### **Filing Instructions**

### West TN Public Television Council,

### **Exempt Organization Tax Return**

Taxable Year Ended June 30, 2017

**Date Due:** November 15, 2017

**Remittance:** None is required. Your Form 990 for the tax year ended 6/30/17 shows no

balance due.

**Signature:** You are using a Personal Identification Number (PIN) for signing your return

electronically. Sign the IRS e-file Authorization and mail it as soon as possible

to:

Alexander Thompson Arnold, PLLC

304 North Lindell Martin, TN 38237

Other: Your return is being filed electronically with the IRS and is not required to be

mailed. Mailing a paper copy of your return to the IRS will delay the processing

of your return.

Form **8879-EO** 

# IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2016, or fiscal year beginning 7/03

**7/01** ..., 2016, and ending .....

6/30<sub>20</sub> 17

2016

OMB No. 1545-1878

Department of the Treasury
Internal Revenue Service
Name of exempt organization

Do not send to the IRS. Keep for your records. Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

West TN Public Television Council,

Employer identification number 62-1177950

Name and title of officer Rodney Freed President

Part I	Type of Return and	<b>Return Information</b>	(Whole Dollars	Only
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Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

	e applicable line below. <b>Do no<u>t c</u>omplete more than 1 line in Part I</b> .		
1a	Form 990 check here Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b _	1,466,067
2a	Form 990-EZ check here  Total revenue, if any (Form 990-EZ, line 9)	2b _	
За	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b _	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _	
5a	Form 8868 check here b L b Balance Due (Form 8868, line 3c)	5b _	

### Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2016 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's	PIN:	check	one	box	only	,
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X	I authorize .	Alexander	Thompson	Arnold,	PLLC	to enter my PIN	63097 as my signature
			ERO firm na		,	Enter five numbers, but do not enter all zeros	
	41	::	C -   t:  .	al		:	of the material in

on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature Date 10/31/17

### Part III Certification and Authentication

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

62111638237

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2016 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature David W. Hart, CPA Date 10/31/17

ERO Must Retain This Form — See Instructions

Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2016)

Form 990

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.

2016
Open to Public Inspection

OMB No. 1545-0047

Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2016 calendar year, or tax year beginning 07/01/16, and ending 06/30/17 D Employer identification number C Name of organization Check if applicable: West TN Public Television Council, Address change Doing business as 62-1177950 Name change Number and street (or P.O. box if mail is not delivered to street address) 731-881-7561 P O Box 966 Initial return Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated TN 38237 1,466,067 G Gross receipts\$ Amended return Name and address of principal officer: H(a) Is this a group return for subordinates? Application pending Rodney Freed If "No." attach a list, (see instructions X 501(c)(3) 501(c) 4947(a)(1) or 527 Tax-exempt status: (insert no.) www.wljt.org H(c) Group exemption number Website: X Corporation Trust Form of organization: Association Year of formation: M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: To provide Public Broadcasting Services to all of West Governance Tennessee. 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 12 ∞ 12 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 45 5 6 Total number of volunteers (estimate if necessary) 0 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Current Year** 1,299,424 8 Contributions and grants (Part VIII, line 1h) 1,263,826  $\overline{159}, 175$ 9 Program service revenue (Part VIII, line 2g) 159,192 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,854 2,940 3,568 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 4,511 1,428,423 1,466,067 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 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), line 4) 0 729,419 712,361 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 146,205 **b** Total fundraising expenses (Part IX, column (D), line 25) 925,604 946,161 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,675,580 1,637,965 **18** Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) -247,157 -171,898 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 1,726,828 1,548,906 20 Total assets (Part X, line 16) 684,926 678,899 21 Total liabilities (Part X, line 26) 1,041,902 870,007 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign President Here Rodney Freed Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check Paid P01276201 David W. Hart, CPA David W. Hart, CPA 10/31/17 self-employed 62-1110839 Preparer Alexander Thompson Arnold, PLLC Firm's name Firm's EIN **Use Only 304 North Lindell** 731-587-5145 Martin, TN 38237

May the IRS discuss this return with the preparer shown above? (see instructions)

Form	m 990 (2016) 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	<u>X</u>
1_		
	To provide Public Broadcasting Services to all of West	
1	Tennessee.	
	·	
_	Did the experimetion undertake any significant program continue during the year which were not listed on the	
2		Yes X No
	prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.	[ ] Tes [22] NO
3		
J	continue?	Yes X No
	If "Yes," describe these changes on Schedule O.	165 <u></u> _ 16
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure	d by
•	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to of	
	the total expenses, and revenue, if any, for each program service reported.	
	and total disposition, and to total in any, to total program control reportion.	
4a	a (Code: ) (Expenses \$ 1,058,075 including grants of \$ ) (Revenue	\$ )
I	a (Code: ) (Expenses \$ 1,058,075 including grants of \$ ) (Revenue  To provide Public Broadcasting Services to all of West	· · · · · · · · · · · · · · · · · · ·
	Tennessee.	
4b	(Code: ) (Expenses \$ including grants of \$ ) (Revenue	\$)
	·	
	·	
	•	
	•	
	······	
	***************************************	
4c	c (Code: ) (Expenses \$ including grants of \$ ) (Revenue	<b>\$</b>
	7 ( )	· · · · · · · · · · · · · · · · · · ·
4d	d Other program services (Describe in Schedule O.)	
	(Expenses \$ 44,822 including grants of \$ ) (Revenue \$	)
40	Total program service expenses 1 - 102 - 897	

### Form 990 (2016) West TN Public Television Council, 62-1177950

### **Checklist of Required Schedules** No Yes Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X 1 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 X 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X 3 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II X 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 5 assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, X 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I X 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 complete Schedule D, Part III X 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a 9 custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or X debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted 10 X endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 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. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI X 11a 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 X Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 X 11d X Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e 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 X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI and XII 12a Was the organization included in consolidated, independent audited financial statements for the tax year? If X "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 13 13 14a Did the organization maintain an office, employees, or agents outside of the United States? X 14a **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV X 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 for any foreign organization? If "Yes," complete Schedule F, Parts II and IV X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 X assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 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 X Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? X If "Yes," complete Schedule G, Part III.

1 6	The 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?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		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		X
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		X
32				
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	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		X
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,			<u>-</u> -
	Part VI	37		X
~~	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
38	19? <b>Note</b> . All Form 990 filers are required to complete Schedule O.	38		х

Pa	art V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V				
	·			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	5			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	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 =			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	45		77	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
•	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)				v
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b 10	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authoriover, a financial account in a foreign country (such as a bank account, securities account, or other financial	ıy			
	account)?		4a		X
b	If "Yes," enter the name of the foreign country:		4a		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accour	ts			
	(FBAR).				
5a	Marches and defendant to a substitute about a section of the first state of the section of the s		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or				
	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods				
	and services provided to the payor?		7a		
b			7b		
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		+		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract	?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 889		7g		
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file		7h		
0	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	le .	8		
9	Sponsoring organizations maintaining donor advised funds.		-		
а	Did the energy examination make any tayable distributions under section 40662		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12				
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:				
а	Gross income from members or shareholders 11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources				
	against amounts due or received from them.)				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which				
	the organization is licensed to issue qualified health plans 13b		-		
C	Enter the amount of reserves on hand				77
14a			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		

Form 990 (2016) 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 Section A. Governing Body and Management No Yes 12 1a Enter the number of voting members of the governing body at the end of the tax year 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. 12 b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 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 X supervision of officers, directors, or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? X 5 Did the organization have members or stockholders? X 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a one or more members of the governing body? X Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a X Each committee with authority to act on behalf of the governing body? 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 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X 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 X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? X 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a 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? 16b 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) 18 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. 20 State the name, address, and telephone number of the person who possesses the organization's books and records:

Monica Reese

Clement Hall

Martin TN 38237 731-881-7561

# 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.

Check this box if fletther the org	I	I	aicu	orge	ai ii∠c	ation cc	7111	l	i, director, or trustee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(4	o not	Pos		than and		Reportable compensation	Reportable compensation from	Estimated amount of
	hours per week		do not check more than one ox, unless person is both an		from	related	other			
	(list any					or/trustee		the	organizations	compensation
	hours for	오호	Ë	Q	\$	9 표 2	Ţ	organization	(W-2/1099-MISC)	from the
	related organizations	divic	stitu	Officer	e e	Highest employe	Ĭ,	(W-2/1099-MISC)		organization and related
	below dotted	ual	iona	·	퓛	8 8	٦.			organizations
	line)	Individual trustee or director	3		Key employee	) mg				
		tee	nstitutional trustee			Highest compensated employee				
(1) Jim Blankenship										
_	0.00									
Board Member	0.00	X						0	0	0
(2) Jill Holland	0.00									
	0.00									
Board Member	0.00	X						0	0	0
(3) Elizabeth Pritch	hett									
	0.00									
Board Member	0.00	X						0	0	0
(4) Jimmy Eldridge										
	0.00									
Board Member	0.00	X						0	0	0
(5) Tim Rogers										
(3)	0.00									
Board Member	0.00	X						0	0	0
(6) Don Ridgeway	0.00	Α							<u> </u>	
(6) Don Kidgeway	0 00									
	0.00	l						_	_	
Board Member	0.00	X						0	0	0
(7) Kurt Brown										
	0.00									
Board Member	0.00	X						0	0	0
(8) Dob Johnson										
	0.00									
Board Member	0.00	X						0	0	0
(9) John Hatler										
(0) 0 0 1111 114 0 2 0 2	0.00									
<b>Писсином</b>	0.00			x				o	0	0
Treasurer	0.00			Λ		<del>                                     </del>	_	U	U	
(10) Robert Jones										
•	0.00							_	_	_
VP	0.00	ļ		X				0	0	0
(11) Shannon Clark										
	0.00									
Secretary	0.00			X				0	0	0
		_	_	_	_					

DAA

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Part VII	Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	es, a	and Highest Compensated	Employees (continued)				
(A) Name and title		(B) Average hours per week (list any hours for	bo	x, unle îcer a	Pos check ess pe	erson i directo	than dis both or/trust	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)			organiza and rela organizat	ated	
(12) Ro	dney Freed	0.00												
Presiden	t	0.00			x				0	0	1			0
	alom continuation shee													
d Total (a	ndd lines 1b and 1c)	cluding but not I	 imite	<u>.</u>				ibov	e) who received more than	\$100,000 of				
•	•	<u> </u>			trust	ee	kev e	mnl	loyee, or highest compensa	ated			Yes	No
employe	ee on line 1a? If "Yes,"	" complete Sched	dule	J foi	suc	h ind	dividu	ıal .	on and other compensation			3		X
organiza	ation and related orgar	nizations greater	thar	) \$1	50,00	00? /	lf "Ye	s," c	complete Schedule J for su	ch		4		X
5 Did any	person listed on line <i>'</i>	1a receive or acc	crue	com	pens	atıoı	n tror	m ar	ny unrelated organization or for such person	· individual		5		X
Section B. In	dependent Contracto	ors												
	sation from the organia	zation. Report co							ractors that received more t lar year ending with or with	in the organization's tax y	ear.			
	Name and	(A) business address							Descript	(B) ion of services		Cor	(C) npensati	ion
								_						
2 Total nu received	umber of independent of more than \$100,000	contractors (inclu of compensation	iding i fror	but n the	not e ord	limite janiz	ed to	tho:	se listed above) who	0				

