental			27.5 yrs.	MM	S/L		
	property	1		27.5 yrs.	MM	S/L		
i	Nonresidential real			39 yrs.	MM	S/L		
	property Section C. As	pasta Dissard in Com	ioo During 2015 To	v Voor Heiner the	Alternative De	S/L	Cyroto	
		ssets Placed in Serv	ice During 2015 Ta	x rear Using the	Alternative De		Syste	m 
	Class life	-		12		S/L		
	12-year			12 yrs.	N 4 N 4	S/L		
	40-year	etructions )		40 yrs.	MM	S/L		
	Listed property. Enter amount from						24	
21	Listed property. Enter amount from		ince 10 and 20 in a	olumn (a) and line	21 Enter		21	
22	<b>Total.</b> Add amounts from line 12, here and on the appropriate lines	•		1.07			22	137,632
23	For assets shown above and place	-						137,032
	portion of the basis attributable to	_	odironi yodi, eni		23			

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02-11/1930	i caciai Asset Nepi
FYE: 6/30/2016	Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	<u>Per</u>	Conv Meth	Prior	Current
Other	Depreciation:								
1	AIR CONDITIONER Sold/Scrapped: 6/30/16	12/09/04	219		219	10	MO S/L	219	0
2	NEW A/C UNIT	9/05/03	2,600		2,600	7	MO S/L	2,600	0
3	Mass Sale: 6/30/16 EQUIPMENT - FD	6/30/94	6,073		6,073	7	MO S/L	6,073	0
4	Mass Sale: 6/30/16 LOGO GENERATOR	4/02/04	2,795		2,795	7	MO S/L	2,795	0
5	Sold/Scrapped: 6/30/16 ANTENNA	10/28/03	20,425		20,425	10	MO S/L	20,425	0
6	DTV TRANSMITTER SYSTEM	10/28/03	108,058		108,058		MO S/L	108,058	ŏ
7	DTV ANTENNA	10/28/03	53,789				MO S/L	53,789	0
	DTV TRANSMITTER LINE	10/28/03	15,038				MO S/L	15,038	0
	DTV TRANS. SITE MONITORING DTV REMOTE CONTROL EQUIP	10/28/03 10/28/03	8,580 6,117				MO S/L MO S/L	8,580 6,117	$\begin{bmatrix} 0 \\ 0 \end{bmatrix}$
	DTV ENCODING EQUIPMENT	10/28/03	57,148				MO S/L MO S/L	57,148	0
	DTV STUDIO-TRANS. LINK	10/28/03	124,056				MO S/L	124,056	0
	DTV SUDIO SITE MON. EQUIP	10/28/03	8,580				MO S/L	8,580	0
	DTV TRANSMISSION TEST EQUIP	10/28/03	25,276				MO S/L	25,276	0
	DTV CDEYE FOR WATCHDOG+ DTV CHECKOUT/FREIGHT	10/28/03 10/28/03	7,994 19,512				MO S/L MO S/L	7,994 19,512	$\begin{bmatrix} 0 \\ 0 \end{bmatrix}$
	FIBEROPTIC CABLE/WIRING	9/17/03	9,384				MO S/L MO S/L	9,384	0
	DTV GENERATOR	10/31/04	24,141		24,141		MO S/L	24,141	ŏ
	DTV TRANS & MC UPGRADE	6/30/05	862,200		862,200		MO S/L	862,200	0
	PRO TRACK SYSTEM	5/05/05	47,015		47,015		MO S/L	47,015	0
