Form 990

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

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

OMB No. 1545-0047

De	epartment of	f the Treasury nue Service	(e:	xcept black lung benefit	trust or nav	ate foundat	ian)	,			
Ā			rting requirem	irements.							
B	Check if	applicable: C	year, or tax year beg	inning	, 2012	2, and endl	ng	<u>-</u>			
_	- 10 pit 11	Į.	D Employer	, Identification Number							
		ne change OF	WINESSEE ASSOC	IATION FOR THE E	EDUCATIO	N			37075		
		reciange Or	YOUNG CHILDR BOX 120096	EN, INC.			ľ	E Telephone	one number		
	<u></u>	(MA	SHVILLE, TN 3	7212			1				
			CILLIDID' IM D	1212			ŀ	015-2	79-0111		
		ended return						٥.			
	Appl	lication pending F I	Name and address of princip	oal officer: RHONDA LA	TRD		Man le this a	G Gross recei group return fo	pts \$ 361,987.		
_		SAI	ME AS C ABOVE		TIVD		HAD) Assets	group return to	rattitiales? Yes X No		
1	Tax-ex	empt status X s	01(c)(3) 501(c) () ◄ (insert no.)	4047/43/13	1 100	if 'No,' a	ffiliates include ttach a list. (se	d? Yes No		
J	Webs		AEYC.ORG	/ (mout no.)	4947(a)(1) o	327					
K	Form o		Corporation Trust	Association Other►			H(c) Group ex	emption number	er 🟲		
15	S H I MEE	Summon	·····			Year of Format	ion: 1954	M State	of legal domicile: TN		
	1 B	riefly describe th	e organization's mis-	sion or most significant a	. 47. 17.	······································					
4	, F	PROFESSIONA	I. DEVELOPMENT	OPPORTUNITIES DUCATION OF TEN	ctivities: T	AEYC_EX	ISTS TO	PROVID	E MEMBERS WITH		
2		ARE. DEVEL	UDWENL YND E っていたいかんもかをがた	"OFFORTONT TITES T	AND TO A	DVOCATE	FOR B	ST PRAC	TICE IN THE		
Ë	-					_ TANKO _	CUT PINK	N.			
Activities & Governance	2 G	heck this box >	if the organization				· 				
Õ	3 N	umber of voting	members of the gove	erning body (Part VI, line	tions or disp	osed of mo	re than 25°	% of its net	assets.		
90	4 N	umber of indeper	ndent voting member	re of the governing had	a)	********		3	42		
<u>.</u>	5 To	otal number of in	dividuals employed i	n calendar year 2012 (Pa	utV fina 2a	\$ 10) \	********	····. <u> </u>	42		
. <u>₽</u>	6 To	otal number of vo	olunteers (estimate if	necessary)	nt v, mi¢ ∠a)	********	5	1		
ĕ	7a To	otal unrelated bu	siness revenue from	Part VIII, column (C), line	e 12			6			
	b Ne	et unrelated busi	ness taxable income	from Form 990-T, line 34	1	* . * *	. ø	7			
						•			<u> </u>		
ঞ	8 Cc	ontributions and	grants (Part VIII, line	: 1h)			No.	or Year	Current Year		
Revenue	3 1.1	ogram service re	evenue (Part VIII, tine	s 2a)				46,675			
ě	יחו טון	vestment income	: (Part VIII. column 7	A) lines 3 / and 7 det 4			 	189,272			
щ.	111 0	ner revenue (Pai	rt VIII oolumaa (A) E.	C C I O O O O O O O O O O O O O O O O O	L16)		 	440			
	12 10	nai revenue — ac	ia lines & through 11	(must edicate ar a sum Ro	duma (A) Tie	ne 12).	-	$\frac{7,423}{243,810}$	· · · · · · · · · · · · · · · · · · ·		
		anto onto ottenion	antourus Daio (Parti	LARGE (EGALLING) OF SERVE LIDA A 2 ON			 				
	14 00	menra han to ot	for members (Parte)	X. column (A) line (I)				16,278	1,578.		
Ø		derico, outer con	then setton, embloxed	e penetits (Part IX, colum	m (A) linea	E 101	ļ	04 04=			
Expenses	16a Pro	ofessional fundra	ising fees (Part IX, o	column (A), line 11e)	(1); 111103	0-10/	<u> </u>	21,297	22,450.		
pe	b To	tal fundraisino e	kpenses (Part IX, col					William West			
<u> </u>	17 Oil	her eynenses (P:	art IV column (A) to	uniti (D), little 25)		<u>359.</u>					
i	18 To	ial expenses Ad	d lines 12 17 (mark)	nes 11a-11d, 11f-24e)	• • • • • • • • • • • • • • • • • • • •	•••••		241,906.	353,757.		
	19 Re	venue less avna	nees Subtract line to	equal Part IX, column (A)	. line 25)			279,481.			
8 0		Total Toos Oxper	ises. Subtract lifte 1	8 from line 12				-35,671.			
								f Current Year			
冬	21 Tot	lal liabilities (Par	t X line 26)					81,027			
3,5	22 Nat	الدينية مامومو ا			• • • • • • • • • • •			46,998.	6,248.		
-		Cassets of Tung I	balances. Subtract lin	ne 21 from line 20	<u></u>		5	34,029.			
25	EEDER :	Signature Blo	ck						228,995.		
omp	r penames c lete. Declari	of perjury, I declare the ation of preparer (othe	of I have examined this retuing that of the control	m, including accompanying sched all information of which preparer h	ules and statem	ents, and to the	best of my kr	owledge and by	aliaf it is top a		
		<u> </u>		an according to Willers preparer is	as any knowled	je.		omeogo and o	oner, it is due, correct, and		
ig	n	Signature of office	OE1					<u> </u>			
ler		RHONDA	TATON				Date		· · · · · · · · · · · · · · · · · · ·		
		Type or print nad	me and title.				PRESIDI	TNE			
	······································	Print/Type preparer's		Preparer's signature							
ai	ч	SARA G. MO		Perior a signature	[Date	Che	ick X if	PTIN		
	u parer			C HOLINES		···	self	-employed	P00034774		
lse	Only			& HOWARD, PLLC							
-	,	- mm a entrices	3310 WEST END		0		Firm	rs EIN ► 62	!-1073578		
av	the IRS	discuss this estimate	NASHVILLE, TN	37203	···		Pho	пе по. (61			
ÃΑ	For Par	nenvork Dade-4!	n will the preparer s	shown above? (see instru	ctions)				. X Yes No		
. ,,,	1 H	TOIA REGUEUI	on ACL NOTICE, see th	e separate Instructions.		TEEAO	1131. 12/18/1	2	Form 990 (2012)		
									\/		

Statement of Program	SOCIATION FOR THE EDUCATION 11 Service Accomplishments	23-7037075 Page 2
1 Priofit described to Conta	ains a response to any question in this Part III	
briefly describe the organization's	s mission:	
TAEYU EXISTS TO PROVI	IDE MEMBERS WITH PROFESSIONAL DEVELOPM	ENT OPPORTINITATES AND TO
~	ACTICE IN THE CARE, DEVELOPMENT, AND EN	DICATION OF TENNESCEDIO
YOUNG CHILDREN.		POCHTION OF TEMMESSEE 2
A Didd		
2 Did the organization undertake any s	significant program services during the year which were not listed	on the prior
1 01111 000 01 000 LZ:	*******************	
ii rasi nescrina rileza DaM SalAiC	Ces on Schedule ∩	
3 Did the organization cease conduction	cting, or make significant changes in how it conducts, any pr	ogram sandons?
ii ica, doscribe trese trialiges o	AN SCHEGUIE ().	
4 Describe the organization's progra Section 501(c)(3) and 501(c)(4) orga others, the total expenses, and re	am service accomplishments for each of its three largest pro- anizations and section 4947(a)(1) trusts are required to report the evenue, if any, for each program service reported.	gram services, as measured by expenses. amount of grants and allocations to
4a (Code:) (Expenses \$	305, 183. including grants of \$ 1.5	78.)(Revenue \$ 240.984)
ANNUAL CONFERENCE - T	O PROVIDE TTS MEMBERS WITH PROPERCE ONE	7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
OLI ONIONILLES AND TO	ADVOCATE FOR REST PRACTICE IN THE CARE	DELIGAT ADVISOR TO THE TOTAL THE TOTAL TO TH
TO A ATTACK OF TORRESPOR	AS A TUTURE LIMITATION OF THE CANADITAT COMPE	DDNA 70 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
CONFERENCE AND WAS AT	TENDED BY OVER 800 EARLY CHILDHOOD PRO	SKENCE IS A 3 DAY
EACH PARTICIPANT WAS	GIVEN THE OPPORTUNITY TO ATTEND VARIOU	FESSIONALS THIS PAST YEAR.
DEALING WITH ALL ASPE	CTS OF CUTID DEVELOPMENT TO ATTEND VARIOUS	S_WORKSHOPS/SEMINARS
Taracto arta and vot P	CTS OF CHILD DEVELOPMENT AND EDUCATION	OVER THE 3 DAY SEMINAR.
ADDITIONAL ACTIVITIES AWARENESS EVENTS THAT	INCLUDED: "DAYS ON THE HILL", BUSINES PROMOTE PRE-K EFFORTS IN TENNESSEE.	S LEADER SUMMIT, AND OTHER
4b (Code:) (Expenses \$	including grapts of \$) (Revenue \$
		*
		**==*
		