Pa	rt V				tains a	response o	or note to any line	in this Part VIII		П
		Onlook ii e	orreduio (	3 0011		Тооролоо	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts t	1a	Federated campai	ians	1a				revenue		012 014
Program Service Revenue Contributions, Gifts, Grants and Other Similar Amounts		Membership dues		1b						
E.G	C	Fundraising events	s	1c						
ar Iffs		Related organizati		1d						
D.E.		Government grants (contri		1e	1.	210,443				
Sis		All other contributions, gift								
P E	•	and similar amounts not in		1f		88,981				
흕	~	Noncash contributions incl	ludad in linas 1a		<u> </u>					
E S	_			·II. •	Р		1,299,424			
9	<u>n</u>	Total. Add lines 1	<u>a-11</u>				1,233,424			
e l	0-		_			Busn. Code	0E 717	OE 717		
Š	2a	Membership					85,717	85,717		
9	b	TN Channel					33,333	33,333		
Ξ	C	Production					22,265	22,265		
တ္တ	d	Special Eve					13,867	13,867		
l a	е	Education a					4,010	4,010		
õ		All other program								
_	g	Total. Add lines 2					159,192			T
	3	Investment income	e (including	dividen	ids, intere	est,				
		and other similar a	amounts)				2,940	2,940		
	4	Income from inves	stment of tax	-exem <sub> </sub>	pt bond p	roceeds				
	5	Royalties		<u> </u>						
			(i) Real		(ii)	Personal				
	6a	Gross rents								
	b	Less: rental exps.								
	С	Rental inc. or (loss)								
	d	Net rental income	or (loss)							
	7a	Gross amount from	(i) Securities			Other				
		sales of assets other than inventory								
	b	Less: cost or other								
	_	basis & sales exps.								
	c	Gain or (loss)								
		Net gain or (loss)			l .					
		Gross income from fu								
ue	oa		ununaising eve	1113						
Je		(not including \$								
Other Reve		of contributions report See Part IV, line 18	ted off lifte 10)							
ĕ				a						
ਰੋ		Less: direct expen		b						
		Net income or (los		T T	events .					
	Уa	Gross income from g	-							
		See Part IV, line 19								
		Less: direct expen								
		Net income or (los	-	ning ac	tivities					
	10a	Gross sales of inv	-							
		returns and allowa	ances	а						
	b	Less: cost of good	ds sold	b						
ı.	С	Net income or (los	ss) from sale	s of in	ventory					
Ĺ		Miscellane	eous Revenue			Busn. Code				
	11a	Miscellaneou	s Income				4,511	4,511		
	b									
	С									
	d	All other revenue								
		Total. Add lines 1					4,511			
		Total revenue. Se					1,466,067	166,643	0	0

### Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must cor Check if Schedule O contains a respor			nplete column (A).	X
Do 10		(A)	(B)	(C)	[ <b>A</b> ]
	not include amounts reported on lines 6b, Bb, 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		expenses	general expenses	ехрепзез
•	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	563,702	404,789	115,607	43,306
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	103,985	87,742	13,040	3,203
10	Payroll taxes	44,674	30,614	9,616	4,444
11	Fees for services (non-employees):				
а	Management				
b	Legal	3,303		3,303	
С	Accounting	7,500		7,500	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	, ,				
	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties	F0 F10	F0 F13		
16	Occupancy	58,513	58,513	1 101	0.0
17	Travel	2,267	990	1,191	86
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	10 701	4 002	10 145	2 572
19	Conferences, conventions, and meetings	19,721	4,003	12,145	3,573
20	Interest				
21	Payments to affiliates	126 107	126 107		
22	Depreciation, depletion, and amortization	126,107	126,107		
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	291,888	291,888		
a b	Dues & Subscriptions	131,273	12,021	118,621	631
C	Advertising/Promotions	68,946	792	543	67,611
d	Insurance - Business	45,449	1,72	45,449	0,,011
	All other expenses	170,637	85,438	61,848	23,351
25	Total functional expenses. Add lines 1 through 24e	1,637,965	1,102,897	388,863	146,205
26	Joint costs. Complete this line only if the	, ,	, = = , = = ,		=== <b>7,=3</b>
	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)				
_					

### Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 739,280 Cash—non-interest bearing 815,838 1 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 3,181 3,186 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 8 Inventories for sale or use 8 7,994 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 5,466,269 b Less: accumulated depreciation 10b 4,667,823 907,809 798,446 10c Investments—publicly traded securities 11 11 12 12 Investments—other securities. See Part IV, line 11 Investments—program-related. See Part IV, line 11 13 13 Intangible assets 14 14 Other assets. See Part IV, line 11 15 15 1,548,906 1,726,828 16 Total assets. Add lines 1 through 15 (must equal line 34) ...... 16 17 Accounts payable and accrued expenses 490l 17 12,093 Grants payable 18 18 638,656 619,450 19 Deferred revenue 19 20 Tax-exempt bond liabilities ..... 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 45,780 47,356 684,926 678,899 Total liabilities. Add lines 17 through 25 ..... Organizations that follow SFAS 117 (ASC 958), check here Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 134,093 71,561 27 27 907,809 798,446 Temporarily restricted net assets 28 28 Fund 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ō complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund ..... 31 31 Retained earnings, endowment, accumulated income, or other funds š 32 32 870,007 1,041,902 33 Total net assets or fund balances 33 1,726,828 1,548,906 Total liabilities and net assets/fund balances ...... 34

Form **990** (2016)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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.

the Single Audit Act and OMB Circular A-133?

Form **990** (2016)

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X

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

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

## 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

Employer identification number

Open to Public Inspection

West TN Public Television Council, 62-1177950

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,
	_	city, and state:
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in
	ш	section 170(b)(1)(A)(iv). (Complete Part II.)
6		A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v)</b> .
7	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9	П	An agricultural research organization described in <b>section</b> 170(b)(1)(A)(ix) operated in conjunction with a land-grant college
	_	or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or
		university:
0		An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its
		support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses
	$\overline{}$	acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
1	Н	An organization organized and operated exclusively to test for public safety. See <b>section 509(a)(4)</b> .
2	Ш	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes
		of one or more publicly supported organizations described in <b>section 509(a)(1)</b> or <b>section 509(a)(2)</b> . See <b>section 509(a)(3)</b> . Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
	_	
	а	Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the
		supporting organization. You must complete Part IV, Sections A and B.
	b	Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having
	-	control or management of the supporting organization vested in the same persons that control or manage the supported
		organization(s). You must complete Part IV, Sections A and C.
	С	Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
	d	Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness
		requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
	е	Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III
	_	shock and sox is the digamental in the first the fi

	mber of supported organization	ions				
<b>g</b> Provide the f	ollowing information about the	ne supported organization(s).				
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

functionally integrated, or Type III non-functionally integrated supporting organization.

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.)

tion A. Public Support							
dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	<b>(e)</b> 2016	(f) Total	
Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,436,656	1,369,206	1,227,515	1,263,826	1,299,424	6,596,627	
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
The value of services or facilities furnished by a governmental unit to the organization without charge							
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)	1,436,656	1,369,206	1,227,515	1,263,826	1,299,424	6,596,627	
Public support. Subtract line 5 from line 4.						6,596,627	
tion B. Total Support							
dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	<b>(e)</b> 2016	(f) Total	
Amounts from line 4	1,436,656	1,369,206	1,227,515	1,263,826	1,299,424	6,596,627	
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,977	3,531				6,508	
Net income from unrelated business activities, whether or not the business is regularly carried on							
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
Total support. Add lines 7 through 10						6,603,135	
Gross receipts from related activities, etc.	(see instructions)				12	166,643	
First five years. If the Form 990 is for the	organization's first	, second, third, fou	ırth, or fifth tax yea	er as a section 501	(c)(3)	_	
						▶	
•	• •	_					
Public support percentage for 2016 (line 6,	column (f) divided	by line 11, colum	n (f))		14	99.90%	
						99.91%	
			,	33 1/3% or more, o	check this		
b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check							
7a 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is							
•				•			
organization						▶ 🗆	
	-						
_				-			
	eets the "facts-and	-circumstances" te	st. The organizatio	n qualifies as a po	ublicly	. $\Box$	
						▶ ∐	
in atmostica a						<b>&gt;</b>	
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  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)  Public support. Subtract line 5 from line 4.  tion B. Total Support  dar year (or fiscal year beginning in)  Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  Total support. Add lines 7 through 10  Gross receipts from related activities, etc.  First five years. If the Form 990 is for the organization, check this box and stop here. The organization quality and support test—2016. If the organization check this box and stop here. The organization quality and support test—2015. If the organization of 10%-facts-and-circumstances test—2011. To work or more, and if the organization meets the "factor or more, and if the organization meets the "factor or more, and if the organization meets the "factor or more, and if the organization meets the "factor or more, and if the organization meets the "factor or more, and if the organization meets the "factor or more, and if the organization meets the "factor or more, and if the organization meets the "factor or more, and if the organization meets the organization. Private foundation. If the organization discussion or private foundation. If the organization discussion or private foundation. If the organization discussion or the organization discussion or the organizati	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 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)  Public support. Subtract line 5 from line 4.  Ition B. Total Support  dar year (or fiscal year beginning in)  Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets  (Explain in Part VI.)  Total support. Add lines 7 through 10  Gross receipts from related activities, etc. (see instructions)  First five years. If the Form 990 is for the organization's first organization, check this box and stop here  Ition C. Computation of Public Support Percent  Public support percentage for 2016 (line 6, column (f) divided public support percentage from 2015 Schedule A, Part II, line 33 1/3% support test—2016. If the organization did not check as and stop here. The organization qualifies as a publicly signal support test—2016. If the organization did not check this box and stop here. The organization meets the "facts-and-circumstances test—2016. If the organization  10%-facts-and-circumstances test—2015. If the organization  10%-facts-and-circumstances test—2015. If the organization meets the "facts-and-circumstances test—2016. If the organization of the organization  10%-facts-and-circumstances test—2015. If the organization meets the "facts-and-circumstances test—2015. If the organization of the organization meets the "facts-and-circumstances t	dar year (or fiscal year beginning in)  Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  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)  Public support. Subtract line 5 from line 4.  Ition B. Total Support  dar year (or fiscal year beginning in)  Amounts from line 4  Cross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets  (Explain in Part VI).  Gross receipts from related activities, etc. (see instructions)  First five years. If the Form 990 is for the organization's first, second, third, for organization, check this box and stop here.  Public support test—2016. If the organization did not check the box on line 13 this box and stop here. The organization qualifies as a publicly supported organization 31 13%'s support test—2016. If the organization did not check a box on line 13 this box and stop here. The organization qualifies as a publicly supported organization or more, and if the organization meets the "facts-and-circumstances" test. The organization  10% or more, and if the organization meets the "facts-and-circumstances" test. Part VI how the organization meets the "facts-and-circumstances" test. Supported organization  10% or more, and if the organization meets the "facts-and-circumstances" test. Supported organization  10% or more, and if the organization meets the "facts-and-circumstances" test. Suplain in Part VI how the organization meets the "facts-and-circumstances" test.	dar year (or fiscal year beginning in)  Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit to publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5 from line 4.  Ition B. Total Support  dar year (or fiscal year beginning in)  Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI).  Total support Add lines 7 through 10  Gross receipts from related activities, etc. (see instructions)  First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year organization, check this box and stop here  tion C. Computation of Public Support Percentage  Public support percentage from 2015 Schedule A, Part II, line 14  33 1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 30 tox and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and part VI how the organization meets the "facts-and-circumstances" test, check this box and part VI	Giffs, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  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If the organization idin of check the box on line 13, 18a, and line 15 is 33 1/3% or more, and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part and circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI ow the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI ow the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI ow the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI ow the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI ow the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the or	Gifts, grants, contributions, and membership fees received. (On not include any "unusual grants.")  I y 369, 206  I 1, 237, 515  I 1, 263, 826  I 1, 299, 424  I 2, 297, 3, 3, 31  I 1, 263, 826  I 1, 299, 424  I 2, 297, 3, 3, 31  I 2, 27, 515  I 2, 23, 826  I 2, 299, 424  I 2, 297, 3, 3, 31  I 2, 27, 515  I 2, 23, 826  I 2, 299, 424  I	