	DECODERS AND MODULATORS	3/17/05 3/17/05	25,004		25,004 10,690		MO S/L	25,004	$\begin{bmatrix} 0 \\ 0 \end{bmatrix}$
	PWR SUPPLIES DIST AMPS COMBO MASTER SYNC GENERATOR	3/17/05	10,690 14,239		14,239		MO S/L MO S/L	10,690 14,239	0
	ROUTER INPUT/OUTPUT CON.	3/17/05	22,160		22,160		MO S/L	22,160	ő
	DTV - SERVER	4/19/05	130,742		130,742	7	MO S/L	130,742	0
	VTR'S, RACK MOUNTS	4/18/05	70,815		70,815		MO S/L	70,815	0
	LCD VIDEO MONITORS	4/11/05	6,885		6,885	5	MO S/L	6,885	0
28 29	COMPUTER - ENGINEERING UPGRADE TO MIP 41010	4/01/05 11/30/05	1,115 2,800		1,115 2,800		MO S/L MO S/L	1,115 2,800	$\begin{bmatrix} 0 \\ 0 \end{bmatrix}$
	DOLBY DIGITAL RECORDER	3/13/06	4,635		4,635	7	MO S/L	4,635	ő
	DTV LINES FOR JEA SYSTEM	4/01/06	4,570		4,570		MO S/L	4,227	343
	GA LINK INTERFACE CONVERTER	2/14/06	4,410		4,410		MO S/L	4,410	0
	TRANSMITTER & TOWER TRANSMITTER BUILDING	4/01/84	828,071				MO S/L	827,023	$\begin{bmatrix} 0 \\ 0 \end{bmatrix}$
	MICROWAVE ANTENNA	3/02/90 8/15/91	26,350 27,669				MO S/L MO S/L	26,350 27,552	0
36	MICROWAVE EQUIPMENT	8/23/91	110,518				MO S/L	110,518	ŏ
	Sold/Scrapped: 6/30/16		- ,						
37	WAVEFORM ANALYZER Sold/Scrapped: 6/30/16	11/30/92	2,812		,		MO S/L	2,812	0
	TOWER - ATWOOD	6/30/96	42,002				MO S/L	42,002	0
	TOWER - ATWOOD	7/25/96	29,451				MO S/L MO S/L	29,451	0
41 42	2005 DODGE GRAND CARAVAN 4 SANYO 19" COLOR TV'S	10/07/04 4/30/94	17,311 966		17,311 966		MO S/L MO S/L	17,311 966	$\begin{bmatrix} 0 \\ 0 \end{bmatrix}$
12	Mass Sale: 6/30/16	1/30/71	700		700	10	WIO D/L	700	· ·
43	EQUIPMENT Mass Sale: 6/30/16	7/31/95	3,935		3,935	10	MO S/L	3,935	0
44	MARCO RACKS Mass Sale: 6/30/16	7/31/95	3,334		3,334	10	MO S/L	3,334	0
45	(3) BVR75A Mass Sale: 6/30/16	7/31/95	4,326		4,326	10	MO S/L	4,326	0
46	(3) BKP3701 Mass Sale: 6/30/16	7/31/95	1,869		1,869	10	MO S/L	1,869	0
47	DNF SONY VTR CTRL  Mass Sale: 6/30/16	9/30/95	1,649		1,649	10	MO S/L	1,649	0
48	DWE SITCHER  Mass Sale: 6/30/16	9/30/95	2,553		2,553	10	MO S/L	2,553	0
49	EQUIPMENT  Mass Sale: 6/30/16	9/30/95	2,751		2,751	10	MO S/L	2,751	0
50	3 HORIZON MICS, 1 PHONE LINE Mass Sale: 6/30/16	10/31/95	472		472	10	MO S/L	472	0
51	500 FT AUDIO SNAKE  Mass Sale: 6/30/16	10/31/95	750		750	10	MO S/L	750	0
52	SOLA CONSTANT VOLTAGE TRACK Mass Sale: 6/30/16	11/28/95	1,844		1,844	10	MO S/L	1,844	0