	~ 	
4c (Code:) (Expenses \$		
(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4 d Other program services. (Describe	in Schedule O.)	
(Expenses \$	including grants of \$) (Reve	2 auno
4e Total program service expenses)
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Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A..... Yes No Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?...... 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 L.... Х 2 Х Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III. 4 X 5 X 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, 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........ 6 X 7 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III. 8 Х Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV. Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V...... 9 Х If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, X 10 a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule b Did the organization report an amount for investments – other securities in Part X, line 1 assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII. 11 a Х or make of its total c 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 Differt val. 11b X d Did the organization report an amount for other assets in Part X, line 16? If 'Yes,' complete Schedule D, Part X.

e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. 11c X 11 d X 11 e X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X... 11 f X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII. X b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional....... 128 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E...... 12b Х 14a Did the organization maintain an office, employees, or agents outside of the United States?..... 13 X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV..... X 142 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV..... 14b X 15 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV..... 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)..... 16 Х 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II. 18 Х Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.... 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H..... 19 X b if 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20 X

Partity Checklist of Required Schedules (continued)

24	Did the assessment of the same		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 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	22		_ ^
24:		23		X
	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25.	24a		x
ı	o Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	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		
	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		-
	a Section 501(c)(3) and 501(c)(4) 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		Х
l	ols 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		Х
26	Was a loan to or by a current or former officer director, truston leave amplicate highest	250		
^=	disquarried person odistanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L. Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (as Ostantal D. 2015)			
	instructions for applicable filling thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule 1. Part IV.			
•	A family member of a current or former officer, director, trustee, or key employee? If Yes, complete	28a		<u> X</u>
	Schedule L, Part IV	28b		X
ď	An entity of which a current or former officer, director, trustee, or key and lovee (or tamily member thereof) was an officer, director, trustee, or direct or indirect owner? If Yes, complete Shedule L, Part IV.			
29	Did the organization receive more than \$25,000 introduces through relations? If 'Yes,' complete Schedule M	28c 29		X
30	Did the organization receive contributions of archisorical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedulard.			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I.	30 31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		X
33	Did the organization own 100% of an entity disconarded as contrate from the experiential and a Dec. 1.1	32		Α.
	301.7701-2 and 301.7701-3? If Yes, complete Schedule R, Part I	33		X
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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		
	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		х
	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, Part VI	37		Х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
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Form 990 (2012) TENNESSEE ASSOCIATION FOR THE EDUCATION Party: Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Book.

	Greek in Schedule O contains a response to any question in this Part V			
1 :	Foler the number reported in Pau 2 of Farm 1995 Fig.	****	Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	C Did the granization comply with back with the			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
2;	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a			
- 1	of it at least one is reported on line 2a, did the organization file all required federal employment tay returned	2 b	X	
	Note, if the sum of lines 1a and 2a is greater than 250, you may be required to a file (one instructions)			Hereine Hereine
38	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
	The series it filed a Form 990-1 for this year? If 'No,' provide an explanation in Schedule O	3b		
42	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account?	4 a		Х
F	of the frame of the foreign country; ►			
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5 a	t was the organization a party to a prohibited tax shelter transaction at any time during the tay year?	5 a		X
t	Dud any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
(the rest, to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	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		Х
ŧ	of 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).	D D	HEAT CO	a para ser
	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?			
Ł	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7a		X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for this hat as required to file	7b		
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	7c	112323024	X
e	Did the organization receive any funds, directly or indirectly to payareraiums to a personal banefit contract?			
,	Did the digalization, during the year, bay premings without interpretation on a parental banefit contracts	7e		X
Q	If the organization received a contribution of casi field intellectual property, did the organization file Form 8899			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7g 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
9	Sponsoring organizations maintaining donor advised funds.	8	Heres .	
a	Did the organization make any taxable distributions under section 4966?			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12		Шij,	
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
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	-4miles 5	ur ramentelf.
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
15	Section 501(c)(29) qualified nonprofit health insurance issuers.			齫
d	Is the organization licensed to issue qualified health plans in more than one state?	13a		
h	Note. See the instructions for additional information the organization must report on Schedule O.			
D.	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			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.	14b	_	
BΑΑ	TEEA010SL 08/08/12	Form	aan /	2012)

2.00	GOVERNMENT GOVERNMENT AND DISCISSURE For each 'Yes' response to lines 2 through the control of t			rage
	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or cl	nd for		
	Check if Schedule O contains a second of the Contains and the Contains and the Contains a second of the Contains a second	nanges	in	
Š	Check if Schedule O contains a response to any question in this Part VI			X
_	A CONTINUE DOUG AND Management			
	3 a Enter the number of voting members of the annual of th		Yes	No
	1 a Enter the number of voting members of the governing body at the end of the tax year 1 a	42	前線銀行	TO THE STATE OF
	of the governing body, or if the governing body delegated broad			
	If there are material differences in voting rights among members of the tax year			
	and the manual of voting members included in line 1a shove who are independent	42		
	officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	of officers, directors or trustees, or key employees to a management duties customarily performed by or under the direct supervision	. 2		X
•	since the prior Form 990 was filed? SFE SCU O		╂—	X
:	5 Did the organization become aware during the year of a significant discretion of the second second aware during the year of a significant discretion of the second secon	. 4	X	ŀ
			X	Х
•	members of the governing body? . SEE SCHEDULE 0		<u> </u>	
	b Are any governance decisions of the organization reserved to (or subject to appear to the control of the organization reserved to (or subject to appear to appear to appear to appear to (or subject to appear t	<u>7a</u>	X	<u> </u>
8	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? Did the organization contemporaneously document the part of the product	.0 7b	х	
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by			
	a The governing body? b Each committee with authority to act on behalf of the			
		. 8a	X	<u> </u>
-	organization's mailing address? If 'Yes' provide the page 1914 VII, Section A, who cannot be reached at the			
<u>Se</u>	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	. 9		X
	Revenue	≥ Code.)	
10	a Did the organization have local chapters, branches, or affiliates?		Yes	No
	b If 'Yes,' did the organization have written policies and procedures inversionable accurate of the state of	10 a	X	
11	b If 'Yes,' did the organization have written policies and procedures government activities of such chapters, affiliates, and branches to ensure their a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of this Former's a Has the organization provided a complete copy of the organization provided a copy of the organization p	102	v	
	a Has the organization provided a complete copy of this Formago to alternative sor its governing body before filling the form?	. 10b	X X	
12	b Describe in Schedule O the process, if all the best of the organization to review this Form 990. SEE SCHEDULE O a Did the organization have a written conflict of interest policy? If 'No,' no to line 13	· IIa	A	
14	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13.	124	X	
	to conflicts?to shape to disclose annually interests that could give rise		X	
	Schedule O how this is done SE. SCHEDULE and enforce compliance with the policy? If 'Yes,' describe in	. 12b		
13	Did the organization have a written whistleblower policy?	. 12c	Х	
14			X	
15	persons, comparability data, and contemporaneous departments on include a review and approval by independent	. 14	X	
i				
ı				Х
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)	15b		Χ
16	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
ŀ	of Yes, did the organization follow a written policy or procedure requiring the organization to evaluate its	16 a		X
ec	tion C. Disclosure	16b	mandi M	erreit.
17	List the states with which a copy of this Form 000 :			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a converse of the section of the sect	 		
			ioi pt	IUIC
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.	lable to		
20	State the name, physical address, and telephone number of the person who person that			
•	LISA ROBERTSON 5809 FREDERICKSBURG DRIVE NASHVILLE TN 37215 615-665-8808			
AA	TEEA01081, 08/08/12	Form 9		<u></u>

Form 990 (2012) TENNESSEE ASSOCIATION FOR THE EDUCATION	23-7037075	Page 7
Partivis Compensation of Officers, Directors, Trustees, Key Employees, Higher Independent Contractors	st Compensated Employe	Page 7
Check if Schedule O contains a response to any question in this Part VIII		-
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compens	ated Employees	<u> </u>

- 1 a 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.

1.0				(0	;)	a distortion and distortion				
Name and Title	(B) Average hours per week (list	one bo	on (de ox, un cer an	iless d id a di	checl perso irecto	c more n is bot er/truste	than Ih an e)	(E) Reportable compensation from		
	any hours for related organiza- lions below dolled line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2)1099-MISC)	compensation from the organization and related organizations
(1) MARY ANN NELSON	2								#	
DIRECTOR	0	X					L		0.	0.
(2) CORYE NELSON	3.5_									
TREASURER ELECT	0	X		Х				0.	0.	0.
_(3) JAN KING	2				1					
DIRECTOR	0	X			_]	10		0.	0.	0.
_(4) PAM SHARP) V						
DIRECTOR	100		-				ļ	0.	0.	0,
_(5)_SHAVETTE_SUMMERS	\$									
DIRECTOR	0	X	Ш				ļ	0.	0.	0.
(6) JO ANN FRISBEY	2				- 1					
DIRECTOR	0	X			_			0.	0.	0.
(7) CATHY WAGGONER	2								·	
DIRECTOR	0	X	\Box					0.	0.	0.
(8) DIANE NEIGHBORS	2				ı			·		
DIRECTOR	0	Х	\dashv				_	0.	0.	0.
_(9)_BEVERLY_WIGINTONDIRECTOR	2]					
(10) PHIL ACORD	0	X					_	0.	0.	0.
DIRECTOR	2	.,			ł					
(11) NELDA FULGHUM	- 2-	Х		-	}	 -		0.	0.	0.
VICE PRESIDENT	3.5									
(12) LINDA RICHEY		Х		X				0.	0.	0.
DIRECTOR	2	.,						_		
(13) CONNIE CASHA	0 2	X	\vdash	-	\dashv		<u> </u>	0.	0.	0.
DIRECTOR		ų,		-			:		_ 	
(14) KATARI COLEMAN	0 2	X	\dashv	-			\vdash	0.	0.	<u> </u>
DIRECTOR		ų,		İ						_
DIVECTOR	J U	Х		1			ldot	0.	0.	0,