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

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

Sec	tion A. Public Support			/ 1	•	,	
	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	<b>(e)</b> 2016	(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						
<u></u>	line 6.)						
	tion B. Total Support ndar year (or fiscal year beginning in)	(-) 2040	(h) 2042	(-) 0044	(4) 2045	(=) 2040	(6) T-1-1
		(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	<b>(e)</b> 2016	(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	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	organization's firs	st, second, third, fo	urth, or fifth tax ye	ar as a section 50	1(c)(3)	
	organization, check this box and stop here						<u></u> ▶ ∟
Sec	tion C. Computation of Public Su	• •	_				
15	Public support percentage for 2016 (line 8,						<u>%</u>
16	Public support percentage from 2015 Sche						%_
	tion D. Computation of Investme					1 1	
17	Investment income percentage for 2016 (li			3, column (f))			<u>%</u>
18	Investment income percentage from 2015						%_
19a	33 1/3% support tests—2016. If the orga						▶ □
	17 is not more than 33 1/3%, check this bo	-	•				▶ ⊔
b	33 1/3% support tests—2015. If the organized than 33 1/3% should the			•			. □
20	line 18 is not more than 33 1/3%, check the	-	-	•		-	

### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Ba Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (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).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).
- **8** 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).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined 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.
- c 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
		103	.10
	1		
	2		
	3a		
	3b		
	20		
	3c		
	4a		
	4b		
	4c		
	5a		
	Ja		
	5b		
	5c		
	6		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
/Ec	10b	0 or 990-	E7\ 2016

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Р	'a	C	Р	

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruc	tions).		
2 /	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	Schodule A (E		000	EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016 West TN Public Television C			950 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	janiza	tions	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on No	ov. 20, 1	1970 (explain in Part VI). <b>S</b> e	ee
instructions. All other Type III non-functionally integrated supporting organizations must	st comp	lete Sections A through E	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally integrated	Type II	I supporting organization (	

instructions).

Par	t V Type III Non-Functionally Integrated 509(a)(3) S	Supporting Organiza	tions (continued)	1
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpos			
2	Amounts paid to perform activity that directly furthers exempt purposes			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of support	orted 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	tion is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Castion F. Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions	(iii) Distributable
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Pre-2016	
1	Distributable amount for 2016 from Section C, line 6		F16-2010	Amount for 2016
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required-explain in Part VI). See			
2	instructions.			
3	Excess distributions carryover, if any, to 2016:			
а	, , , , , , , , , , , , , , , , , , ,			
b				
С	From 2013			
d	From 2014			
е	From 2015			
	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а				
b	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			

Schedule A (Formal Part VI		rmation. Provide the	explanations required	Council, 62-11 by Part II, line 10; Part II, lia, 9b, 9c, 11a, 11b, and 11	ne 17a or 17b; Part
	B, lines 1 and 2; Par 3a and 3b; Part V, lin	t IV, Section C, line 1; ne 1; Part V, Section E	Part IV, Section D, lir B, line 1e; Part V, Sec	nes 2 and 3; Part IV, Section D, lines 5, 6, and 8; ar mation. (See instructions.)	on E, lines 1c, 2a, 2b,
-					
•					
•					
•					

# 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

OMB No. 1545-0047

2016

Open to Public

Inspection

Employer identification number Name of the organization West TN Public Television Council, 62-1177950 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year 1 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 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? 6 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 2 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 Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2h Number of conservation easements on a certified historic structure included in (a) 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 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 (ii) Assets included in Form 990, Part X 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: Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part III Organizations Maintaining	Collections of	Art, Hi	storical Tr	easures, c	or Othe	r Simil	ar A	ssets	(contin	ued)	
3 Using the organization's acquisition, accession collection items (check all that apply):	, and other records	s, check a	any of the foll	owing that ar	e a signifi	cant use	of its				
a Public exhibition	d 🗌	Loan or	exchange pro	grams							
b Scholarly research	е 🗌										
c Preservation for future generations	_										
4 Provide a description of the organization's colle	ections and explair	n how the	y further the	organization's	exempt p	ourpose	in Par	t			
XIII.											
5 During the year, did the organization solicit or	receive donations	of art, his	storical treasu	res, or other	similar					_	_
assets to be sold to raise funds rather than to		part of the	e organizatior	n's collection?					Ye	es	No
Part IV Escrow and Custodial Arra									_		
Complete if the organization a 990, Part X, line 21.	answered "Yes'	on For	m 990, Pa	rt IV, line 9	, or rep	orted a	n am	ount c	n Forn	ו	
1a Is the organization an agent, trustee, custodian	n or other intermed	diary for c	ontributions o	r other assets	s not						
included on Form 990, Part X?									Ye	es 🗌	No
b If "Yes," explain the arrangement in Part XIII a	nd complete the fo	ollowing ta	able:								
									Amoun	t	
c Beginning balance							1c				
d Additions during the year							1d				
e Distributions during the year							1e				
f Ending balance							1f				
2a Did the organization include an amount on For	m 990, Part X, line	e 21, for 6	escrow or cus	todial accoun	t liability?				Y€	es _	No
<b>b</b> If "Yes," explain the arrangement in Part XIII.	Check here if the e	explanation	n has been pi	rovided on Pa	art XIII					<u>L</u>	
Part V Endowment Funds.		_									
Complete if the organization a				<u>rt IV, line 1</u>	0.						
	(a) Current year	(b)	Prior year	(c) Two yea	rs back	<b>(d)</b> Thr	ee years	s back	(e) Fou	r years	back
1a Beginning of year balance											
<b>b</b> Contributions											
c Net investment earnings, gains, and											
losses											
d Grants or scholarships											
e Other expenditures for facilities and											
programs											
f Administrative expenses											
g End of year balance											
2 Provide the estimated percentage of the currer	nt year end balanc	e (line 1g	, column (a))	held as:							
<b>a</b> Board designated or quasi-endowment	%										
<b>b</b> Permanent endowment%											
<b>c</b> Temporarily restricted endowment	%										
The percentages on lines 2a, 2b, and 2c should	ld equal 100%.										
3a Are there endowment funds not in the possess	sion of the organiza	ation that	are held and	administered	for the						
organization by:										Yes	No
(i) unrelated organizations									3a(i)		
(ii) related organizations									3a(ii)		
<b>b</b> If "Yes" on line 3a(ii), are the related organization	ions listed as requi	ired on So	chedule R?						3b		
4 Describe in Part XIII the intended uses of the	organization's end	owment fu	unds.								
Part VI Land, Buildings, and Equip											
Complete if the organization a	answered "Yes"	<u>on For</u>	<u>m 990, Pa</u>	rt IV, line 1	<u> 1a. See</u>	Form	<u>990,</u>	Part X	(, line 1	0.	
Description of property	(a) Cost or other		(b) Cost or o			Accumulate	b		(d) Book	value	
	(investment)		(othe		de	preciation					
1a Land				5,500						5,	<u>500</u>
<b>b</b> Buildings											
c Leasehold improvements											
<b>d</b> Equipment									_		
e Other				60,769					5,40		
Total. Add lines 1a through 1e. (Column (d) must ed	jual Form 990, Par	rt X, colun	nn (B), line 10	Oc.)					5,40	56,°	269

	Schedule D (Form 990) 2016	West '	TN	Public	Television	Council,	62-1177950
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Part VII	Investments—Other Securities.  Complete if the organization answered "Yes" on	Form 990. Part IV. line	11b. See Form 990. F	Part X. line 12.
	(a) Description of security or category	(b) Book value	(c) Method o	
	(including name of security)		Cost or end-of-year	
(1) Financial	derivatives			
	ald aquity interacts			
(0) 011	• • • • • • • • • • • • • • • • • • • •			
` '				
(B)				
(Ċ)				
(D)				
(E)				
(F)				
(G)				
	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments—Program Related.	F 000 D-4 IV / I'	44- 0 5 000 5	) 1 V   1 1 O
	Complete if the organization answered "Yes" on			
	(a) Description of investment	(b) Book value	(c) Method o Cost or end-of-yea	
(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.	F 000 D-4 IV / I'	44-1 0 5 000 5	)t \/ \              4
	Complete if the organization answered "Yes" on	Form 990, Part IV, line	11d. See Form 990, F	
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
<u>(5)</u>				
(6)				
(7)				
(8)				
(9)	n (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities.			
raitx	Complete if the organization answered "Yes" on	Form 990, Part IV, line	11e or 11f. See Form	990, Part X,
	line 25.	(A) P		
1. (1) Fadaral	(a) Description of liability	(b) Book value		
	income taxes  led Annual Pay	47,356		
	rea viiinat tal	41,330		
(3)				
(4)				
(5)				
(6)				
(7)		+		
(8)				
(9) Tatal (Oakum		17 256		
	n (b) must equal Form 990, Part X, col. (B) line 25.)	47,356	in an aigl at at a second of the second	uta tha
-	uncertain tax positions. In Part XIII, provide the text of the foliability for uncertain tax positions under FIN 48 (ASC 740). C	_		
organization 5	nazing for uncontain tax positions under this 40 (AGC 140). C	MOOR HOLD II THE TOAT OF THE IC	outlote has been provided if	1 VIII / / / / / / / / / / / / / / / / /

Sche	dule D (Form 990) 2016 West IN Public Television	Council, 62	1-11//950	Page 4
Pa	Reconciliation of Revenue per Audited Financial Sta		nue per Return.	
_	Complete if the organization answered "Yes" on Form 9  Total revenue, gains, and other support per audited financial statements		1 1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	Net unrealized gains (losses) on investments	2a		
h	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d		2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		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	4a		
	Other (Describe in Part XIII.)			
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 12.</i> )		5	
Pa	rt XII Reconciliation of Expenses per Audited Financial S			
	Complete if the organization answered "Yes" on Form 9			
1	Total and a second decrease of the first of the second			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments			
c	Other losses			
d		2d		
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:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII.)			
	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.	)	5	
Pa	rt XIII Supplemental Information.		•	
Prov	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	Part IV, lines 1b and 2b; F	Part V, line 4; Part X, line	
2; Pa	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p	rovide any additional infor	mation.	