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Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	Per	Conv Meth	Prior	Current
53	MIXER & BRID	11/28/95	2,960	<u></u>		_	MO S/L	2,960	0
54	Sold/Scrapped: 6/30/16 SECONIC LIGHT MIXER	1/05/96	210		,		MO S/L	210	0
55	Mass Sale: 6/30/16 2 MONITORS & RACK MOUNTS Sold/Scrapped: 6/30/16	1/05/96	1,020		1,020	10	MO S/L	1,020	0
56	2 VACUUM CAPACITORS Sold/Scrapped: 6/30/16	1/19/96	1,024		1,024	10	MO S/L	1,024	0
59	VISUAL TRANSMITTER TUBE Sold/Scrapped: 6/30/16	3/01/96	7,857		7,857	10	MO S/L	7,857	0
60	AUDIO DEMODULATORS Sold/Scrapped: 6/30/16	5/02/96	1,016		1,016	10	MO S/L	1,016	0
61	CAMERA  Mass Sale: 6/30/16	4/06/00	4,789		4,789	10	MO S/L	4,789	0
62 63	MICROPHONES DVD PLAYER	10/03/00 5/31/02	2,706 149		2,706 149		MO S/L MO S/L	2,706 149	0
	Sold/Scrapped: 6/30/16								
64	RTL PROJECTOR	9/28/01	3,473		3,473		MO S/L	3,473	0
65	RTL LAPTOP COMPUTER	10/15/01	1,555		1,555	5	MO S/L	1,555	0
66	Mass Sale: 6/30/16 BETA SP DECK-NON LINEAR Mass Sale: 6/30/16	11/21/02	5,405		5,405	7	MO S/L	5,405	0
67	WORKSTATION/TRANSCODER Mass Sale: 6/30/16	12/05/02	10,304		10,304	7	MO S/L	10,304	0
68	DELL COMPUTER (DARRELL)	6/30/04	1,413		1,413	5	MO S/L	1,413	0
69	PANASONIC DVD ČAMERA	6/30/04	19,206		19,206		MO S/L	19,206	0
70	COMPUTER - PRODUCTION	9/17/03	2,417		2,417	5	MO S/L	2,417	0
71	Mass Sale: 6/30/16 COMPUTER - PRODUCTION Mass Sale: 6/30/16	11/10/05	1,212		1,212	5	MO S/L	1,212	0
72	SONY BVP TRIAX CAMERAS	11/21/05	10,114		10,114	7	MO S/L	10,114	0
73	BETA SP VTR	1/18/06	3,902		3,902		MO S/L	3,902	0
75	OFFICE FURNITURE	2/28/94	12,917		12,917		MO S/L	12,917	0
76	DESK 2 R-PANEL DISPLAYS	10/31/95 10/31/95	1,199		1,199		MO S/L MO S/L	1,199 608	$\begin{array}{c} 0 \\ 0 \end{array}$
77 78	FILE CABINET	10/31/95	608 1,199		608 1,199		MO S/L MO S/L	1,199	0
79	COMPAQ COMPUTERS Sold/Scrapped: 6/30/16	10/01/99	3,832		3,832		MO S/L	3,832	ő
80	DIGITAL CAMERA  Mass Sale: 6/30/16	12/08/00	668		668	7	MO S/L	668	0
81	COMPAQ LAPTOP Mass Sale: 6/30/16	7/26/00	1,350		1,350	5	MO S/L	1,350	0
83	2 PENTIUM 4 COMPUTERS Sold/Scrapped: 6/30/16	10/08/02	2,400		2,400	5	MO S/L	2,400	0
84	DELL COMPUTER  Mass Sale: 6/30/16	6/25/03	978		978	5	MO S/L	978	0
85	TOSHIBA COPIER	6/30/03	4,684		4,684		MO S/L	4,684	0
86	DELL COMPUTER - MONICA Mass Sale: 6/30/16	6/20/04	1,252		1,252	5	MO S/L	1,252	0
87	LAPTOP - DAVE Sold/Scrapped: 6/30/16	11/03/04	3,723		3,723	5	MO S/L	3,723	0
88	NEW PHONE SYSTEM  Mass Sale: 6/30/16	7/14/05	9,150		9,150	7	MO S/L	9,150	0
89	COMPUTER - FRONT OFFICE Mass Sale: 6/30/16	11/18/05	1,151		1,151	5	MO S/L	1,151	0
	LEASEHOLD IMPROVEMENTS	7/01/91	18,560		18,560		MO S/L	18,496	0
91	DESK DTV Production Trush	4/30/94	425		425		MO S/L	425	0
93 94	DTV Production Truck 2 DP571 Dolby Encoders	5/31/07 5/21/07	67,566 11,200		67,566 11,200		MO S/L MO S/L	67,566 11,200	$\begin{array}{c} 0 \\ 0 \end{array}$
95	5 DP572 Dolby Encoders	5/21/07	20,500		20,500	7	MO S/L MO S/L	20,500	0
	HD Remote Unit	5/17/07	212,093		212,093	7	MO S/L	212,093	ő
97	Microphones	12/14/06	17,141		17,141	7	MO S/L	17,141	0
98	HOT SPARES Disk Drive	3/02/07	1,484		1,484		MO S/L	1,484	0
99 100	Inlet Aire Dampers w/exhaust fan Color Viewfinder & 6 rack mounts	10/18/06 4/17/07	4,300 7,636		4,300 7,636	7	MO S/L MO S/L	4,300 7,636	$\begin{array}{c} 0 \\ 0 \end{array}$
100 101	2 HD Electronic Viewfinders	4/17/07 4/18/07	4,641		4,641		MO S/L MO S/L	4,641	0
	XDCAM HD Deck	4/25/07	86,547		86,547		MO S/L	86,547	ő
103	HD60P Integrated Triax Portable Camera	4/26/07	45,000		45,000	7	MO S/L	45,000	0
104	4 HD Camera Control Units	4/26/07	63,840		63,840		MO S/L	63,840	0
105 106	CCU Side Triax Adapter Multi Format Switcher Processor	4/26/07 4/26/07	21,600 88,493		21,600 88,493		MO S/L MO S/L	21,600 88,493	$\begin{array}{c} 0 \\ 0 \end{array}$
100	with Format Switcher Frocessor	7/20/07	00,473		00,473	,	IVIO B/L	66, <del>4</del> 33	U