Form 990 (2012) TENNESSEE ASSOCIATION FO	R THE	ED	UCA	TIO	N		23~703707!	5 Page 8
Part VIII Section A. Officers, Directors, Trus	tees,	Key	Em	ploy	ees, an	d Highest Con	pensated Emp	oyees (cont)
	(B)			(C)				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(A)	Average	(do	not ch	Positio eck mo	n ore than one	(D)	(E)	(F)
Name and title	hours per	offi	, unies cerano	S Derso	n is both an ctor/trustee)	ıl –	Reportable compensation from	Estimated
	week (list any hours for related organiza tions below dotted line)	2 3	ੜ੍ਹਾਂ			the organization (W-2/1099-MiSC)	related organizations (W-2/1099-MISC)	amount of other compensation
	for	G X	Institutional trustee	Officer	Former Highest co employee	(11-21033-MIGC)	(M-51099-WISC)	from the organization
	refated organiza	ફ ਛ	훓	^ 뒃	. 8 8			and related organizations
	below	1 2	ਡ	yee	₹			
	dotted line)	8	쯇	-	Former Highest compensated employee			
	ļ				비]		
(15) GARY SMITH	2		_	_	 			
DIRECTOR	0	x				0.	0.	^
(16) HEATHER GANN	2	 		_	 	V-	U.	0.
DIRECTOR	-5-	х	ı			0.	,	
(17) MINDY DAVIS	2		\top	+	1	<u> </u>	0.	0.
DIRECTOR	-5-	х	ı	- }		0.		•
(18) DONNA DOWNS	2	-	\vdash		++	U.	0.	<u> </u>
DIRECTOR	- 2-	х		-			ا م	
(19) CAROLE JOHNSON	2	^	-	- -		0.	0.	0.
DIRECTOR	- 2-	x						
(20) SALLY DRAPER	2_	<u> ^ </u>		+-		0.	0.	0.
DIRECTOR	-2-	х	- 1	-				
(21) TERRI MCAVOY	2				+	0.	0.	0.
DIRECTOR	- 2-	х		ı				
(22) MARTHA JACKSON	2	-		-	 	0.	0.	0.
DIRECTOR	-2-	х					_	
(23) RYAN LASUER	2	-			+	0#	0.	<u> </u>
DIRECTOR	- 6-	х				K CO	. 1	
(24) SANDY GUNTHARP	2	<u> </u>		+	700	0,8	0.	0.
DIRECTOR	- 2	х	_ 4				_	
(25) LISA WALSH	3 405	•	1	L 18		0.	0.	<u> </u>
SECRETARY				v l		0	_	
1 b Sub-total	1	327		<u>^ _ </u>	<u> </u>	0.	0.	<u> </u>
c Total from continuation sheets to Part VII Section	Δ.			••••	····· 🛌	0.	0.	0.
d Total (add lines 1b and 1c)	5			•		0.	0.	0.
2 Total number of individuals (including but not limited to	those li	etad :	ahovo) who	roophrad.	0,	0.	0.
from the organization > 0	(1030 1	siou e	TOOAE) WIO	1 CCGIAGO	more man \$100,000	n ot tebottable combi	ensation
3 Did the organization list and former still.								Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such i	or trusi Individus	lee, l	œy e	mploy	ee, or hi	ghest compensate	ed employee	
								3 X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t such individual	portable	e cor	npen:	sation	and other	er compensation f	rom	
such individual	· · · · · · ·		V: 11	, es	complete	e scriedule J for		4 X
5 Did any person listed on line 1a receive or accrue of	ompens	sation	ı fron	ກ ລກບ	unrelate	d Arganization or i	individual	
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' of Section 8.	complet	e Sc	hedu	le J k	or such pe	erson,		5 X
Section B. independent Contractors								
 Complete this table for your five highest compensat compensation from the organization. Report compensat 	ted inde	pend	lent o	ontra	ctors that	t received more th	an \$100,000 of	
/A\	.1011 101 1	K Co	icilue	ıı yeai	enung w			
(A) Name and business addres	s				- 1	(B) Description o	f services ((C) Compensation
						,		
						· · · · · · · · · · · · · · · · · · ·		
2 Total number of independent contractors (including but	not limit	ed to	those	iste:	d above) u	who received more	than indian	
\$100,000 in annual transfer the second	์ก	0			- 45010) 1	received more	o carl	
ВАА	<u> </u>	EEA01	08L 0	1/24/13	1	·	LEE BO	Form 990 (2012)

Form 990

Continuation Sheet for Form 990

OMB No. 1545-0047

2012

Oppartment of the Treasury Internal Revenue Service Name of the Organization

Name of the Organization

Employler Identification number

TENNESSEE ASSOCIATION FOR THE EDUCATION 23-7037075

Part VIII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A)	(B)	·		(C	<u> </u>			(D)	(E) T	/r\
Name and Title		Posi	tion (hat appi	lv):	· ·	(E)	(F)
	Average hours per week (list any hours for related organizations below dotted line)	Individual truster or director		employee Key employee Officer Institutional hustee		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1059-MISC)	Estimated amount of other compensation from the organization and related organizations
EMILY_NASCA									_	_
DIRECTOR	0	X		_			ļ	0.	0.	0.
ROSE CARVER	2	ļ ˈ								
DIRECTOR	0	X		-				0,	0.	0.
DEBBIE FERGUSON	3.5_	.,		,			1	_		•
PAST PRESIDENT	2	Х	\vdash	Х			 	0.	0.	0.
CANDYEE GOODE DIRECTOR		Х					l	О.	0	0
KELLY TIVEY	0 2		-	H		 		<u></u>	0.	0.
DIRECTOR	 2	X						o.	0.	0.
SARA LONGHINI	3.5	<u> </u>		H	 		-	, , , , , , , , , , , , , , , , , , ,		<u> </u>
TREASURER		X	1	х				0.	0.	0.
LISA MADDOX-VINSON	3.5	 :- -	-				_	, i	S. S.	<u></u>
SECA REP		t x		Х		İ	1		0.	0.
LIN VENABLE	3.5	 					1			
NAEYC REP		x		Х			•	0.	0.	0.
ELIZABETH JORDAN	3.5				-	1	J			**************************************
CHAIR-WEST	0 -	18		. X		1		0.	0.	0.
SHAE MIGA	- 0		-							
CHAIR-MIDDLE	10	X		X				0.	0.	0.
RHONDA LAIRD	3.5				<u> </u>		Г			
PRESIDENT	0	X	_	Х				0.	0.	0.
SAUNDRA STILES	3.5_	1.								
CHAIR-EAST	0	X	<u> </u>	X	L.	ļ	_	0.	0.	0.
NIKKI DOLAN	2									
DIRECTOR	0	X	\perp	_		<u> </u>	_	0.	0,	0.
LORI SUITER		ļ								
DIRECTOR	0	X	┼	 	-	ļ	-	0.	0.	0,
NANCY_JAMES	2_	ļ "		ļ						
DIRECTOR	0	X	-	┡	⊢		╀	0.	0,	0.
JOANNE_FRIEDELDIRECTOR	$-\frac{2}{0}$	x						0.	0.	0.
BETH HUBER	2	 ^	╂	╁	-	+		1 0,	· ·	
DIRECTOR	·	Х	1					0.	0.	0.
DIRECTOR	— <u> </u>	1	╁╌	┪	┢	├~	+		<u> </u>	<u> </u>
	-	†				İ		1	1	
						1				
			1_	<u> </u>	<u> </u>	1	1_	ļ		
	- -	.]								
		- 	_	-	1	ـــــــ	1	<u> </u>	<u> </u>	
		.]
				ــــــــــــــــــــــــــــــــــــــ	<u> </u>	٠		<u> </u>	J	Form 000 Cont 2012