Schedule D (Fo	orm 990) 2016	West	TN	Public	Television	Council,	62-1177950	Page <b>5</b>
Part XIII	Supplement	al Inforr	matio	n (continue	d)	-	62-1177950	
<u>-</u>				1	- /			
•								

### 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
2016

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

West :				Employer identific	ation number
	IN Public Telev	vision Cour	cil,	62-11779	50
Form 990, Part I	II, Line 4d - 2	All Other	Accomplishmen	t	
To provide Public					
10 110110	o broudeusering	DOLVICOS (	o urr or wes		'
Form 990, Part V	I, Line 11b - (	Organizatio	on's Process	to Review Fo	orm 990
No review was or	will be conduc	cted.			
Form 990, Part V	I. Line 19 - G	overning D	ocuments Disc	closure Expla	anation
		······ <del>·</del>		····· <del>-</del> ····	
Governing documen		те воги ву	request and	or on the	
Organization's w	ebsite.				
Form 990, Part I	X, Line 24e - (	Other Expe	ises		
Description					
······		3.0		J	
	ram Service	Mgt a	x General	Fundr	aising
Interconnect - I	NT				
\$	21,627	\$	0	\$	_
				<b>.</b>	0
Legislative lobb	ying				0
Legislative lobb		<b>\$</b>	19,700		
Legislative lobb	0	\$	19,700	<b>\$</b>	0
Legislative lobb	0 ts	\$			0
Legislative lobb	0	\$ \$	19,700 948		
Legislative lobb	0 ts	\$ \$			0
Legislative lobb \$ Software Contrac \$	0 ts	\$ \$			0
Legislative lobb \$ Software Contract \$ Interconnect \$	0 ts 11,006 16,771	\$	948		5,773
Legislative lobb  \$ Software Contract  \$ Interconnect  \$ Parts and Supplie	0 ts 11,006 16,771	\$	948		5,773 0
Legislative lobb  \$ Software Contract  \$ Interconnect  \$ Parts and Supplie	0 ts 11,006 16,771	\$	948		5,773
Legislative lobb  \$ Software Contract  \$ Interconnect  \$ Parts and Supplie	0 ts 11,006 16,771	\$	948		5,773 0

Schedule O (Form 990 or 990-EZ) (2016)

ame of the organization  West TN Public Tel		cil,		Employer identif	
Repairs & Maintena					
\$	8,795	\$	1,074	\$	0
Telephone					
\$	3,791	\$	5,470	\$	0
Special Events					
\$	928	\$	7,908	\$	0
<b>Vehicle Expenses</b>					
\$	6,387	\$	1,051	\$	208
Printing					
\$	3,828	\$	2,601	\$	825
Postage					
\$	156	\$	1,514	\$	5,011
Website					
\$	0	\$	4,500	\$	0
Equipment - Operat	ing				
\$	2,421	\$	969	\$	0
Credit Card Charge	S				
\$	0	\$	3,381	\$	0
Miscellaneous Expe	nses				
\$	126	\$	2,668	\$	517
Equipment - Replac	ement				
\$	0	\$	2,118	\$	0
Shipping					
\$	646	\$	1,362	\$	41
TPTC					
\$	0	\$	1,142	\$	0
Board Expenses					
				Page 1	of 2

West TN Pub	olic Te	elevision Counc	il,		62-1177	950
	\$	0	\$	667	\$	0
ducational	Books	s/Media				
	\$	600	\$	0	\$	0
pparel						
	\$	0	\$	431	\$	0
ostume Rer	ntal/Ac	tors				
	\$	230	\$	0	\$	0
ape Stock						
	\$	184	\$	0	\$	0
Total						
	\$	85,438	\$	61,848	\$	23,351
n-Kind Cor	ntribut		er Changes	s in Net Asse	\$	0
Form 990, P In-Kind Cor In-Kind Cor	ntribut	ions	er Changes	s in Net Asse		
n-Kind Cor	ntribut ntribut	ions		s in Net Asse	\$	0
n-Kind Cor	ntribut ntribut	ions		s in Net Asse	\$ \$	0
n-Kind Cor n-Kind Cor sook / Tax	ntribut ntribut	ions		in Net Asse	\$ \$ \$	0 0 3
n-Kind Cor n-Kind Cor ook / Tax	ntribut ntribut	ions		s in Net Asse	\$ \$ \$	0 0 3
n-Kind Cor n-Kind Cor ook / Tax	ntribut ntribut	ions		s in Net Asse	\$ \$ \$	0 0 3
n-Kind Cor n-Kind Cor look / Tax	ntribut ntribut	ions		in Net Asse	\$ \$ \$	0 0 3
n-Kind Cor n-Kind Cor sook / Tax	ntribut ntribut	ions		in Net Asse	\$ \$ \$	0 0 3
n-Kind Cor n-Kind Cor sook / Tax	ntribut ntribut	ions		in Net Asse	\$ \$ \$	0 0 3
n-Kind Cor n-Kind Cor sook / Tax	ntribut ntribut	ions		s in Net Asse	\$ \$ \$	0 0 3
n-Kind Cor n-Kind Cor ook / Tax	ntribut ntribut	ions		s in Net Asse	\$ \$ \$	0 0 3
n-Kind Cor n-Kind Cor ook / Tax	ntribut ntribut	ions		in Net Asse	\$ \$ \$	0 0 3
n-Kind Cor n-Kind Cor ook / Tax	ntribut ntribut	ions		in Net Asse	\$ \$ \$	0 0 3

Form **4562** 

Department of the Treasury

### **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 **2016** 

ment 179

Internal Revenue Service

Name(s) shown on return

West TN Public Television Council,

Identifying number 62–1177950

	ss or activity to which this form relates  ndirect Depreciat	ion							
	rt I Election To Exper	nse Certain Prop	erty Under Section		omple	ata Part	ı		
1	Maximum amount (see instruction							1	500,000
2	Total cost of section 179 property	*	- !tt!\					2	300,000
3	Threshold cost of section 179 property			tions)				3	2,010,000
4	Reduction in limitation. Subtract lin		ro or loop optor O					4	
5	Dollar limitation for tax year. Subtract lin		*****	ing separately				5	
6	(a) Description			ost (business use			Elected cost		
7	Listed property. Enter the amount	from line 29			7				
8	Total elected cost of section 179	property. Add amounts	s in column (c), lines 6 a	nd 7				8	
9	Tentative deduction. Enter the sn							9	
10	Carryover of disallowed deduction	from line 13 of your 2	0045 Farms 4500					10	
11	Business income limitation. Enter	the smaller of busines	ss income (not less than	zero) or line	5 (see	instructio	ns)	11	
12	Section 179 expense deduction. A	add lines 9 and 10, bu	ıt don't enter more than li	ne 11	<u></u>			12	
13	Carryover of disallowed deduction	to 2017. Add lines 9	and 10, less line 12	<u></u>	13				
Note	: Don't use Part II or Part III below	for listed property. Ins	stead, use Part V.						
Pa	rt II Special Depreciati	ion Allowance a	nd Other Depreciat	tion (Don't	inclu	de liste	d propert	y. <b>)</b> (S	See instructions.)
14	Special depreciation allowance for	qualified property (of	ther than listed property)	placed in ser	vice				
	during the tax year (see instructio							14	
15	Property subject to section 168(f)	(1) election						15	
16	Other depreciation (including ACF	RS)						16	126,107
Pa	rt III MACRS Depreciat	tion (Don't includ	e listed property.) (S	See instruct	tions.	)			
			Section A						
17	MACRS deductions for assets pla	•	, ,					17	0
<u>18</u>	If you are electing to group any assets place	d in service during the tax ye	ar into one or more general asse	t accounts, check	here				
			D						
	Section B—A		vice During 2016 Tax Y	T -		eral Depr	eciation S	ystem	 
	(a) Classification of property	Assets Placed in Ser  (b) Month and year placed in service	vice During 2016 Tax Y  (c) Basis for depreciation (business/investment use only–see instructions)	(d) Recovery period	e Gen	eral Depr	eciation S		(g) Depreciation deduction
19a		(b) Month and year placed in	(c) Basis for depreciation (business/investment use	(d) Recovery	e Gen	·			
19a b	(a) Classification of property	(b) Month and year placed in	(c) Basis for depreciation (business/investment use	(d) Recovery	e Gen	·			
	(a) Classification of property  3-year property	(b) Month and year placed in	(c) Basis for depreciation (business/investment use	(d) Recovery	e Gen	·			
b c d	(a) Classification of property  3-year property  5-year property  7-year property  10-year property	(b) Month and year placed in	(c) Basis for depreciation (business/investment use	(d) Recovery	e Gen	·			
b c d	(a) Classification of property  3-year property  5-year property  7-year property	(b) Month and year placed in	(c) Basis for depreciation (business/investment use	(d) Recovery	e Gen	·			
b c d	(a) Classification of property  3-year property  5-year property  7-year property  10-year property	(b) Month and year placed in	(c) Basis for depreciation (business/investment use	(d) Recovery	e Gen	·			
b c d e f	(a) Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property	(b) Month and year placed in	(c) Basis for depreciation (business/investment use	(d) Recovery period	e Gen	·	(f) Methe		
b c d e f g	(a) Classification of property  3-year property  5-year property  7-year property  10-year property  20-year property  25-year property  Residential rental	(b) Month and year placed in	(c) Basis for depreciation (business/investment use	(d) Recovery period  25 yrs.  27.5 yrs.	(e) (	·	(f) Metho		
b c d e f g	(a) Classification of property  3-year property  5-year property  7-year property  10-year property  20-year property  25-year property  Residential rental property	(b) Month and year placed in	(c) Basis for depreciation (business/investment use	(d) Recovery period	(e) (	MM MM	(f) Methe		
b c d e f g	(a) Classification of property  3-year property  5-year property  7-year property  10-year property  20-year property  25-year property  Residential rental property  Nonresidential real	(b) Month and year placed in	(c) Basis for depreciation (business/investment use	(d) Recovery period  25 yrs.  27.5 yrs.	(e) (	Convention	(f) Methe		
b c d e f g	(a) Classification of property  3-year property  5-year property  7-year property  10-year property  20-year property  25-year property  Residential rental property  Nonresidential real property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only–see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	(e)	MM MM MM MM	(f) Method	od	(g) Depreciation deduction
b c d e f g	(a) Classification of property  3-year property  5-year property  7-year property  10-year property  20-year property  25-year property  Residential rental property  Nonresidential real property  Section C—As	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	(e)	MM MM MM MM	(f) Method	od	(g) Depreciation deduction
b c d e f g h	(a) Classification of property  3-year property  5-year property  7-year property  10-year property  20-year property  25-year property  Residential rental property  Nonresidential real property  Section C—As	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only–see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	(e)	MM MM MM MM	S/L	od	(g) Depreciation deduction
b c d e f g h i 20a b	(a) Classification of property  3-year property  5-year property  7-year property  10-year property  20-year property  25-year property  Residential rental property  Nonresidential real property  Section C—As  Class life  12-year	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only–see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.  ar Using the	(e)	MM MM MM MM MM	(f) Methers S/L	od	(g) Depreciation deduction
b	(a) Classification of property  3-year property  5-year property  7-year property  10-year property  20-year property  25-year property  Residential rental property  Nonresidential real property  Section C—As  Class life  12-year	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only–see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	(e)	MM MM MM MM	S/L	od	(g) Depreciation deduction
b	(a) Classification of property  3-year property  5-year property  7-year property  10-year property  20-year property  25-year property  Residential rental property  Nonresidential real property  Section C—As  Class life  12-year  40-year	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only–see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.  ar Using the	(e)	MM MM MM MM MM	(f) Methers S/L	od	(g) Depreciation deduction
b	(a) Classification of property  3-year property  5-year property  7-year property  10-year property  20-year property  25-year property  Residential rental property  Nonresidential real property  Section C—As  Class life  12-year  40-year  Listed property. Enter amount fror	(b) Month and year placed in service  service  service  service  service  service  service  service  service	(c) Basis for depreciation (business/investment use only–see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. ar Using the 12 yrs. 40 yrs.	e Gen	MM MM MM MM MM active Dep	(f) Methers S/L	od	(g) Depreciation deduction
b c d e f g h i 20a b c Pa	(a) Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property  20-year property  25-year property  Residential rental property  Nonresidential real property  Section C—As  Class life  12-year  40-year  Listed property. Enter amount fror  Total. Add amounts from line 12,	(b) Month and year placed in service  sets Placed in Service  structions.)  In line 28  lines 14 through 17, li	(c) Basis for depreciation (business/investment use only–see instructions)  ice During 2016 Tax Yea	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. ar Using the 12 yrs. 40 yrs.	Altern	MM MM MM MM MM active Dep	(f) Methers S/L	Syste 21	(g) Depreciation deduction
b c d e f g h i 20a b c Pa 21	(a) Classification of property  3-year property  5-year property  7-year property  10-year property  20-year property  25-year property  Residential rental property  Nonresidential real property  Section C—As  Class life  12-year  40-year  Listed property. Enter amount fror  Total. Add amounts from line 12, here and on the appropriate lines	(b) Month and year placed in service  sets Placed in Service  structions.) In line 28 lines 14 through 17, line of your return. Partner	(c) Basis for depreciation (business/investment use only–see instructions)  ce During 2016 Tax Yea  ines 19 and 20 in columnerships and S corporation	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.  ar Using the 12 yrs. 40 yrs.	Altern	MM MM MM MM MM active Dep	(f) Methers S/L	Syste	(g) Depreciation deduction
b c d e f g h i 20a b c Pa 21	(a) Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property  20-year property  25-year property  Residential rental property  Nonresidential real property  Section C—As  Class life  12-year  40-year  Listed property. Enter amount fror  Total. Add amounts from line 12,	(b) Month and year placed in service  sets Placed in Service  structions.) In line 28 lines 14 through 17, line of your return. Partner	(c) Basis for depreciation (business/investment use only–see instructions)  ce During 2016 Tax Yea  ines 19 and 20 in columnerships and S corporation	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.  ar Using the 12 yrs. 40 yrs.	Altern	MM MM MM MM MM active Dep	(f) Methers S/L	Syste 21	(g) Depreciation deduction