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		Date		Bus Sec	Basis			
Asset		In Service	Cost	<u>%</u> <u>179</u> Bonus		Per Conv Meth	Prior	Current
107	3 Color Viewfinders	4/27/07	15,732		15,732	7 MO S/L	15,732	0
	2 Fujinon Lens	4/27/07	47,637		47,637	7 MO S/L 7 MO S/L	47,637	$0 \\ 0$
	2 Fujinon 2/3 Focus Lens 4 Lens Control Kit	5/01/07 4/27/07	66,732 11,676		66,732 11,676	7 MO S/L 7 MO S/L	66,732 11,676	0
	Master Setup Unit	5/01/07	7,280		7,280	7 MO S/L	7,280	ő
	Netgear FS516 Router	5/07/07	507		507	5 MO S/L	507	0
	10 Meter Fiber Cable	5/08/07	3,749		3,749	7 MO S/L	3,749	0
			90,048		90,048	7 MO S/L	90,048	0
	HD 60P Integrated Triax Portable Camera 4 VINTEN 2-Stage Tripods	5/29/07 5/11/07	45,000 60,240		45,000 60,240	7 MO S/L 7 MO S/L	45,000 60,240	$\begin{array}{c} 0 \\ 0 \end{array}$
	DOREMI Video Server/Storage Unit	5/04/07	74,550		74,550	7 MO S/L	74,550	ő
118	Inscriber G3 HD.SD live to air graphics syst	5/04/07	29,160		29,160	7 MO S/L	29,160	0
	Dell Laptop - Monica	4/06/07	1,262		1,262	5 MO S/L	1,262	0
120	Dell Optiplex 320	8/18/07	1,473		1,473	5 MO S/L	1,473	0
121	Mass Sale: 6/30/16 Scaffolding	10/18/07	1,678		1,678	7 MO S/L	1,678	0
122		12/05/07	1,099		1,099	5 MO S/L	1,099	ő
	Mass Sale: 6/30/16				,		,	
123	HP Pavilion Laptop	2/08/08	900		900	5 MO S/L	900	0
124	Mass Sale: 6/30/16	2/10/00	1 240		1 240	5 MO 9/I	1 240	0
	Optiplex 755 Minitower SENN Supercrd RF Audio Equip	3/18/08 12/06/07	1,240 2,073		1,240 2,073	5 MO S/L 7 MO S/L	1,240 2,073	$\begin{array}{c} 0 \\ 0 \end{array}$
	XD Cam HD Camcorder	11/06/07	34,101		34,101	10 MO S/L	26,144	3,410
127	Battery Charger	12/13/07	1,097		1,097	7 MO S/L	1,097	0
		10/25/07	127,994		127,994	10 MO S/L	98,129	12,799
	Yamaha Audio Production Console	8/23/07	23,986		23,986 2,143	10 MO S/L	18,789	2,399
	Open Gear 2RU Cooling Fan 2 HD Monitors and Accessories	11/08/07 8/27/07	2,143 15,772		15,772	7 MO S/L 7 MO S/L	2,143 15,772	$\begin{array}{c} 0 \\ 0 \end{array}$
	Open Transformer Contact Switch	7/16/07	3,619		3,619	7 MO S/L	3,619	ő
133	HD Electrotrack	7/23/07	7,412		7,412	7 MO S/L	7,412	0
	2 Multi-Channel Monitoring System	7/17/07	7,576		7,576	7 MO S/L	7,576	0
		11/18/08	1,458		1,458	7 MO S/L	1,371	1 242
136 137	Sony XD Cam 50Gb deck Sony XDCam 50Gb deck	4/08/09 4/16/09	12,522 12,522		12,522 12,522	7 MO S/L 7 MO S/L	11,180 11,031	1,342 1,491
	Thin Profile coax Brown	12/03/08	130		130	7 MO S/L 7 MO S/L	122	8
	Thin Profile coax Red	12/03/08	130		130	7 MO S/L	122	8
		12/03/08	130		130	7 MO S/L	122	8
141		12/03/08	130		130	7 MO S/L	122	8
142 143		12/03/08 12/03/08	130 993		130 993	7 MO S/L 7 MO S/L	122 934	8 59
		12/03/08	3,035		3,035	7 MO S/L 7 MO S/L	2,854	181
	Test Equipment	6/18/09	3,789		3,789	7 MO S/L	3,248	541
	Analog Video Distributor Amplifier	1/06/09	198		198	7 MO S/L	184	14
147	Analog Video Distributor Amplifier	1/06/09	198 198		198 198	7 MO S/L 7 MO S/L	184 184	14 14
148 149	Analog Video Distributor Amplifier Up Converter	1/06/09 1/06/09	3,815		3,815		3,542	273
150	Audio Monitor	12/15/08	8,888		8,888	7 MO S/L	8,359	529
	Dual 7" LCD Monitor	12/15/08	2,709		2,709	7 MO S/L	2,548	161
1.50	Mass Sale: 6/30/16	1/05/00	427		427	7. MO 9/1	406	2.1
	HD-HDMI Converter HD-HDMI Converter	1/05/09 1/05/09	437 437		437 437	7 MO S/L 7 MO S/L	406 406	31 31
	HD-HDMI Converter	1/05/09	437		437	7 MO S/L	406	31
		11/14/08	5,480		5,480	7 MO S/L	5,219	261
		11/14/08	5,480		5,480	7 MO S/L	5,219	261
		11/14/08	4,475		4,475	7 MO S/L	4,262	213
158 159	HD-SDI Media Port 300 Gb HDD	2/10/09 2/10/09	24,343 33,900		24,343 33,900	7 MO S/L 7 MO S/L	22,314 31,075	2,029 2,825
160	42" LCD HDTV	3/18/09	798		798	7 MO S/L 7 MO S/L	713	85
	Mass Sale: 6/30/16							
		11/14/08	4,475		4,475	7 MO S/L	4,262	213
162		12/18/08	1,223		1,223	7 MO S/L	1,136	87
163	Mass Sale: 6/30/16 LCD Monitor	11/18/08	253		253	7 MO S/L	238	15
	Sliding Shelf	1/16/09	159		159	7 MO S/L 7 MO S/L	145	14
165	NV5128 Multi-Format Router	12/03/08	58,995		58,995	7 MO S/L	55,483	3,512
	HD/SD Sync Generator	7/17/08	368		368	7 MO S/L	363	5
	DCA15 SPX Generator	1/21/09	13,407		13,407	7 MO S/L	12,290	1,117
	17" LCD Monitor Omneon Video File Server	3/18/09 3/26/09	170 1,700		170 1,700	7 MO S/L 7 MO S/L	152 1,518	18 182
171	Diamond PA Repair	7/22/08	1,705		1,705	7 MO S/L	1,685	20
172	Quartz Light Kit M31500	5/18/09	495		495	7 MO S/L	430	65