STATES.		Check if Schedule O contains a res	onse to any quest	ion in this Part VIII	l		Π
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
CONTRIBUTIONS, GETS, GRANT! AND OTHER SIME AR ANOUNTS	1 4	A Federated campaigns	85,000.				512, 513, or 514
CONTRIBUT	f Q H	All other contributions, gifts, grants, and similar amounts not included above	29,515.	114,515.			
富			Business Code				
Õ	2a	TAEYC_ANNUAL_CONFERENCE	611430	129,799.		A CONTRACTOR OF THE PROPERTY OF THE PARTY OF	
3	r	PRE-K CONFERENCE	611430	80,328.	80,328.		
PROGRAM SERVICE REVENUE	d	3-2-5-5-5-5-5-6-6-6-6-6-6-6-6-6-6-6-6-6-6	611430	30,857.	30,857.		
RA	e						
Ž.	f	All other program service revenue					
		Total. Add lines 2a-2f		240,984.			
	3	Investment income (including dividend other similar amounts)	s, interest and	0.45			
	4	Income from investment of tax-exempt	bond proceeds >	245.			245.
	5	Royalties					
		(i) Real	(ii) Personal				
		Gross rents	<u> </u>		N		
		Less: rental expenses Rental income or (loss)					
		Net rental income or (loss)					
		Gross amount from sales of assets other than inventory.	118	VC C			
		Less: cost or other basis and sales expenses					
		Net gain or (loss)					
OTHER REVENUE		Gross income from fundraising events (not including. \$					
ž		of contributions reported on line 1c). See Part IV, line 18					
E	b	Less: direct expenses					
5	C	Net income or (loss) from fundraising e	vents				
		Gross income from gaming activities. See Part IV, line 19					
		Lagar Burger and					
		Net income or (loss) from gaming activ					
		Gross sales of inventory, less returns and allowances					
		Less: cost of goods sold i					
-	С	Net income or (loss) from sales of inve			- minimum (
- }	11 0	Miscellaneous Revenue	Business Code				
	b	MISCELLANEOUS	900099	6,243.			6,243.
	c		· · · · · ·				·
		All other revenue					
		Total. Add lines 11a-11d	L	6,243.			
BAA		Total revenue. See instructions		361,987.	240,984.	0.	6,488.
			TEEA	01091. 12/17/12			Form 990 (2012)

secu	on 501(c)(3) and 501(c)(4) organizations must com	piete all columns. All oth	er organizations must co	mplete column (A).	
	Check if Schedule O contains a r	esponse to any question			
7b, 8	ot include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	1,578.	1,578.	Management and general expenses	
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	2,3101	1/0/01		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
	Benefits paid to or for members				
_	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	
	Other salaries and wages	20,121.	15,091.	5,030.	0.
	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions).	40,121.	15,091.	3,030.	
9	Other employee benefits	500.	375.	125.	
	Payroll taxes	1,829.	1,372.	457.	
	Fees for services (non-employees):				
	Management	,			
	Legal	1,931.		1,931.	
	Accounting	8,868.		8,868.	
	Lobbying	2,250.		2,250.	
	Professional fundraising services. See Part IV, line 17	2/200.		2/200	
-	Investment management fees			46EG/CHRISTONICS	
g	Other. (If line 11g amt exceeds 10% of line 25, col- umn (A) amt, list line 11g expenses on Sch 0)	190	142.	48.	
12	Advertising and promotion	370.0		375.	
13	Office expenses	21,789.		2,789.	
14	Information technology	3,722.		3,722.	
15	Royalties	462			
16	Occupancy	7,596.		7,596.	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	286,625.	286,625.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,808.		1,808.	
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.)				
a	PROGRAM/EVENT EXPENSE	22,874.		22,874.	
	BOARD MEETING EXPENSE	9,427.		9,427.	
	PROFESSIONAL DEVELOPMENT	2,949.		2,949.	
	MISCELLANEOUS	1,605.		1,605.	
	All other expenses.	748.	, , , , , , , , , , , , , , , , , , , ,	389.	359.
	Total functional expenses. Add lines 1 through 24e	377,785.	305,183.	72,243.	359.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	SOP 98-2 (ASC 958-720)				
BAA		TEEA0110L 12	2/18/12	······	Form 990 (2012)

		Check if Schedule O contains a recon-				rage
		Check if Schedule O contains a response to any quest	ion in this Part X			
				(4)		
		Cash - non-interest hosting		(A) Beginning of year		(B) End of year
						
		Savings and temporary cash investments. Pledges and grants receivable, not		133,914		175,323
					_ 2	38,350
	4	Accounts receivable, net			3	70,000
l	5	Loans and other recommission to		16,740	. 4	6,812
- 1		Loans and other receivables from current and former offit trustees, key employees, and highest compensated empl Part II of Schedule L	ers, directors,			0,012
		Part II of Schedule [oyees. Complete			
f	6	Loans and other receivables from other disqualified person section 4958(f)(1)), persons described in section 4958(c)(3)(8) employers and sponsoring organizations of section 501(c)(9) beneficiary organizations (see instructions). Complete Pa			5	
- 1		section 4958(f)(1)), persons described in section 4958(c)(3)(B	ns (as defined under			
		beneficiary organizations (see inchristing 501(c)(9)	oluntary employees'			
A S	7	Notes and loans receivable and	t II of Schedule L		6	
SSET	8			<u> </u>	1 7	
Ī	9	The sale of use				<u> </u>
1	_	expenses and deferred charges			8	
- 1	10	a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1	883.	9	14,758
j		Complete Part VI of Schedule D				
İ		a cost accumulated deblecistion				
	11	investments — publicly traded securities	·		10c	A CONTRACTOR OF THE PROPERTY OF THE PARTY OF
	12	The state of the securities has been been to line to			11	
	13	Investments - program-related. See Part IV, line 11	****************		12	
- [14	Intangible assets	******		13	
·	15	Intangible assets. Other assets. See Part IV line 11			14	
[.	16				15	
7	17	Total assets. Add lines 1 through 15 (must equal line 34). Accounts payable and accrued expenses	<u></u>	281,027.	16	600
-	18	Accounts payable and accrued expenses		\$5,398.	17	235,243.
	9			5,550.	18	6,248.
	20	The state of the s	الأكاف ا	1,600.	19	
i l	21	Ton Cacing Doing Hallings	# W W II.	-,000.	20	
ia i	22	Escrow or custodial account liability. Complete Part IV of				
[] 1		key employees highest companyed and former atters di	rector serustees.		21	PA-MC-LAND
+		Complete Part II of Schedule	alfried persons.			
E 2	3	Secured mortgages and notes payable was the secured mortgages and notes payable to the secured mortgages and no			22	AND ASSESSMENT OF THE PARTY OF
S 2	4	Loans and other payables to current and former atters di key employees, highest compensated employees landing Complete Part II of Schedule L Secured mortgages and notes payable unsatted third partie Unsecured notes and loans payable to unrelated third partie.	rties		23	
2	5	Other liabilities (including fodoral increased third partie	\$		24	
		Other liabilities (including federal income tax, payables to rand other liabilities not included on lines 17-24). Complete	lated third parties,		 +	
2	6	Total liabilities. Add lines 17 through 25.	all A of Schedule D.		25	
P		Organizations that follow SFAS 117 (ASC 958), check here ►		46,998.	26	6,248.
7		lines 27 through 29, and lines 33 and 34,	X and complete			
§ 2	7	Unrestricted net assets				
2 2	8	Temporarily restricted net accets	••••••	234,029	27	<u>226,880.</u>
\$ 29	9	Temporarily restricted net assets.	• • • • • • • • • • • • • • • • • • • •		28	
8		Permanently restricted net assets.	·····		29	2,115.
		Organizations that do not follow SFAS 117 (ASC 958), check he and complete lines 30 through 34.	re ► 📗 🖫			
F 30		Conital atasks at the same of				
	• 	Capital stock or trust principal, or current funds	236		の機能	
Ā 31		" " " Or Capital Sulpius, of Edita, billiding or equipment to	—		30	
32	- '	Transport of the will be the second of the s	- u 4 d		31	
BA 31 32 32 33 34		The first dosots of fully balances	-		32	
	· `	Total liabilities and net assets/fund balances.	<u> </u>		33	228,995.
BAA				281,027.	34	235, 243.
						Form 990 (2012)

Form 990 (2012) TENNESSEE ASSOCIATION FOR THE EDUCATION 23- Part XI Reconciliation of Net Assets	-7037075	P	age 12
Check if Schedule O contains a resonnee to any question in this D. 1.14		*********	
Check if Schedule O contains a response to any question in this Part Xt			[]
2 Total expenses (must equal Part IX, column (A), line 25).	1	361,	987,
3 Revenue less expenses. Subtract line 2 from line 1	2	377,	785.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	3	-15 ,	798.
5 Net unrealized gains (losses) on investments.	4	234,	029.
6 Donated services and use of facilities	5		
7 Investment expenses	6		
8 Prior period adjustments	7		
9 Other changes in net assets or fund balances (explain in Schedule O)	8	10,	764.
Net assets or fund balances at end of year, Combine times 3 through 6 (must count Doct V. time 33)			<u>0.</u>
Column (D))	10	228,	005
PartXII Financial Statements and Reporting	1 1	240,	733,
Check if Schedule O contains a response to any question in this Part XII			
1 Accounting method used to prepare the Form 990: Cash X Accrual Other		Yes	No
	 -		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviews separate basis, consolidated basis, or both:	ed on a	_2a	X
Separate basis Consolidated basis Both consolidated and separate basis	Ì		
b Were the organization's financial statements audited by an independent accountant?			
If 'Yes,' check a how below to indicate whether the finencial statements for the contract of t		2b X	weiteren
Daniel Control Dasis, Of DOIL.	иe		
X Separate basis Consolidated basis Both consolidated and separate basis			
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for creating of the audit review, or compilation of its financial statements and selection of an independent accounts.	·	2c X	120011011
If the organization changed either its oversight process or selection process curing the ax year, explain in Schedule O.			
3 a As a result of a federal award, was the organization required to underto an audit or addits as set forth in the Single Audit Act and OMB Circular A-133?		3 a	v
b If 'Yes,' did the organization undergo the required auditor audits? If the organization did not undergo the required auditor audits, explain why in Schedule O and doctribe by steps taken to undergo such audits.	iit	3b	X
BAA		Form 990 ((2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

OMB No. 1545-0047

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. ➤ See separate instructions.