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Asset	Description	Date In Service	Cost	Bus Sec Basis % 179 Bonus for Depr	PerConv Meth	Prior	Current
Other 5	Depreciation: 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	10 MO S/L	108,058	0
7	DTV ANTENNA	10/28/03	53,789	53,789	10 MO S/L 10 MO S/L	53,789	0
8 9	DTV TRANSMITTER LINE DTV TRANS. SITE MONITORING	10/28/03 10/28/03	15,038 8,580		10 MO S/L 10 MO S/L	15,038 8,580	0
10	DTV REMOTE CONTROL EQUIP	10/28/03	6,117	6,117	10 MO S/L	6,117	0
	DTV ENCODING EQUIPMENT	10/28/03 10/28/03	57,148	57,148 124,056	10 MO S/L	57,148 124,056	0
	DTV STUDIO-TRANS. LINK DTV SUDIO SITE MON. EQUIP	10/28/03	124,056 8,580	124,056 8,580	10 MO S/L 10 MO S/L	8,580	$\begin{array}{c} 0 \\ 0 \end{array}$
14	DTV TRANSMISSION TEST EQUIP	10/28/03	25,276	25,276	10 MO S/L	25,276	0
	DTV CDEYE FOR WATCHDOG+ DTV CHECKOUT/FREIGHT	10/28/03 10/28/03	7,994 19,512		10 MO S/L 10 MO S/L	7,994 19,512	$\begin{array}{c} 0 \\ 0 \end{array}$
	FIBEROPTIC CABLE/WIRING	9/17/03	9,384	9,384	10 MO S/L 10 MO S/L	9,384	0
18	DTV GENERATOR	10/31/04	24,141	24,141	7 MO S/L	24,141	0
	DTV TRANS & MC UPGRADE PRO TRACK SYSTEM	6/30/05 5/05/05	862,200 47,015	862,200 47,015	10 MO S/L 7 MO S/L	862,200 47,015	$\begin{array}{c} 0 \\ 0 \end{array}$
20	DECODERS AND MODULATORS	3/17/05	25,004	25,004	7 MO S/L 7 MO S/L	25,004	0
22	PWR SUPPLIES DIST AMPS	3/17/05	10,690	10,690	7 MO S/L	10,690	0
23 24	COMBO MASTER SYNC GENERATOR ROUTER INPUT/OUTPUT CON.	3/17/05 3/17/05	14,239 22,160	14,239 22,160	7 MO S/L 7 MO S/L	14,239 22,160	$\begin{array}{c} 0 \\ 0 \end{array}$
	DTV - SERVER	3/17/03 4/19/05	130,742	130,742	7 MO S/L 7 MO S/L	130,742	0
26	VTR'S, RACK MOUNTS	4/18/05	70,815	70,815	7 MO S/L	70,815	0
27 28	LCD VIDEO MONITORS	4/11/05	6,885	6,885	5 MO S/L	6,885	$\begin{array}{c} 0 \\ 0 \end{array}$
28 29	COMPUTER - ENGINEERING UPGRADE TO MIP 41010	4/01/05 11/30/05	1,115 2,800	1,115 2,800	5 MO S/L 7 MO S/L	1,115 2,800	0
30	DOLBY DIGITAL RECORDER	3/13/06	4,635	4,635	7 MO S/L	4,635	0
	DTV LINES FOR JEA SYSTEM	4/01/06	4,570	4,570	10 MO S/L	4,570	0
32 33	GA LINK INTERFACE CONVERTER TRANSMITTER & TOWER	2/14/06 4/01/84	4,410 828,071	4,410 828,071	7 MO S/L 10 MO S/L	4,410 827,023	$\begin{array}{c} 0 \\ 0 \end{array}$
34	TRANSMITTER BUILDING	3/02/90	26,350	26,350	20 MO S/L	26,350	ő
	MICROWAVE ANTENNA	8/15/91	27,669	27,669		27,552	0
38 39	TOWER - ATWOOD TOWER - ATWOOD	6/30/96 7/25/96	42,002 29,451		10 MO S/L 10 MO S/L	42,002 29,451	$\begin{array}{c} 0 \\ 0 \end{array}$
41	2005 DODGE GRAND CARAVAN	10/07/04	17,311	17,311	5 MO S/L	17,311	ő
62	MICROPHONES	10/03/00	2,706	2,706	7 MO S/L	2,706	0
64 68	RTL PROJECTOR DELL COMPUTER (DARRELL)	9/28/01 6/30/04	3,473 1,413	3,473 1,413	7 MO S/L 5 MO S/L	3,473 1,413	$\begin{array}{c} 0 \\ 0 \end{array}$
69	PANASONIC DVD CAMERA	6/30/04	19,206	19,206	7 MO S/L	19,206	ő
72	SONY BVP TRIAX CAMERAS	11/21/05	10,114	10,114	7 MO S/L	10,114	0
73 75	BETA SP VTR OFFICE FURNITURE	1/18/06 2/28/94	3,902 12,917	3,902 12,917	7 MO S/L 7 MO S/L	3,902 12,917	$\begin{array}{c} 0 \\ 0 \end{array}$
	DESK	10/31/95	1,199		10 MO S/L	1,199	0
77	2 R-PANEL DISPLAYS	10/31/95	608	608	10 MO S/L	608	0
78 85	FILE CABINET TOSHIBA COPIER	10/31/95 6/30/03	1,199 4,684	1,199 4,684	10 MO S/L 5 MO S/L	1,199 4,684	0
90	LEASEHOLD IMPROVEMENTS	7/01/91	18,560	18,560		18,496	0
91	DESK	4/30/94	425	425	10 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	7 MO S/L 7 MO S/L	67,566 11,200	$\begin{array}{c} 0 \\ 0 \end{array}$
	5 DP572 Dolby Encoders	5/21/07	20,500	20,500	7 MO S/L 7 MO S/L	20,500	0
96	HD Remote Unit	5/17/07	212,093	212,093	7 MO S/L	212,093	0
97 98	Microphones HOT SPARES Disk Drive	12/14/06 3/02/07	17,141 1,484	17,141 1,484	7 MO S/L 7 MO S/L	17,141 1,484	$\begin{array}{c} 0 \\ 0 \end{array}$
99	Inlet Aire Dampers w/exhaust fan	10/18/06	4,300	4,300	7 MO S/L 7 MO S/L	4,300	0
100	Color Viewfinder & 6 rack mounts	4/17/07	7,636	7,636	7 MO S/L	7,636	0
101 102	2 HD Electronic Viewfinders XDCAM HD Deck	4/18/07 4/25/07	4,641 86,547	4,641 86,547	7 MO S/L 7 MO S/L	4,641 86,547	$\begin{array}{c} 0 \\ 0 \end{array}$
	HD60P Integrated Triax Portable Camera	4/25/07 4/26/07	45,000	45,000	7 MO S/L 7 MO S/L	45,000	0
104	4 HD Camera Control Units	4/26/07	63,840	63,840	7 MO S/L	63,840	0
	CCU Side Triax Adapter Multi Format Switcher Processor	4/26/07 4/26/07	21,600 88,493	21,600 88,493	7 MO S/L 7 MO S/L	21,600 88,493	$\begin{array}{c} 0 \\ 0 \end{array}$
106 107	Multi Format Switcher Processor 3 Color Viewfinders	4/26/07 4/27/07	15,732	15,732	7 MO S/L 7 MO S/L	15,732	0
108	2 Fujinon Lens	4/27/07	47,637	47,637	7 MO S/L	47,637	0
109	2 Fujinon 2/3 Focus Lens	5/01/07	66,732	66,732	7 MO S/L	66,732	$\begin{array}{c} 0 \\ 0 \end{array}$
110	4 Lens Control Kit Master Setup Unit	4/27/07 5/01/07	11,676 7,280	11,676 7,280	7 MO S/L 7 MO S/L	11,676 7,280	0
112	Netgear FS516 Router	5/07/07	507	507	5 MO S/L	507	0
113	10 Meter Fiber Cable	5/08/07	3,749	3,749	7 MO S/L	3,749	0