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		Date		Bus Sec	Basis			
Asset	Description	In Service	Cost	<u>%</u> <u>179</u> Bonus	for Depr	Per Conv Meth	Prior	Current
173 174	Quartz Light Kit M31500 Quartz Light Kit M31100	5/18/09 5/18/09	467 674		467 674	7 MO S/L 7 MO S/L	406 586	61 88
175	Audio-Video Connector	12/03/08	1,359		1,359	7 MO S/L	1,278	81
	Analog Video Distributor Amplifier	1/16/09	291		291	7 MO S/L	267	24
177 178	Auto Equalizing Distribution Amplifier Power Supply - 00FR-C frame	1/16/09 1/16/09	311 593		311 593	7 MO S/L 7 MO S/L	285 544	26 49
179	Standard Definition Encoder	4/06/09	11,812		11,812	7 MO S/L	10,546	1,266
	Multi-Format Receiver RX1290	4/06/09	3,689		3,689	7 MO S/L	3,294	395
	AAC Audio License Key Pro-MPEG Input Card	4/06/09 4/06/09	614 958		614 958	7 MO S/L 7 MO S/L	548 855	66 103
	Clarus Noise Reduction	4/06/09	1,607		1,607	7 MO S/L	1,435	172
	Clarus Input Deblocking Filter	4/06/09	1,607		1,607	7 MO S/L	1,435	172
	Transport Stream OVideo Server HD-SDI Modular Receiver Decoder	4/06/09 4/06/09	1,607 713		1,607 713	7 MO S/L 7 MO S/L	1,435 636	172 77
187	HD-SDI Modular Receiver Decoder	4/06/09	713		713	7 MO S/L	636	77
	HVAC System	10/09/09	35,000		35,000	10 MO S/L	20,125	3,500
189	Vostro 3500 Laptop Mass Sale: 6/30/16	4/24/10	888		888	5 MO S/L	888	0
190	2 Televisions	2/16/10	696		696	7 MO S/L	530	100
191 193	Sony PDW-F75 Professional Disc Recorer 2008 Nissan Frontier	12/06/10 11/14/08	13,147 21,200		13,147 21,200	7 MO S/L 5 MO S/L	8,608 21,200	1,878 0
	Donated WARN Equipment Package	4/25/12	29,409		29,409	10 MO S/L	9,313	2,941
195	Repair on DNWA75 VTR	3/23/12	9,213		9,213	7 MO S/L	4,278	1,316
196 197	7 Computers Antenna & Related Hardware - RUS Grant	12/18/13	4,574 333,675		4,574 333,675	5 MO S/L 15 MO S/L	1,372 35,221	915 22,245
	Transmission Line and Hardware - RUS Gra		79,850		79,850	15 MO S/L	8,429	5,323
	Tower Reinforcement - RUS Grant	12/01/13	106,044		106,044	15 MO S/L	11,194	7,069
200	LED Tower Light System - RUS Grant Equipment, Tuning, Guy Wire Install - RUS	12/01/13	16,456 196,575		16,456 196,575	15 MO S/L 15 MO S/L	1,737 20,750	1,097 13,105
202	Engineering Study - RUS Grant	12/01/13	25,800		25,800	15 MO S/L	2,723	1,720
	Tower Painting	12/01/13	15,000		15,000	10 MO S/L	2,375	1,500