Name	of the organization	" TENNI	ESSEE ASSOCTA	TION FOR THE ED	TICAPT.	ONT			Employ	or ideals	ation number
Cold river		Or II	JUNUA CHELDREN	TNC					1		
Pa	Reaso	n for Pul	olic Charity Stat	us (All organization	s must	compl	ete thi	e nart	123-1	03/0/	5
	<u>-</u>		Are individually in the	COC IL IO. IEDI III IES E IDI	ronzon II	CDACL	0041 001	\ h.~ \		mstruc	uons.
1	A church	, conventio	on of churches or as	sociation of churches de	scribed i	n sectio	on 170/h	Υ1ΥΔΥ:	PA .		
2	M SCHOOL	described	in section 170(b)(1)	(A)(ii). (Attach Schedule	EA				·/·		
3	A hospita	alora coop	perative hospital ser	vice organization describ	ned in se	ction 1	70/6¥1¥	ΔViii\			
4	A medica	I research	organization operat	ed in conjunction with a	hospital	describ	ed in se	ction 1:	70/15//15/	AVIII =	intor the beautiful
		<i>y</i> , who old	10.								
5	An organi 170(b)(1)	zation oper (A)(iv). (C	ated for the benefit of omplete Part II.)	a college or university ow	ned or o	perated I	y a gove	ernmenta	al unit de	scribed i	n section
6	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	, state, or	local government or	ral government or governmental unit described in section 170(b)(1)(A)(v). Imally receives a substantial part of its support from a governmental unit or from the general public described Kvi). (Complete Part II)							
7	in section	zation that n 170(b)(1)	normally receives a s (A)(vi). (Complete f	ubstantial part of its suppo Part II.)	xt from a	governn	nental ur	it or fro	m the ge	neral put	olic described
8	☐ A commu	inity trust o	described in section	170(b)(1)(A)(vi), (Compt	ete Part	II.)					
9	(Complet	e Part III.)		nore than 33-1/3% of its su certain exceptions, and (511 tax) from businesses ac	.,		Lucion on	or valle t	20, 13/3.	and gross m gross i Seesectio	s receipts from activities investment income and in 509(a)(2).
10	HAn organ	zation org	anized and operated	exclusively to test for p	ublic sat	fety. Sec	e sectio	n 509(a)	(4).		
11	supported supportin	ration organ organizatio g organiza	ized and operated exc ons described in section	lusively for the benefit of, t on 509(a)(1) or section 509 nes 11e through 11h.	o perform 9(a)(2), S	the fund see secti	ctions of, on 509(a)			ourposes ox that de	of one or more publicly escribes the type of
	_ a Typ		bi ∐Type II	c Type III - Function	nally int	egrated		d \square	Type III	- Non-f	functionally integrated
е	By check other than section 5	ing this bo foundation)9(a)(2)	x, I certify that the o managers and other	rganization is not contro than one or more publicly	lled dire supporte	ctly or in d organia	ndirectly zations d				
f	If the orga	nization rec		nigation from the IDC that			-	# A.		organizat	
g	Since Au	gust 17, 20	06, has the organiza	ation accepted any gift	er contri	ution i	апу	of the f	ollowing	persons	······
	(i) A probelo	erson who w, the gov	directly or indirectly erning body of the s	controls will be talone by upported by gan is ofton.	ethe	r with p	ersons d	lescribe	d in (ii)	and (iii)	Yes No
	(ii) A fa	mily memi	per of a person des	od in (i) above?							
	(iii) A 39	% controll	ed entity of a perso	described in (i) or (ii) a	ahovo?			,		• • • • • • • •	11 g (ii)
h	Provide th	ne following	g information about	the supported organizati	ion(s)	•••••		• • • • • • •			11 g (iii)
	(i) Name of	behooded	(ii) EIN		T ' '	is the	OA Did v	u polific	6.51	la alta	640 4
	organiz	auon		(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	column (ation in i) listed in everning ment?	(v) Did yo the organ cotumn (supp	ization in 0 of your ort?	organiz	Is the ration in mn (i) ed in the S.?	(vii) Amount of monetary support
					Yes	No	Yes	No	Yes	No	
(A)											
(~)				 							
(B)											
											
(C)							L				
<u>(D)</u>								-			
<u>(E)</u>			WEST DESCRIPTION OF THE PARTY O								
Total											
RAA	For Paperwor	k Reductio	on Act Notice, see t	te Instructions for Form	990 or 9	90-EZ.	-	(Schedule	A (Form	1 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 TENNESSEE ASSOCIATION FOR THE EDUCATION 23-7037075

Ratull 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.)

300	Cuon A. Public Support						·····
beg	endar year (or fiscal year inning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.).	295,124.	229,156.	200 77.0	4.0		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.	293,124.	229,156.	208,712.	46,675.	114,515.	894,182.
3	The value of services or facilities furnished by a governmental unit to the organization without charge			^		7	0.
4	Total. Add lines 1 through 3	295,124.	229,156.	208,712.	46,675.	114 515	0,
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)				40,073.	114,515.	894,182.
	Public support. Subtract line 5 from line 4						0. 894,182.
	tion B. Total Support				and an analysis of the control of th	KONGO NA SERVADA SER	034,102.
begi	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	295,124.	229,156.	208,712.	46,675.	114,515.	894,182.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,842.	674.	759)PY		
9	Net income from unrelated business activities, whether or not the business is regularly carried on		IBL	G	440.	245.	3,954.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). SEE PART IV		5,282.	7,653.	7,423.	6,243.	26,601.
	Total support, Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc (see inst	ructions)				924,737. 992,236.
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	's first, second, thi	I		<u> </u>	
Sec	tion C. Computation of Pub	olic Support Pe	ercentage				
14	Public support percentage for 20	12 (line 6, column	(f) divided by lin	e 11, column (f)).		14	96.70%
12	Public support percentage from 2	2011 Schedule A,	Part II, line 14	• • • • • • • • • • • • • • • • • • • •		15	07 52 %
16 a	33-1/3% support test — 2012. If and stop here. The organization	the organization d qualifies as a pub	lid not check the I licly supported or	box on line 13, an ganization	d the line 14 is 33	3-1/3% or more, o	check this box
b	33-1/3% support test — 2011. If the and stop here. The organization	he organization di	d not chook a box	an line 10 au 16.		0.4100-	
	10%-facts-and-circumstances te or more, and if the organization r the organization meets the 'facts	and unbarriotario	25 tost. The organ	mzanon quannes a	as a publicly supp	orted organizatio	n 🏲 📙
b 18	10%-facts-and-circumstances te or more, and if the organization roganization meets the 'facts-and Private foundation, if the organiz	st - 2011. If the omeets the 'facts-auticumstances' to	rganization did non nd-circumstances est. The organization	ot check a box on the test, check this to tion qualifies as a	line 13, 16a, 16b, box and stop here publicly supporte	or 17a, and line Explain in Part d organization	15 is 10% IV how the
BAA	The organization of the organization	anon did not tilet	n a DVA UII IIINE I	3, 108, 100, 1/a,			
					Sch	Adula A (Earm OC	0 or 000 E71 2012

Schedule A (Form 990 or 990-EZ) 2012 TENNESSEE ASSOCIATION FOR THE EDUCATION 23-7037075