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		Date		Bus Sec	Basis			
Asset	Description	In Service	Cost	% 179 Bonus		Per Conv Meth	Prior	Current
114	2HD 60P Integrated Portable Triax Cameras		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	0
117	DOREMI Video Server/Storage Unit	5/04/07	74,550		74,550	7 MO S/L	74,550	ŏ
118	Inscriber G3 HD.SD live to air graphics syst		29,160		29,160	7 MO S/L	29,160	0
119 121	Dell Laptop - Monica Scaffolding	4/06/07 10/18/07	1,262 1,678		1,262 1,678	5 MO S/L 7 MO S/L	1,262 1,678	$0 \\ 0$
124	Optiplex 755 Minitower	3/18/08	1,240		1,240	5 MO S/L	1,240	ő
125	SENN Supercrd RF Audio Equip	12/06/07	2,073		2,073	7 MO S/L	2,073	0
126 127	XD Cam HD Camcorder Battery Charger	11/06/07 12/13/07	34,101 1,097		34,101 1,097	10 MO S/L 7 MO S/L	29,554 1,097	3,410 0
128	Avid Dual Boot Link System	10/25/07	127,994		127,994	10 MO S/L	110,928	12,800
129	Yamaha Audio Production Console	8/23/07	23,986		23,986	10 MO S/L	21,188	2,398
130 131	Open Gear 2RU Cooling Fan 2 HD Monitors and Accessories	11/08/07 8/27/07	2,143 15,772		2,143 15,772	7 MO S/L 7 MO S/L	2,143 15,772	0
132	Open Transformer Contact Switch	7/16/07	3,619		3,619	7 MO S/L	3,619	0
133 134	HD Electrotrack	7/23/07 7/17/07	7,412 7,576		7,412 7,576	7 MO S/L 7 MO S/L	7,412 7,576	0
134	2 Multi-Channel Monitoring System Optiplex 755 Computer	11/18/08	1,458		1,458	7 MO S/L 7 MO S/L	1,458	0
136	Sony XD Cam 50Gb deck	4/08/09	12,522		12,522	7 MO S/L	12,522	0
137 138	Sony XDCam 50Gb deck Thin Profile coax Brown	4/16/09 12/03/08	12,522 130		12,522 130	7 MO S/L 7 MO S/L	12,522 130	0
139	Thin Profile coax Red	12/03/08	130		130	7 MO S/L 7 MO S/L	130	0
140	Thin Profile coax Violet	12/03/08	130		130	7 MO S/L	130	0
141 142	Thin Profile coax Green Thin Profile coax Black	12/03/08 12/03/08	130 130		130 130	7 MO S/L 7 MO S/L	130 130	0
143	Single Patchfield	12/03/08	993		993	7 MO S/L 7 MO S/L	993	0
144	Triple Patchfield	12/03/08	3,035		3,035	7 MO S/L	3,035	0
145 146	Test Equipment Analog Video Distributor Amplifier	6/18/09 1/06/09	3,789 198		3,789 198	7 MO S/L 7 MO S/L	3,789 198	0
147	Analog Video Distributor Amplifier	1/06/09	198		198	7 MO S/L 7 MO S/L	198	0
148	Analog Video Distributor Amplifier	1/06/09	198		198	7 MO S/L	198	0
149 150	Up Converter Audio Monitor	1/06/09 12/15/08	3,815 8,888		3,815 8,888	7 MO S/L 7 MO S/L	3,815 8,888	0
152	HD-HDMI Converter	1/05/09	437		437	7 MO S/L	437	ő
153	Sold/Scrapped: 6/30/17 HD-HDMI Converter	1/05/09	437		437	7 MO S/L	437	0
154	HD-HDMI Converter	1/05/09	437		437	7 MO S/L 7 MO S/L	437	0
155	Dolby E Encoder	11/14/08	5,480		5,480	7 MO S/L	5,480	0
156 157	Dolby E Encoder Dolby Decoder	11/14/08 11/14/08	5,480 4,475		5,480 4,475	7 MO S/L 7 MO S/L	5,480 4,475	$0 \\ 0$
158	HD-SDI Media Port	2/10/09	24,343		24,343	7 MO S/L	24,343	ő
159	300 Gb HDD	2/10/09	33,900		33,900	7 MO S/L	33,900	0
161 163	Dolby Decoder LCD Monitor	11/14/08 11/18/08	4,475 253		4,475 253	7 MO S/L 7 MO S/L	4,475 253	0
164	Sliding Shelf	1/16/09	159		159	7 MO S/L	159	ő
165	NV5128 Multi-Format Router	12/03/08	58,995		58,995	7 MO S/L	58,995	0
166 168	HD/SD Sync Generator DCA15 SPX Generator	7/17/08 1/21/09	368 13,407		368 13,407	7 MO S/L 7 MO S/L	368 13,407	$0 \\ 0$
169	17" LCD Monitor	3/18/09	170		170	7 MO S/L	170	ő
170	Omneon Video File Server	3/26/09	1,700		1,700	7 MO S/L	1,700	0
171 172	Diamond PA Repair Quartz Light Kit M31500	7/22/08 5/18/09	1,705 495		1,705 495	7 MO S/L 7 MO S/L	1,705 495	0
173	Quartz Light Kit M31500	5/18/09	467		467	7 MO S/L	467	Ö
174	Quartz Light Kit M31100	5/18/09	674		674		674	0
175 176	Audio-Video Connector Analog Video Distributor Amplifier	12/03/08 1/16/09	1,359 291		1,359 291	7 MO S/L 7 MO S/L	1,359 291	$0 \\ 0$
177	Auto Equalizing Distribution Amplifier	1/16/09	311		311	7 MO S/L	311	0
178	Power Supply - 00FR-C frame	1/16/09	593		593	7 MO S/L	593	0
179 180	Standard Definition Encoder Multi-Format Receiver RX1290	4/06/09 4/06/09	11,812 3,689		11,812 3,689	7 MO S/L 7 MO S/L	11,812 3,689	$0 \\ 0$
181	AAC Audio License Key	4/06/09	614		614	7 MO S/L	614	0
182		4/06/09	958 1 607		958 1 607	7 MO S/L	958 1.607	0
183 184	Clarus Noise Reduction Clarus Input Deblocking Filter	4/06/09 4/06/09	1,607 1,607		1,607 1,607	7 MO S/L 7 MO S/L	1,607 1,607	$\begin{array}{c} 0 \\ 0 \end{array}$
185	Transport Stream 0Video Server	4/06/09	1,607		1,607	7 MO S/L	1,607	0
186 187	HD-SDI Modular Receiver Decoder	4/06/09 4/06/09	713 713		713 713	7 MO S/L 7 MO S/L	713 713	0
187	HD-SDI Modular Receiver Decoder HVAC System	10/09/09	35,000		35,000	10 MO S/L	23,625	3,500
190	2 Televisions	2/16/10	696		696	7 MO S/L	630	66
191	Sony PDW-F75 Professional Disc Recorer	12/06/10	13,147		13,147	7 MO S/L	10,486	1,879

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		Date		Rue	Sec	Basis			
Asset	Description	In Service	Cost		179 Bonus		PerConv Meth	Prior	Current
193	2008 Nissan Frontier	11/14/08	21,200			21,200	5 MO S/L	21,200	0
194	Donated WARN Equipment Package	4/25/12	29,409			29,409	10 MO S/L	12,254	2,941
195	Repair on DNWA75 VTR	3/23/12	9,213			9,213	7 MO S/L	5,594	1,316
196	7 Computers	12/18/13	4,574			4,574	5 MO S/L	2,287	915
197	Antenna & Related Hardware - RUS Grant		333,675			333,675	15 MO S/L	57,466	22,245
198	Transmission Line and Hardware - RUS Gra		79,850			,	15 MO S/L	13,752	5,323
199 200	Tower Reinforcement - RUS Grant	12/01/13	106,044				15 MO S/L	18,263	7,070
200	LED Tower Light System - RUS Grant Equipment, Tuning, Guy Wire Install - RUS	12/01/13	16,456 196,575				15 MO S/L 15 MO S/L	2,834 33,855	1,097 13,105
	Engineering Study - RUS Grant	12/01/13	25,800			25,800	15 MO S/L 15 MO S/L	4,443	1,720
203	Tower Painting	12/01/13	15,000			15,000	10 MO S/L	3,875	1,500
204	2015 Dodge Journey Hatchback	3/23/15	19,595			19,595	5 MO S/L	4,899	3,919
	PowerEdge T420 Server	9/12/14	3,223			3,223	7 MO S/L	844	461
206	Caption Maker	10/18/14	5,750			5,750	7 MO S/L	1,369	821
207	Inscriber G8 - Dual Channel	10/24/14	36,858			36,858	7 MO S/L	8,776	5,265
208	Promise Pegasus2 Thunderbolt 2 RAIN Sys	5/05/15	4,139			4,139	7 MO S/L	690	591
209	Mac Pro Server	5/05/15	9,523			9,523	7 MO S/L	1,587	1,361
210	PSIP Generator	5/11/15	8,577			8,577	7 MO S/L	1,430	1,225
211	Device Server Computer & HDD	5/23/15	13,943			13,943	5 MO S/L	3,021	2,789
212	Automation Software	6/01/15	6,800			6,800	5 MO S/L	1,473	1,360
213	24" High Grade 3D LCD Monitor	6/03/15	6,841			6,841	7 MO S/L	1,059	977
214	PowerEdge T430 Server	6/12/15	3,762			3,762	7 MO S/L	582	538
215 216	Selenio Frame, Power Supply	6/18/15	6,120			6,120	7 MO S/L	874	875 952
217	Encoder card Encoder card	6/18/15 6/18/15	6,660 6,660			6,660 6,660	7 MO S/L 7 MO S/L	951 951	952 952
218	Encoder card	6/18/15	6,660			6,660	7 MO S/L	951	952 952
219	Encoder Software HD	6/18/15	7,200			7,200	5 MO S/L	1,440	1,440
220	Encoder Software SD	6/18/15	4,320			4,320	5 MO S/L	864	864
221	Encoder Mux Software	6/18/15	2,880			2,880	5 MO S/L	576	576
222	Encoder Transport Stream SW	6/18/15	2,880			2,880	7 MO S/L	411	412
223	Promedia Rhozet Software	6/25/15	5,096			5,096	5 MO S/L	1,019	1,019
224	Transmitter Power Supply Module	4/11/15	4,598			4,598	7 MO S/L	821	657
225	USB 3.0 XDCam Disc Drive	9/06/14	2,712			2,712	7 MO S/L	710	388
226	DELL POWER EDGE T430 SERVER	7/02/15	3,762			3,762	5 MO S/L	752	753
227	SURCODE FOR DOLBY E MASTER SUI		3,495			3,495	5 MO S/L	699	699
228	SONNET RACK	7/11/15	3,423			3,423	5 MO S/L	685	684
229	5.1 MULTI CHANNEL MONITORING SY		3,401			3,401	5 MO S/L	624	680
230 231	ENCODER & AUTOMATION SYSTEM	8/01/15	13,050			13,050 9,793	5 MO S/L 5 MO S/L	2,393	2,610
	PART 10F3: MD 5 HARD DRIVE PART 20F3: RX30	2/12/16 2/12/16	9,793 11,539			11,539	5 MO S/L 5 MO S/L	816 962	1,959 2,307
	PART 30F3: MD 12 HARD DRIVE	3/12/16	15,320			15,320	5 MO S/L	1,021	3,064
234	TELEPHONE SYSTEM	12/08/15	6,775			6,775	5 MO S/L	790	1,355
235	TRANSPORT STREAM CONVERTER	3/25/16	5,031			5,031	5 MO S/L	252	1,006
236	MASTER CLOCK SYSTEM	12/02/16	11,241			11,241	5 MO S/L	0	1,311
237	FCC REPACK	6/20/17	5,500			5,500	0 Land	0	0
	<b>Total Other Depreciation</b>		5,466,706		· ·	5,466,706		4,542,156	126,107
	Total ACRS and Other Deprec	iation	5,466,706		_	5,466,706		4,542,156	126,107
	_				:				
	Grand Totals		5,466,706			5,466,706		4,542,156	126,107
	Less: Dispositions and Transfer	rs	437			437		437	0
	Less: Start-up/Org Expense		0		-	0		0	0
	<b>Net Grand Totals</b>		5,466,269		:	5,466,269		4,541,719	126,107

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<u>Form</u>	Unit	Asset		Description	n		Tax	AMT		AMT Adjustments/ Preferences
			There are	no assets that r		a of this repo	rt		_	
						-				