204 205	2015 Dodge Journey Hatchback PowerEdge T420 Server	3/23/15 9/12/14	19,595 3,223		19,595 3,223	5 MO S/L 7 MO S/L	980 384	3,919 460
206	Caption Maker	10/18/14	5,750		5,750	7 MO S/L	548	821
	Inscriber G8 - Dual Channel	10/24/14	36,858		36,858	7 MO S/L	3,510	5,266
208 209	Promise Pegasus2 Thunderbolt 2 RAIN Syst Mac Pro Server	5/05/15	4,139 9,523		4,139 9,523	7 MO S/L 7 MO S/L	99 227	591 1,360
210	PSIP Generator	5/11/15	8,577		8,577	7 MO S/L	204	1,226
211 212	Device Server Computer & HDD	5/23/15	13,943		13,943	5 MO S/L	232	2,789
	Automation Software 24" High Grade 3D LCD Monitor	6/01/15 6/03/15	6,800 6,841		6,800 6,841	5 MO S/L 7 MO S/L	113 81	1,360 978
214	PowerEdge T430 Server	6/12/15	3,762		3,762	7 MO S/L	45	537
215 216	Selenio Frame, Power Supply Encoder card	6/18/15 6/18/15	6,120 6,660		6,120 6,660	7 MO S/L 7 MO S/L	$0 \\ 0$	874 951
217	Encoder card	6/18/15	6,660		6,660	7 MO S/L 7 MO S/L	0	951
218	Encoder card	6/18/15	6,660		6,660	7 MO S/L	0	951
219 220	Encoder Software HD Encoder Software SD	6/18/15 6/18/15	7,200 4,320		7,200 4,320	5 MO S/L 5 MO S/L	$0 \\ 0$	1,440 864
	Encoder Mux Software	6/18/15	2,880		2,880	5 MO S/L 5 MO S/L	0	576
222	Encoder Transport Stream SW	6/18/15	2,880		2,880	7 MO S/L	0	411
223 224	Promedia Rhozet Software Transmitter Power Supply Module	6/25/15 4/11/15	5,096 4,598		5,096 4,598	5 MO S/L 7 MO S/L	0 164	1,019 657
	USB 3.0 XDCam Disc Drive	9/06/14	2,712		2,712	7 MO S/L 7 MO S/L	323	387
226	DELL POWER EDGE T430 SERVER	7/02/15	3,762		3,762	5 MO S/L	0	752
227 228	SURCODE FOR DOLBY E MASTER SUI'SONNET RACK	7/11/15 7/11/15	3,495 3,423		3,495 3,423	5 MO S/L 5 MO S/L	$0 \\ 0$	699 685
229	5.1 MULTI CHANNEL MONITORING SY		3,401		3,401	5 MO S/L	0	624
230	ENCODER & AUTOMATION SYSTEM	8/01/15	13,050		13,050	5 MO S/L	0	2,393
231 232	PART 10F3: MD 5 HARD DRIVE PART 20F3: RX30	2/12/16 2/12/16	9,793 11,539		9,793 11,539	5 MO S/L 5 MO S/L	$0 \\ 0$	816 962
	PART 30F3: MD 12 HARD DRIVE	3/12/16	15,320		15,320	5 MO S/L	0	1,021
234	TELEPHONE SYSTEM	12/08/15	6,775		6,775	5 MO S/L	0	790
235	TRANSPORT STREAM CONVERTER	3/25/16	5,031		5,031	5 MO S/L	4 627 502	252
	Total Other Depreciation		5,672,943	-	5,672,943		4,627,502	137,632
	Total ACRS and Other Deprec	iation	5,672,943		5,672,943		4,627,502	137,632