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Called year (or fined by beginning in) b Cills, greatly, corphiputions or Cills, greatly, complications greatly, gr	Sec	tion A. Public Support						- 1	
sinch membership less received. (Or hat Include your visuatial grants). To the form the control of the control	Calen	dar year (or fiscal yr beginning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012		/n Total
2. Cross receipts from advises sions, merchandise sold or services performed, or facilities formised in any activity that is tax-exempt purpose. 3. Gross receipts from activities first are not an unrelated trade of the organization's benefit and either part of or expended on the organization's benefit and either part of or expended on either part of or expended on either part of or expended on either part of or expended on either part of or expended on either part of or expended on either part of or expended on either part of or expended on either part of or expended on either part of or expended on expended o	1	Gifts, grants, contributions and membership fees				(4) 4011	(6) 2012		(i) iotal
2 Gross receipts from admissions, membrandes sold of the sold of t		received. (Do not include							
ssons, merchandises old or services or formed, of relatities related to the organization's trak-eventy purpose. 3 Gross receipts from activities for the organization's trak-eventy purpose. 4 Tax revenues levied for the organization's benefit and either paid to or expended on either paid to or expended persons that does not expended for expend	2	Gross receipts from admis-							
trunsited in any activity that is reliable to the organization's reliable to the organization's reliable to the organization's reliable to the organization's that are not an unrelated trade of business under section 513. 1 Tax revenues level for the organization benefit and on its behalf. 5 The value of services or fabrillation of the organization without charge. 6 Total. Add lines 1 through 5. 7 a Amounts included on lines 1, 2, and 3 received from disqualified persons. 9 Amounts included on lines 2, and 3 received from disqualified persons. 9 Amounts included on lines 2, and 3 received from disqualified persons. 9 Amounts included on lines 2, and 3 received from disqualified persons. 10 a Gross income from line 6. 10 a Gross income from line 6. 10 a Gross income from lines 3. 10 a Gross income from lines 3. 11 a Gross income from lines 3. 12 a Gross income from lines 3. 13 a Gross income from lines 4. 14 for lines 10 a and 10 b 15 Minimum benefits a subside income (less section 511 taxes) from businesses acquired after June 30, 1975. 16 All lines 10 a and 10 b 17 Minimum benefits a subside income (less section 511 taxes) from businesses acquired after June 30, 1975. 18 Gross income, Do, not include of a subside a subside and a su		Sions, merchandise sold or	İ						
resides to the Organization's free the Comparison of the Compariso		furnished in any activity that is							
Scrions receipts from activities that are not a unrelated frade or business under section 513. 1 Tax revenues level for the either paid to or expended on its behalf. 5 The value of services or government of the either paid to or expended on its behalf. 5 The value of services or government of the organization without charge organization without charge organization without charge organization without charge organization without charge organization without charge organization without charge organization without charge organization without charge organization without charge organization without charge organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization of the paid organization organization organization organization of public support economy organization organization organization organization organization organization organization organization organization, check line box and stop here. 10 Other income, Do not include organization organization organization, check line box and stop here. 11 Test tive years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check line box and stop here. 12 Other income, Do not include organization organization, check line box and stop here. 13 Total support, each as, inc. 11, sect. 14 First five years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check line box and stop here. 15 Public support percentage from 2011 Schedule A, Part III, line 15. 16 Public support percentage from 2011 Schedule A, Part III, line 15. 17 Investment income percentage from 2011 Schedule A, Part III, line 17. 18 Investment income percentage from 2011 Schedule A, Part III, line 17. 19 32-1768 support tests—2012 if the organization did not check a box on line 14, and line 16		related to the organization's				i			
that are not an unrelated trade or business under section 513. 4 Tax reverques levied for the control of the c	3							_	
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalfs		that are not an unrelated trade					1	ŀ	
organization's benefit and either paid to or expended on the paid to or expended on the paid to or expended on the paid to organization without charge. 6 Total. Add lines 1 through 5. 7 a Amounts included on lines 1, 2, and 3 received from disqualified persons. b Arnounts included on lines 2, and 3 received from disqualified persons. c Add lines 7 and 7 to 1 and 1 an	Δ								
is behalf. The value of services or governmental unit to the organization without charge. 6 Total. Add lines 1 through 5. 7 a Amounts included on lines 1. 7 a Amounts included on lines 2. 9 and 3 received from disqualified persons. b Amounts included on lines 1. 7 and severed from other than disqualified persons that exceed the greater of \$5,000 or for the year. c Add lines 7 and 7 b. 8 Public support (Subbract line for the lines of the person of the year. c Add lines 7 and 7 b. 9 Amounts from line 6. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. 10a Gross income from interest, leading the person of the per	,	organization's benefit and					1		
5 The Value of services or facilities translated by a governmental unit to the organization without charge. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1 5 5 5 5 5 5 5		either paid to or expended on its hehalf.							
governmental unit to the organization without charge. 6 Total. Add lines 1 through 5. 7 a Amounts included on lines 2, 2 and 3 received from disqualified persons. b Amounts included on lines 2, 2 and 3 received from other than disqualified persons that the stress of	5	The value of services or							
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7 a Amounts included on lines 1, 2, and 3 received from other than 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. 8 Public support (Subtract line 7c from line 6.). 8 Public support (Subtract line 7c from line 6.). 9 Amounts from line 6. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalfies and income from similar sources. b Unrolated business taxable taxes) from businesses acquired after June 30, 1975. c Add lines 10a and 10h. 11 Not licens from unrelate hasiess stivities not included in line 10s 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 IV.). 13 Total support. (walles, 9, 10c, 11, see 12) 14 First five years, If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) expands received any accordance of the property organization, check this box and stop here. Section C. Computation of Public Support Percentage 15 Public support percentage from 2011 Schedule A, Part III, line 15. 8 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)). 18 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f). 19 a 33-13% support tests — 2012. If the organization did not check he box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported trans and an accordance of the propartization qualifies as a publicly supported trans and an accordance of the propartization of publices this box and stop here. The organization qualifies as a publicly supported than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported than		organization without charge					İ		
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disqualified persons. b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. c Add lines 7a and 7b. 8 Public support (Subtract line 7c from line 6.). Section B. Total Support Calendar year (or fiseal yr beginning in) - 9 Amounts from line 6. 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. b Unrolated business taxable income (less section 51) acquired after June 30, 1975. c Add lines 10a and 10b. 11 the Income from unterest in the section 51 with the section 51 will be section 51 acquired after June 30, 1975. c Add lines 10a and 10b. 12 Other income, Do not include gain or loss from the sale of sapital assess (Explain in Part IV.). 13 Total support, waters, 10, 11, sed 12) 14 First live years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501 (c)(3) regularization, check this box and stop here. Section C. Computation of Public Support Percentage 15 Public support percentage from 2011 Schedule A, Part III, line 15. Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2011 Schedule A, Part III, line 17. 18 Investment income percentage from 2011 Schedule A, Part III, line 17. 19 a 35-1/3% support tests — 2012, if the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. 20 Private foundation. If the organization did not check a box on line 14, 10a, or 10b, check this box and see instructions.	/ a	2. and 3 received from							*******
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. Add lines 7a and 7b. Public support (Subtract line 7c from line 6). Section B. Total Support Calendar year (or fiscal yr beginning in) - 9 Amounts from line 6. 10 Gross income from interest, dividends, payments received on securities toans, rents, similar sources, owner from interest, dividends, payments received on securities toans, rents, similar sources, owner from similar sources, owner from similar sources, owner from similar sources, rents, similar sources, owner from similar sources, owner from business suxable income (less section 51 taxes) from business suxable income (less section 51 taxes) from business seawher in trudeled in line 10s, whether or not the business is regularly carried on. 11 Not linome from unrelated business seawher in trudeled in line 10s, whether or not the business is regularly carried on. 12 Cliber income. Do not include gain or loss from the sale of agoing a loss from the sale of agoing a loss from the sale of agoing a loss from the sale of agoing a loss from the sale of agoing a loss from the sale of agoing the sale of ago		disqualified persons							
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for the year		exceed the greater of \$5,000 or							
8 Public support (Subtract line 7c from line 6.)		for the year				4			
Section B. Total Support Calendary year (or fiscal y beginning in) > 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received or securities grants, ents, coyalties and inspection of securities and inspection of securities and inspection of securities of securities and inspection of securities of securiti	C	Add lines 7a and 7b					<u> </u>		
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Calendar year (or fiscal yr beginning in) (a) 2008 (b) 2019 (c) 2011 (e) 2012 (f) Total 9 Amounts from line 6	<u> </u>					1 1			
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 51 taxes) from businesses acquired after June 30, 1975. c Add lines 10a and 10b	$\overline{}$		(-) 0000	# > cd oo			· · · · · · · · · · · · · · · · · · ·		
10 a Gross income from interest, dividends, payments received on securities loans, rents, royallies and income from similar sources. b Unrelated business taxable income (less section 51) taxes) from businesses acquired after June 30, 1975. c Add lines 10 a and 10 b. 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 saje of capital assests (Explain in Part (IV.). Add less see (Explain in Part (I			(a) 2008	(B) 5,000	c) 2010	(d) 2011	(e) 2012		(f) Total
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Section C. Computation of Public Support Percentage 15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	14	organization, check this box and	is for the organiza	ation's first, secon	d, third, fourth, c	or fifth tax year as	a section 501	(c)(3)	▶ □
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20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	b	33-1/3% support tests 2011. If	the organization	did not check a hi	ov on line 14 or l	line 10s and line	16 10	- 22 16	20/
		mile to 12 HOCHROLE (Hall 22-112.)	o, crieck this box a	ario stop nere, ind	e organization qu	latifies as a public	iy supported (organiza	ition >
		r iivate ioutuation, ii the organi	Zauon did not che						····· <u> </u>

Schedule A	(Form 990 or	990-EZ) 2012	TEI	NNESSEE	ASSOC.	IATIO:	N FOR	THE	EDUCATION	23-7037075	Page 4
Rait!(V.	Suppleme Part II, Iir (See instr	ental Informe 17a or 1 ructions).	nation. 7b; and	Complete Part III, I	e this pa ine 12.	art to p Also c	orovide omplet	the e te this	explanations part for any	required by Part II additional informa	, line 10; ation.
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BAA										Schedule A (Form 990 o	r 990-EZ) 2012

2012

SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5 TENNESSEE ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN, INC. 23-7037075

23-7037075

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE 2012 2011 2010 2009	0000
OTHER INCOME \$ 6,243. \$ 7,423. \$ 7,653 \$ 5,222	2008
TOTAL $\frac{\$}{\$} = \frac{6,243.}{6,243.} = \frac{\$}{\$} = \frac{7,423.}{7,423.} = \frac{\$}{\$} = \frac{7,653.}{7,653.} = \frac{\$}{\$} = \frac{5,282.}{5,282.} = \frac{\$}{\$}$	0.