163097 West TN Public Television Council,
62-1177950 Future Depreciation Report FYE: 6/30/18 10/31/2017 2:30 PM

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Asset	Description	Date In Service	Cost	Tax	AMT	
Other 1	Depreciation:					
5	ANTENNA	10/28/03	20,425	0	0	
6 7	DTV TRANSMITTER SYSTEM DTV ANTENNA	10/28/03 10/28/03	108,058 53,789	0	0	
8	DTV TRANSMITTER LINE	10/28/03	15,038	0	0	
9 10	DTV TRANS. SITE MONITORING DTV REMOTE CONTROL EQUIP	10/28/03 10/28/03	8,580 6,117	0	0	
11	DTV ENCODING EQUIPMENT	10/28/03	57,148	0	0	
12	DTV STUDIO-TRANS. LINK	10/28/03	124,056	0	0	
13 14	DTV SUDIO SITE MON. EQUIP DTV TRANSMISSION TEST EQUIP	10/28/03 10/28/03	8,580 25,276	0	0	
15	DTV CDEYE FOR WATCHDOG+	10/28/03	7,994	0	0	
16 17	DTV CHECKOUT/FREIGHT FIBEROPTIC CABLE/WIRING	10/28/03 9/17/03	19,512 9,384	0	0	
18	DTV GENERATOR	10/31/04	24,141	0	0	
19	DTV TRANS & MC UPGRADE	6/30/05	862,200	0	0	
20 21	PRO TRACK SYSTEM DECODERS AND MODULATORS	5/05/05 3/17/05	47,015 25,004	$0 \\ 0$	0	
22	PWR SUPPLIES DIST AMPS	3/17/05	10,690	0	0	
23 24	COMBO MASTER SYNC GENERATOR ROUTER INPUT/OUTPUT CON.	3/17/05 3/17/05	14,239 22,160	0	0	
25	DTV - SERVER	4/19/05	130,742	0	0	
26 27	VTR'S, RACK MOUNTS LCD VIDEO MONITORS	4/18/05 4/11/05	70,815 6,885	0	0	
28	COMPUTER - ENGINEERING	4/01/05	1,115	0	0	
29	UPGRADE TO MIP 41010	11/30/05	2,800	0	0	
30 31	DOLBY DIGITAL RECORDER DTV LINES FOR JEA SYSTEM	3/13/06 4/01/06	4,635 4,570	0	0	
32	GA LINK INTERFACE CONVERTER	2/14/06	4,410	0	0	
33 34	TRANSMITTER & TOWER TRANSMITTER BUILDING	4/01/84 3/02/90	828,071 26,350	0	0	
35	MICROWAVE ANTENNA	8/15/91	27,669	0	0	
38	TOWER - ATWOOD	6/30/96	42,002	0	0	
39 41	TOWER - ATWOOD 2005 DODGE GRAND CARAVAN	7/25/96 10/07/04	29,451 17,311	0	0	
62	MICROPHONES	10/03/00	2,706	0	0	
64 68	RTL PROJECTOR DELL COMPUTER (DARRELL)	9/28/01 6/30/04	3,473 1,413	0	0	
69	PANASONIC DVD CAMERA	6/30/04	19,206	0	0	
72	SONY BVP TRIAX CAMERAS	11/21/05	10,114	0	0	
73 75	BETA SP VTR OFFICE FURNITURE	1/18/06 2/28/94	3,902 12,917	0	0	
76	DESK	10/31/95	1,199	0	0	
77 78	2 R-PANEL DISPLAYS FILE CABINET	10/31/95 10/31/95	608 1,199	0	0	
85	TOSHIBA COPIER	6/30/03	4,684	0	ő	
90 91	LEASEHOLD IMPROVEMENTS DESK	7/01/91 4/30/94	18,560 425	0	$0 \\ 0$	
93	DTV Production Truck	5/31/07	67,566	0	0	
94	2 DP571 Dolby Encoders	5/21/07	11,200	0	0	
95 96	5 DP572 Dolby Encoders HD Remote Unit	5/21/07 5/17/07	20,500 212,093	0	$0 \\ 0$	
97	Microphones	12/14/06	17,141	0	0	
98 99	HOT SPARES Disk Drive Inlet Aire Dampers w/exhaust fan	3/02/07 10/18/06	1,484 4,300	0	0	
100	Color Viewfinder & 6 rack mounts	4/17/07	7,636	0	0	
101	2 HD Electronic Viewfinders	4/18/07	4,641	0	0	
102 103	XDCAM HD Deck HD60P Integrated Triax Portable Camera	4/25/07 4/26/07	86,547 45,000	$0 \\ 0$	$0 \\ 0$	
104	4 HD Camera Control Units	4/26/07	63,840	0	0	
105 106	CCU Side Triax Adapter Multi Format Switcher Processor	4/26/07 4/26/07	21,600 88,493	0	0	
107	3 Color Viewfinders	4/27/07	15,732	0	0	
108	2 Fujinon Lens	4/27/07	47,637	0	0	
109 110	2 Fujinon 2/3 Focus Lens 4 Lens Control Kit	5/01/07 4/27/07	66,732 11,676	$0 \\ 0$	$0 \\ 0$	
111	Master Setup Unit	5/01/07	7,280	0	0	
112	Netgear FS516 Router	5/07/07	507	0	0	

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		Data In				
Asset	Description	Date In Service	Cost	Tax	AMT	
113	10 Meter Fiber Cable	5/08/07	3,749	0	0	
114	2HD 60P Integrated Portable Triax Cameras	5/21/07	90,048	0	0	
115 116	HD 60P Integrated Triax Portable Camera 4 VINTEN 2-Stage Tripods	5/29/07 5/11/07	45,000 60,240	$0 \\ 0$	0	
117	DOREMI Video Server/Storage Unit	5/04/07	74,550	ő	ő	
118	Inscriber G3 HD.SD live to air graphics syste	5/04/07	29,160	0	0	
119	Dell Laptop - Monica	4/06/07	1,262	0	0	
121	Scaffolding	10/18/07	1,678	0	0	
124 125	Optiplex 755 Minitower SENN Supercrd RF Audio Equip	3/18/08 12/06/07	1,240 2,073	0	0	
126	XD Cam HD Camcorder	11/06/07	34,101	1,137	ő	
127	Battery Charger	12/13/07	1,097	0	0	
128	Avid Dual Boot Link System	10/25/07	127,994	4,266	0	
129	Yamaha Audio Production Console	8/23/07	23,986	400	0	
130 131	Open Gear 2RU Cooling Fan 2 HD Monitors and Accessories	11/08/07 8/27/07	2,143 15,772	$0 \\ 0$	0	
132	Open Transformer Contact Switch	7/16/07	3,619	0	0	
133	HD Electrotrack	7/23/07	7,412	ŏ	ő	
134	2 Multi-Channel Monitoring System	7/17/07	7,576	0	0	
135	Optiplex 755 Computer	11/18/08	1,458	0	0	
136	Sony XD Cam 50Gb deck	4/08/09	12,522	0	0	
137 138	Sony XDCam 50Gb deck Thin Profile coax Brown	4/16/09 12/03/08	12,522 130	$0 \\ 0$	0	
138	Thin Profile coax Brown Thin Profile coax Red	12/03/08	130	0	0	
140	Thin Profile coax Violet	12/03/08	130	ő	ő	
141	Thin Profile coax Green	12/03/08	130	0	0	
142	Thin Profile coax Black	12/03/08	130	0	0	
143	Single Patchfield	12/03/08 12/03/08	993 3,035	$0 \\ 0$	0	
144 145	Triple Patchfield Test Equipment	6/18/09	3,789	0	0	
146	Analog Video Distributor Amplifier	1/06/09	198	ő	Ö	
147	Analog Video Distributor Amplifier	1/06/09	198	Ö	Ö	
148	Analog Video Distributor Amplifier	1/06/09	198	0	0	
149	Up Converter	1/06/09	3,815	0	0	
150 153	Audio Monitor HD-HDMI Converter	12/15/08 1/05/09	8,888 437	$0 \\ 0$	0	
154	HD-HDMI Converter	1/05/09	437	0	0	
155	Dolby E Encoder	11/14/08	5,480	ő	Ö	
156	Dolby E Encoder	11/14/08	5,480	0	0	
157	Dolby Decoder	11/14/08	4,475	0	0	
158	HD-SDI Media Port	2/10/09	24,343	$0 \\ 0$	0	
159 161	300 Gb HDD Dolby Decoder	2/10/09 11/14/08	33,900 4,475	0	0	
163	LCD Monitor	11/14/08	253	ő	ő	
164	Sliding Shelf	1/16/09	159	0	0	
165	NV5128 Multi-Format Router	12/03/08	58,995	0	0	
166	HD/SD Sync Generator	7/17/08	368	0	0	
168 169	DCA15 SPX Generator 17" LCD Monitor	1/21/09 3/18/09	13,407 170	0	0	
170	Omneon Video File Server	3/26/09	1,700	0	0	
171	Diamond PA Repair	7/22/08	1,705	0	0	
172	Quartz Light Kit M31500	5/18/09	495	0	0	
173	Quartz Light Kit M31500	5/18/09	467 674	0	0	
174 175	Quartz Light Kit M31100 Audio-Video Connector	5/18/09 12/03/08	674 1,359	0	0	
175	Analog Video Distributor Amplifier	1/16/09	291	0	0	
177	Auto Equalizing Distribution Amplifier	1/16/09	311	ő	ő	
178	Power Supply - 00FR-C frame	1/16/09	593	0	0	
179	Standard Definition Encoder	4/06/09	11,812	0	0	
180 181	Multi-Format Receiver RX1290 AAC Audio License Key	4/06/09 4/06/09	3,689 614	$0 \\ 0$	0	
182	Pro-MPEG Input Card	4/06/09	958	0	0	
183	Clarus Noise Reduction	4/06/09	1,607	ő	ő	
184	Clarus Input Deblocking Filter	4/06/09	1,607	0	0	
185	Transport Stream 0Video Server	4/06/09	1,607	0	0	
186	HD-SDI Modular Receiver Decoder	4/06/09	713	0	0	
187 188	HD-SDI Modular Receiver Decoder HVAC System	4/06/09 10/09/09	713 35,000	0 3,500	0	
190	2 Televisions	2/16/10	55,000 696	5,500 0	0	
191	Sony PDW-F75 Professional Disc Recorer	12/06/10	13,147	782	ő	
193	2008 Nissan Frontier	11/14/08	21,200	0	0	