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Date Bus Sec Basis Asset Description In Service Cost % 179Bonus for Depr PerConv Meth Prior Current 4,627,502 5,672,943 **Grand Totals** 5,672,943 137,632 222,978 Less: Dispositions and Transfers Less: Start-up/Org Expense 333 222,978 222,645 0 0 5,449,965 5,449,965 4,404,857 **Net Grand Totals** 137,299

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## **Taxable Interest on Investments**

Descripti	on					
	_	Amount	Unrelated Business Code		Acquired after 6/30/75	US Obs (\$ or %)
Interest Income						
	\$	1,854				
Total	\$	1,854				

**Federal Statements** 

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### Form 990, Part IX, Line 24e - All Other Expenses

Description	E	Total Expenses	Program Service	agement & General		Fund Raising
Interconnect - INT	 \$	21,600	\$ 21,600	\$	\$	
Legislative lobbying		19,750		19,750	·	
Software Contracts		18,067	10,351	884		6,832
Insurance - HRA Payments		10,416		10,416		
Special Events		9,262	3,439	3,714		2,109
Telephone		9,094	4,293	4,801		
Premiums		8,467		8,467		
General Supplies		8,141	2,865	4,909		367
Equipment - Operating		6,935	5,200	1,735		
Vehicle Expenses		5,375	4,277	604		494
Printing		4,935	3,418	1,469		48
Equipment - Replacement		4,677	4,677			
Parts and Supplies		4,010	3,960			50
Postage		3,918	140	603		3,175
Mailing List		3,450				3,450
Repairs & Maintenance		3,267	2,570	697		
Credit Card Charges		2,957		2,957		
Website		2,573		2,573		
Interconnect		1,885	1,885			
Shipping		1,884	626	1,203		55
Miscellaneous Expenses		1,808	82	1,597		129
TPTC		1,612		1,612		
Apparel		1,375		1,375		
Board Expenses		868		868		
Educational Books/Media		609	609			
Ad agency fees		470		470		
Costume Rental/Actors		395	205	25		165
Tape Stock		9	9			
Total	\$	157,809	\$ 70,206	\$ 70,729	\$	16,874

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# **Federal Statements**

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## Schedule A, Part II, Line 1(e)

Description	<u></u>	Amount
Community Service Grant	\$	654,001
CPB - Interconnect Grant		11,712
Local Service Grant		57,926
State of Tennessee - Direct Appropri		430,793
Other Grants		13,000
Underwriting		96,394
Total	\$	1,263,826

### Schedule A, Part II, Line 12

Description	 Amount
Education and Community Eng	\$ 17,032
Production Income	18,285
Special Event Income	7,920
TN Channel Income	33,333
Membership Dues	82,605
Interest Income	1,854
Miscellaneous Income	 3,568
Total	\$ 164,597