PUBLIC COPY

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury

PUBLIC DISCLOSURE COPY

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No. 1545-0047

2012

Hame of the organization PENNESSEE AS	SSOCIATION FOR THE EDUCATION	Employer identification number
OF YOUNG CH	ILDREN, INC.	23-7037075
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	\boxed{X} 501(c)($\boxed{3}$) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not tre	ated as a private foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated	l as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered	by the General Rule or a Special Rule	
- · ·	r (10) organization can check boxes for both the General Ru	le and a Special Rule. See instructions.
	(10) organization can allow boxes to both the denotative	and a opposition that are monocontroller
General Rule For an organization filing Form 990, contributor. (Complete Parts I and	990-EZ, or 990-PF that received, during the year, \$5,000 or mor 1 II.)	re (in money or property) from any one
Special Rules		
X For a section 501(c)(3) organizati 509(a)(1) and 170(b)(1)(A)(vi) an (2) 2% of the amount on (i) Form	on filing Form 990 or 990-EZ that met the 33-1/3% support d received from any one contributor, during the year, a cont 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete	test of the regulations under sections ribution of the greater of (1) \$5,000 or Parts fand II.
total contributions of more than \$ the prevention of cruelty to children	organization filing Form 990 or 990-EZ that received from 990 or 990-EZ that received from 990 or 990-EZ that received from 990 or 1,000 for use exclusively for religious, charitable, spentice or animals. Complete Parts I, II, and III.	iterary, or educational purposes, or
For a section 501(c)(7), (8), or (10) contributions for use exclusively for If this box is checked, enter here the purpose. Do not complete any of the	organization filing Form 990 or 990 to Zunat received from any or religious, charitable, etc. purposes, surfines contributions did no total contributions that water received during the year for an exce a parts unless the General Rule applies to this organization beca	ne contributor, during the year, not total to more than \$1,000. clusively religious, charitable, etc, nuse it received nonexclusively
religious, charitable, etc. contribu	tions of \$,000 or more during the year	
answer 'No' on Part IV line 2, of its Form 99	the General Raile and/or the Special Rules does not file Schedule B (Form 99 10; or check the box on line H of its Form 990-EZ or on Part I, line 2, of dule B (Form 990, 990-EZ, or 990-PF).	i0, 990-EZ, or 990-PF) but it must itsForm 990-PF, to certify that it does not
BAA For Paperwork Reduction Act or 990-PF.	Notice, see the Instructions for Form 990, 990EZ,	hedule B (Form 990, 990-EZ, or 990-PF) (201)

Schedule Name of org	B (Form 990, 990-EZ, or 990-PF) (2012)	Page	1 of 1 of Part 1
-	SSEE ASSOCIATION FOR THE EDUCATION	Employe	er identification number
	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed	23-7	037075
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$5,000.	Person X Payrotl Noncash Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$85,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Name, address and kilk **	Yac	Person Payroll Noncash Complete Part II if there is a noncash contribution.)
(a) Number	Name, address, and zik 42	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution.
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Complete Part It if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)
BAA	TEEA0702L 11/30/12	Schedule B (Form 990	a noncash contribution.) 0, 990-EZ, or 990-PF) (2012)

Schedule I	B (Form 990, 990-EZ, or 990-PF) (2012)		Page	1 to	1 of Part II
-	SEE ASSOCIATION FOR THE EDUCATION			23-703°	ntification number
	Noncash Property (see instructions). Use duplicate copies of Part II if additional s	spac	e is need	<u> 23-703</u> ed.	7075
(a) No. from Part I	(b) Description of noncash property given			c) estimate) tructions)	(d) Date received
	N/A	+		·	<u> </u>
		-			
		\$_		· · · · · · · · · · · · · · · · · · ·	
(a) No. from Part I	(b) Description of noncash property given		FMV (or (see inst	c) estimate) ructions)	(d) Date received
		1	•		
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(a) No. from	(b) Description of noncash property given	<u> </u>	(;)	_ (d)
Part I	bescription of noncasti property given		FMV (or (see inst	c) estimate) ructions)	Date received
		}			
		 Sa.	Í		
(a) No.	(b)	7	•		
from Part I	Description of noncash property given		FMV (or o (see inst	estimate) ructions)	(d) Date received
		\$_			
(a) No.	(b)				
from Part I	Description of noncash property given		FMV (or e (see insti	estimate) ructions)	(d) Date received
		\$_			-
(a) No. from Part I	(b) Description of noncash property given		(c FMV (or e (see instr) stimate) uctions)	(d) Date received
					
		\$			
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Schedule **B** (Form 990, 990-EZ, or 990-PF) (2012)

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2012

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Publications

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then
• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name	of organization			Employer Identifica	gou namper
TEN	NESSEE ASSOCIATION	FOR THE EDUCATION		23-703707	5
Par	t I-A Complete if the or	ganization is exempt under section	on 501(c) or is a s	ection 527 organiz	ation.
		organization's direct and indirect political c			
Par	LB Complete if the or	ganization is exempt under section is the tax incurred by the organization under	on 501(c)(3).		
1					
2	Enter the amount of any exci	ise tax incurred by organization managers	under section 4955.	⊁\$ຸ	0.
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a correction made?				Yes No
b	If 'Yes,' describe in Part IV.			ad	L L!
Pai	tilic Complete if the or	ganization is exempt under section	on 501(c) , excep	secton 501(c)(3).	
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempl#hodio	activities > \$	
2	Enter the amount of the filing of	rganization's funds contributed to other organ	izations for section 52	exempt	
	function activities			• exempt • • • • • • • • • • • • • • • • • • •	
3	Total exempt function expendine 17b.	atta una a la cial di cala di cala di cala di cala di cala di cala di cala di cala di cala di cala di cala di c	A C 1100 DOI	> \$	
4	line 17b Did the filing organization file	e Form 1120 PO for this year?		,	Yes No
5	Enter the names, addresses organization made payments amount of political contribution segregated fund or a political	and employed identification number (EIN) s. For each organization listed, enter the as is received that were promptly and directly def I action committee (PAC). If additional spa	of all section 527 pol mount paid from the livered to a separate po ace is needed, provid	itical organizations to w filing organization's fun- olitical organization, such e information in Part IV	which the filing ds. Also enter the as a separate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter .0.
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
BAA	For Paperwork Reduction Act	Notice, see the Instructions for Form 990 or	990-EZ.	Schedule C (Forr	n 990 or 990-EZ) 2012

Table 1978. Complete if the organization is exempt under section 501(x)3 and filed Form 5768 (election under section 501(x)3). A Check if the filing organization belongs to an attilisated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). B Check if the filing organization checked box A and 'limited control' provisions apply. (The term' expenditures present and share of excess lobbying expenditures). (The term' expenditures problem in the property of the sense amounts paid or incurred.) (A) Farm of the property expenditures to influence a legislative body (direct lobbying). (b) Total lobbying expenditures (add lines 1a and 1b). (b) Total lobbying expenditures (add lines 1a and 1b). (c) Total exempt purpose expenditures (add lines 1a and 1b). (d) Cher sense purpose expenditures (add lines 1a and 1b). (d) Cher sense purpose expenditures (add lines 1a and 1b). (f) Lobbying nontaxable amount. Enter the amount from the following table in both columns. (if) Lobbying nontaxable amount is less that the excess over \$1,000,000. (if) 1,000,000 but not over \$1,000,000. (if) 1,000,000 but not over \$1,000,000. (if) 1,000,000 but not over \$1,000,000. (if) 2,000,000 but not over \$1,000,000. (if) 2,000,000 but not over \$1,000,000. (if) 2,000,000 but not over \$1,000,000. (if) 3,000,000 but not over \$1,000,000. (if) 4,000,000		amzadon is exempt unde	OR THE EDUCATION or section 501(c)(3) ar	23-703 nd filed Form 5768 (el	7075 Pa lection under
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	Calendar year (or fiscal year beginning in) a Lobbying non-taxable amount (150% of line 2a, column (e))	4-Year Averaging Peri ations that made a section 501(columns below. See the instr Lobbying Expenditures Du	od Under Section 501(h) h) election do not have o uctions for lines (a thiot	implete all of the five in 2f.)	<u> </u>
Grassroots Johnson	Calendar year (or fiscal year beginning in) a Lobbying non-taxable amount (150% of line 2a, column (e))	4-Year Averaging Peri ations that made a section 501(columns below. See the instr Lobbying Expenditures Du	od Under Section 501(h) h) election do not have o uctions for lines (a thiot	implete all of the five in 2f.)	<u> </u>
expenditures	Calendar year (or fiscal year beginning in) a Lobbying non-taxable amount (150% of line 2a, column (e))	4-Year Averaging Peri ations that made a section 501(columns below. See the instr Lobbying Expenditures Du	od Under Section 501(h) h) election do not have o uctions for lines (a thiot	implete all of the five in 2f.)	<u> </u>

Schedule C (Form 990 or 990-EZ) 2012 TENNESSEE ASSOCIATION FOR THE EDUCATION 23-7037075

Partill C Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
of the lobbying activity.	Yes	No	Δι	nount	
SEE PART IV		110	A1	HOURE	
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a Volunteers?					
D raid Starr or management (include compensation in expenses reported on lines 1.5 through 12.2	-	X			
C Media advertiserrierris		Х			
a mainings to members, registators, or the public?	7.7	X			
e Publications, or published or broadcast statements?	X				
f Grants to other organizations for lobbying purposes?		X			
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<u> </u>			
1 Other activities?					
j Total. Add lines 1c through 1i.	X	asana.			<u> 250</u>
Za Did the activities in line I cause the organization to be not described in section 501(a)(2)2	- The page 22	A SALL OF STREET	Section and the section of the secti	2,2	250
Dill res, enter the amount of any tax incurred under section 4012	100000000000	X			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
and the standard of the standa			ali di xebera	College and the last	disconsecution of
Partill A Complete if the organization is exempt under section 501(c)(4), section 501(section 501(c)(6).	(c)(5),	or			
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			T	1.00	
2 Did tile organization make only in-house lobbying expenditures of \$2.000 or local					
			_	1	-
(6) and if either (a) BOTH Part III-A, lines 1 and 2 are answered No' OR (b) Parswered 'Yes.'				01(c)	I
1 Dues, assessments and similar amounts from members		1 [
2 Section 162(e) nondeductible lobbying and include amounts of political expenses for which the section 527(f) tax was pain.					
a Current year	Ī				
b Carryover from last year,		2a			
c Total	···· }	2b	······································		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		2 c			<u> </u>
		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political 5. The block of the excess does not be reasonable estimated in the excess does not be reasonable estimated.	all the second				
5 Taxable amount of lobbying and political expenditures (see instructions)	···· -	4	<u></u>		
RartiV Supplemental Information	<u>::::</u>	5			
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.	rt II-A	(affilia	ted group	list);	
PART II-B - DESCRIPTION OF LOBBYING ACTIVITY	. _				
THE ORGANIZATION PAYS A LOBBYIST \$4,500 TO WORK ON BEHALF OF TENNE					
KEEPING THE ORGANIZATION INFORMED OF BILLS AND ISSUES THAT DIRECTI					
CARE PROFESSION AND BEST PRACTICE FOR CHILD CARE AND EDUCATION OF	THE	YQU	NG_CHI	LD.	
50% OF HIS TIME IS ALLOCATED TO LOBBYING ACTIVITIES.					