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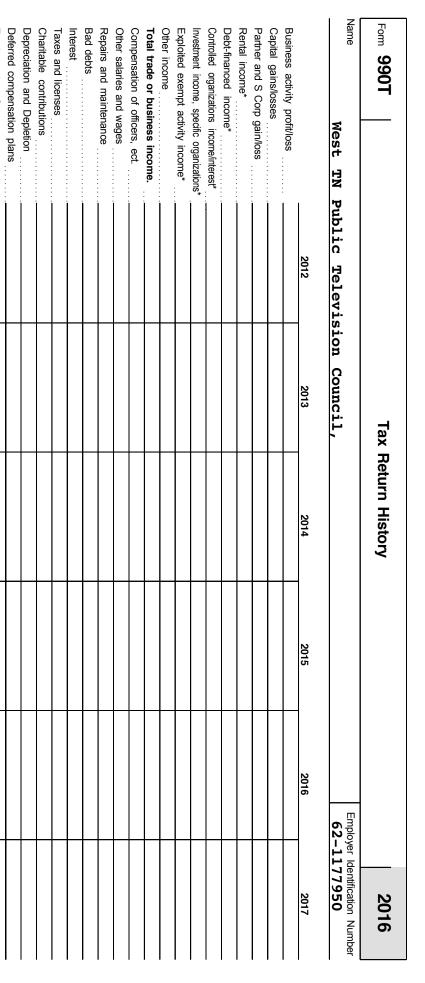
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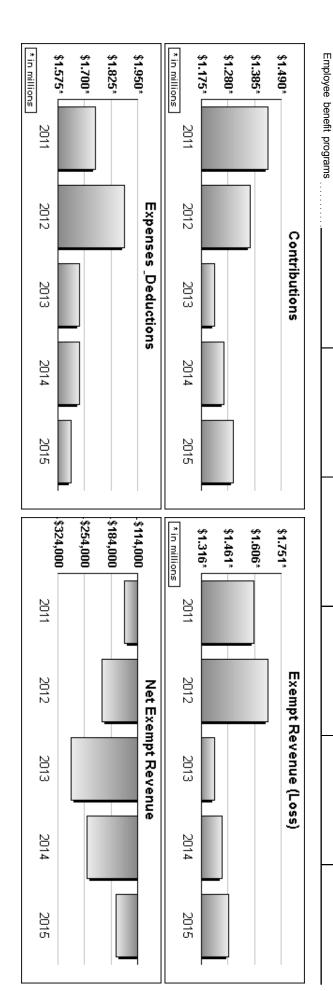
		Date In			
Asset	Description	Service	Cost	Tax	AMT
194	Donated WARN Equipment Package	4/25/12	29,409	2.941	0
195	Repair on DNWA75 VTR	3/23/12	9,213	1,316	0
196	7 Computers	12/18/13	4,574	915	0
197	Antenna & Related Hardware - RUS Grant	12/01/13	333,675	22,245	0
198	Transmission Line and Hardware - RUS Grant	12/01/13	79,850	5,324	0
199	Tower Reinforcement - RUS Grant	12/01/13	106,044	7,069	0
200	LED Tower Light System - RUS Grant	12/01/13	16,456	1,097	0
201	Equipment, Tuning, Guy Wire Install - RUS Gr	12/01/13	196,575	13,105	0
202	Engineering Study - RUS Grant	12/01/13	25,800	1,720	0
203	Tower Painting	12/01/13	15,000	1,500	0
204	2015 Dodge Journey Hatchback	3/23/15	19,595	3,919	0
205	PowerEdge T420 Server	9/12/14	3,223	460	0
206	Caption Maker	10/18/14	5,750	822	0
207	Inscriber G8 - Dual Channel	10/24/14	36,858	5,266	0
208	Promise Pegasus2 Thunderbolt 2 RAIN System	5/05/15	4,139	591	0
209	Mac Pro Server	5/05/15	9,523	1,360	0
210	PSIP Generator	5/11/15	8,577	1,225	0
211	Device Server Computer & HDD	5/23/15	13,943	2,788	0
212	Automation Software	6/01/15	6,800	1,360	0
213 214	24" High Grade 3D LCD Monitor	6/03/15	6,841	977 537	$0 \\ 0$
214	PowerEdge T430 Server	6/12/15 6/18/15	3,762 6,120	874	0
213	Selenio Frame, Power Supply		,	951	0
	Encoder card	6/18/15	6,660		0
217 218	Encoder card Encoder card	6/18/15 6/18/15	6,660 6,660	951 951	0
219	Encoder Software HD	6/18/15	7,200	1.440	0
220	Encoder Software SD	6/18/15	4,320	864	0
220	Encoder Mux Software	6/18/15	2.880	576	0
222	Encoder Transport Stream SW	6/18/15	2,880	411	0
223	Promedia Rhozet Software	6/25/15	5.096	1.020	ő
224	Transmitter Power Supply Module	4/11/15	4,598	657	0
225	USB 3.0 XDCam Disc Drive	9/06/14	2,712	387	ő
226	DELL POWER EDGE T430 SERVER	7/02/15	3.762	752	ő
227	SURCODE FOR DOLBY E MASTER SUITE	7/11/15	3,495	699	ő
228	SONNET RACK	7/11/15	3,423	685	Ö
229	5.1 MULTI CHANNEL MONITORING SYSTE	7/30/15	3,401	680	Ö
230	ENCODER & AUTOMATION SYSTEM	8/01/15	13.050	2.610	0
231	PART 10F3: MD 5 HARD DRIVE	2/12/16	9,793	1,958	0
232	PART 2OF3: RX30	2/12/16	11.539	2,308	0
233	PART 3OF3: MD 12 HARD DRIVE	3/12/16	15,320	3,064	0
234	TELEPHONE SYSTEM	12/08/15	6,775	1,355	0
235	TRANSPORT STREAM CONVERTER	3/25/16	5,031	1,006	0
236	MASTER CLOCK SYSTEM	12/02/16	11,241	2,249	0
237	FCC REPACK	6/20/17	5,500	0	0
	<b>Total Other Depreciation</b>		5,466,269	113,070	0
	Total ACRS and Other Depreciation		5,466,269	113,070	0
	Grand Totals		5,466,269	113,070	0

**Two Year Comparison Report** 2015 & 2016 Form **990** 07/01/16 For calendar year 2016, or tax year beginning 06/30/17

Nar <b>V</b>	est TN Public Television Council,			Taxpayer   62-11	dentification Number
	,		2015	2016	Differences
	1. Contributions, gifts, grants	1.	96,394	88,981	-7,413
	2. Membership dues and assessments	2.	·	•	•
	3. Government contributions and grants	3.	1,167,432	1,210,443	43,011
n e	4. Program service revenue	4.	159,175	159,192	17
_	5. Investment income	5.	1,854	2,940	1,086
>	6. Proceeds from tax exempt bonds	6.			
æ	7. Net gain or (loss) from sale of assets other than inventory	7.			
_	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11.	3,568	4,511	943
	12. Total revenue. Add lines 1 through 11	12.	1,428,423	1,466,067	37,644
	13. Grants and similar amounts paid	13.			•
	14. Benefits paid to or for members	14.			
Ø	<b>15.</b> Compensation of officers, directors, trustees, etc.	15.			
S	<b>16.</b> Salaries, other compensation, and employee benefits	16.	729,419	712,361	-17,058
e	17. Professional fundraising fees	17.			-
۲ ص	18. Other professional fees	18.	10,802	10,803	
	19. Occupancy, rent, utilities, and maintenance	19.	55,768	58,513	2,745
	20. Depreciation and Depletion	20.	137,632	126,107	-11,525
	21. Other expenses	21.	741,959	730,181	-11,778
	22. Total expenses. Add lines 13 through 21	22.	1,675,580	1,637,965	-37,615
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	-247,157	-171,898	75,259
	24. Total exempt revenue	24.	1,428,423	1,466,067	37,644
	25. Total unrelated revenue	25.			
o	26. Total excludable revenue	26.	164,597	166,643	2,046
nati	27. Total assets	27.	1,726,828	1,548,906	-177,922
5	28. Total liabilities	28.	684,926	678,899	-6,027
<u>=</u>	29. Retained earnings	29.	1,041,902	870,007	-171,895
ne	<b>30.</b> Number of voting members of governing body	30.	15	12	
5	31. Number of independent voting members of governing body	31.	15	12	
	32. Number of employees	32.	45	45	
	33. Number of volunteers	33.			

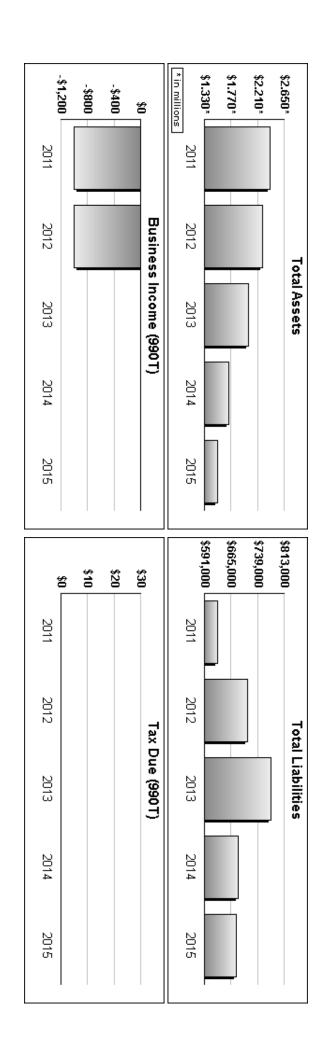
Form <b>990</b>		Тах Я	Tax Return History			2016
Name West IN P	Public Television	on Council,			Employer   <b>62–11</b>	Employer Identification Number <b>62–1177950</b>
Contributions, giffs, grants	2012 1,436,656	2013 1,369,206	2014 1,227,515	2015 1,263,826	2016 1,299,424	2017
Membership dues Program service revenue	138,904	292,407	133,202	159,175	159,192	
Capital gain or loss	•		2,020			
Investment income	2,977	3,531	3,550	1,854	2,940	
Gaming revenue (income/loss)						
Other revenue	24,263	12,783	22,428	3	4,511	
Grants and similar amounts paid	1 000	1011	1,000,110	1,110,110	1,100,001	
Benefits paid to or for members						
Compensation of officers, etc.	700 767	47C OCE	207 722	700 /10	710 061	
Professional fees	0,0,200	19,928	7,849	10,802	10,803	
Occupancy costs	53,900	52,630	53,470	55,768	58,513	
Depreciation and depletion	361,343	336,508	209,835	137,632	126,107	
Other expenses	660,873	757,698	711,204	741,959	730,181	
Total expenses  Excess or (Deficit)	1,752,322 -149,522	1,887,029 -209,102	1,678,091 -289,376	1,675,580 -247,157	1,637,965 -171,898	
Total exempt revenue	1,602,800	1,677,927	1,388,715	1,428,423	1,466,067	
Total unrelated revenue	1 - 602 - 800	308 - 721	161,200	164 597	166-643	
Total Assets	2,415,903	2,290,790	2,065,289	1,726,828	1,548,906	
Total Liabilities	628,366	712,355	776,230	684,926	678,899	
Net Fund Balances	1,787,537	1,578,435	1,289,059	1,041,902	870,007	





Form <b>990T</b>		Tax Re	Tax Return History			2016
Name West IN P	West IN Public Television Council,	on Council,			Empl	Employer Identification Number 62-1177950
	2012	2013	2014	2015	2016	2017
Other deductions						
Net operating loss deduction						
Specific deduction	1,000	1,000				
Income after expense and deductions	-1,000	-1,000				
Income tax (corporate or trust)						
Other taxes						
Total taxes						
General business credit						
Other credits						
Net tax after credits						
Estimated tax payments						
Other payments						

<sup>\*</sup> Income shown net of expenses



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### **Taxable Interest on Investments**

Descripti	on					
Interest Income	_	Amount	Unrelated Business Co	Postal . Code	Acquired after 6/30/75	US Obs (\$ or %)
	\$_	2,940				
Total	\$	2,940				

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5,773 369 10,607 208 825 5,011 41 3 23,351	19,700 948 4,344 1,074 5,470 7,908 1,051 2,601 1,514 4,500 969 3,381 2,668 2,118 1,362 1,142 667 431	11,006 16,771 7,942 8,795 3,791 928 6,387 3,828 156 2,421 126 646 646 230 184 \$ 85,438	19,700 17,727 16,771 12,655 10,607 9,869 9,261 8,836 7,646 7,254 6,681 4,500 3,381 2,118 2,049 1,142 6667 600 431 230 184	Legislative lobbying Software Contracts Interconnect Parts and Supplies Premiums Repairs & Maintenance Telephone Special Events Vehicle Expenses Printing Postage Website Equipment - Operating Credit Card Charges Miscellaneous Expenses Equipment - Replacement Shipping TPTC Board Expenses Educational Books/Media Apparel Costume Rental/Actors Tape Stock Total
\$	ı l'	\$ 21,627	27	t — INT
Fund Raising	Management & General	All Other Expense Program Service	Form 990, Part IX, Line 24e - All Other Expenses  Total Expenses Service	Form 9

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

# Schedule A, Part II, Line 12 - Current year

Total	Miscellaneous Income	Membership Dues	TN Channel Income	Special Event Income	Production Income	Education and Community Eng	Description
\$						₩.	
\$ 166,643	4,511	85 <b>,</b> 717	33,333	13,867	22,265	4,010	Amount