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OM8 No. 1545-0047

2012

Schedule D (Form 990) 2012

1	ENNESSEE ASSOCIATION FOR THE EDI		· · · · · · · · · · · · · · · · · · ·	Employer identification number
				- [
	Organizations Maintaint	A de de la la la la la la la la la la la la la		23-7037075
<u> </u>	the organization answered 'Yes' to	Advised Funds or O	ther Similar Funds or A	ccounts. Complete if
_	300.00			wast complete ii
	Total number at end of year	(a) Donor advise	d funds (b)	Funds and other accounts
	Aggregate contributions to (during year)			The Street Decourts
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor are the organization's property, subject to the o	or advisors in writing that the	e assets held in donor advise	d funds
	Did the organization inform all grantees, donors for charitable purposes and not for the benefit of impermissible private benefit?	, and donor advisors in wri	ting that grant funds can be up, or for any other purpose co	Sed only Services
P	間隔 Conservation Easements, Comple	to if the erms -: -1'		····· Yes No
	Purpose(s) of conservation easements held by I	be organization (about a	answered 'Yes' to Form	990, Part IV, line 7.
	Preservation of land for public use (e.g., red	rie organization (check all I	шасарруу),	
	Protection of natural habitat	realion or education)	Preservation of an historic	cally important land area
	Preservation of open space		Preservation of a certified	historic structure
2	Complete lines 2a through 2d if the groupization had	doministra		
	Complete lines 2a through 2d if the organization hel last day of the tax year.	u a quantied conservation cor	ntribution in the form of a conse	rvation easement on the
			······	***
	a Total number of conservation easements.	******	- 	Held at the End of the Tax Year
	s rotal acreage restricted by conservation easeme	ints		
	c required of conservation easements on a certified	d historic structura included		
	Number of conservation easements included in (structure listed in the National Register	c) acquired offer profiles	2c	
,	structure listed in the National Register.	o, acquired affer of the control a	no orra historic	-
3	toy year b	er (eogreighswi), exanderered.	or terminated by the organization	on during the
4	Number of states where property subject to know the	tion exempet is least at a		
5	and enforcement of the conservation easements	ding the periodic monitorin	g, inspection, handling of viol	ations
6	Staff and volunteer hours devoted to monitoring, insp	ecting, and enforcing conser	vation easements during the yea	····. Yes No
7	Amount of expenses incurred in monitoring, inspectin	ng, and enforcing conservation	n easements during the year	
8	Does each conservation easement reported on lin and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the re-	quirements of section 170(h)(4)(B)(i)
9	In Part XIII, describe how the organization reports	**************************************		Yes No
TO SERVICE OF	In Part XIII, describe how the organization reports co- include, if applicable, the text of the footnote to the conservation easements.	nservation easements in its re ne organization's financial s	evenue and expense statement, statements that describes the	and balance sheet, and organization's accounting for
	Complete if the organization answer	ons of Art, Historical 1 red 'Yes' to Form 990	reasures, or Other Sim	ilar Assets.
1 8	If the organization elected, as permitted under SF art, historical treasures, or other similar assets held to in Part XIII, the text of the footnote to its financial	AS 116 (ASC 958), not to a public exhibition, education	report in its revenue statement, or research in furtherance of p	at and balance sheet works of public service, provide,
ŧ	If the organization elected, as permitted under SF historical treasures, or other similar assets held for pure following amounts relating to these items:	AS 116 (ASC 958), to repo- iblic exhibition, education, or	rt in its revenue statement an	d balance sheet works of art,
	ty Theyerides included in Form 990. Part VIII line	. 1		
_				
2	amounts required to be reported under SEAS 116	ical treasures, or other simila	ir assets for financial gain, provi	ide the following
а	Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X	* a add tergring to tuese	neiu2;	
b	Assets included in Form 990, Part X	******************************		*\$
SAA	For Paperwork Reduction Act Notice, see the Ins	tructions for Form 990	TECADON	\$
			ICCA33UIL 09/18/12	Schedule D. (Form 000) 2010

Rankill Organizations Main 3 Using the organization's acquisiti	THE COL	IECRIVIIS OF AIT. H	Istorios	Trancista	- A. O.L.	23-7	037075	Pa
3 Using the organization's acquisititems (check all that apply): a Public exhibition	on, accession,	and other records, che	ck any of	the following to	hat are a rio	r Similar A	ssets (con	tinued
a Public exhibition						inicant use of	its collection	
b Scholarly research		d∐Γ	oan or ex	change progra	ams			
c Preservation for future gen	orotions	e ∐ 0	ther					
Provide a description of the organ Part XIII. During the upper status.	nization's collec	ctions and explain how	they furth	er the graphic	diant			
to be sold to raise funds rather	zation solicit o	or receive donations of	of art. his	torical treasur	00 00 04			
Part IV Escrow and Custodial A	rrangemente	Company of t	ne organi	zation's collec	ction?	Similar assets	Yes	
reported an amount	on Form 99	0, Part X, line 21		dipueled 16	S to Form	990, Part IV, I	ine 9, or	N
1 a ls the organization as a second				ontributions o	r other asso	ts not include		
on Form 990, Part X?b If 'Yes,' explain the arrangemen	nt in Part XIII	and complete the fol	owing tal	ole:	•••••••	······	Yes	
c Beginning balance					Γ	1	Amount	
c Beginning balanced Additions during the year			· · · · · · · · · · · · · · · · · · ·	**********	10		ALIOUHE	
						 -		
						 		
f Ending balance			• • • • • • • •	******			·	
								-
b If 'Yes,' explain the arrangemen	t in Part XIII.	Check here if the ext	lantion h	as been provi	ded in Dark	· · · · · · · · · · · · · · · · · ·	Yes	No
SHAVE Endowment F				as seen plow	ueu in ran	XIII		· []
artV Endowment Funds. (omplete if	the organization	answer	ed 'Yes' to	Form 990	Part IV ti	20 10	
1 a Regioning of year but	(a) Curren	nt (b) Prior	year	(c) Two years	(d)	Three years	(c) Farry	
1 a Beginning of year balance	<u> </u>				1. (7)	Tiree years	(e) Four y	ears
b Contributions								
c Net investment earnings, gains, and losses					AV		 	
d Grants or scholarships			[_				1	
e Other expenditures for facilities and programs		156		GV	B			
f Administrative expenses		1						
g End of year balance		121	486				 	
Provide the estimated							 	
Provide the estimated percentage a Board designated or quasi-endown	of the Warter	it end balance (line 1g, c	olumn (a)) he	ld as:		<u> </u>	
3-miled of quasi-cytaOMIII	ent 🛌	⁸	-	(=7,7 //-				
b Permanent endowment ➤		•						
c Temporarily restricted endowmen	it 🟲	ક્ર						
The percentages in lines 2a, 2b,	and 2c should	equal 100%.						
a Are there endowment funds not in the organization by:	ne possession (of the organization that	are held	and administer	ed for the			
(i) unrelated organizations							Yes	No
(i) icialed ordanizations							3a(i)	
(fi) related organizations b If 'Yes' to 3a(ii), are the related or Describe in Part XIII the intended	rganizatione li	etad on as a second or a	• • • • • • • •				3a(ii)	
Describe in Part XIII the intended	uses of the o	sed as required on s	chedule	R?			3b	+
Land, Buildings, and E	dilipment	Soo For 000	ent fund	S				 -
Description of property	- Anibinelif	(a) Cost or other basis						
<u></u> .	3	(investment)	(b) C	ost or other	(c) Acc	umulated	(d) Book v	alue
a Land		(mrosmicin)	Da:	sis (other)	depre	eciation	, , = 0011 y	
b Buildings			 	 				
			<u> </u>					
C Leasehold improvements			ł					
c Leasehold improvementsd Equipment		· · · · · · · · · · · · · · · · · · ·						
c Leasehold improvementsd d Equipmente								
c Leasehold improvements d Equipment e Other al. Add lines 1a through 1e. (Column								

Bandanismin Acadile 110.	TENNESSEE ASSOCIA Other Securities. See	Form 990.	Part X	line 12	N/A	23-7037075	Page
(a) Description of	security or category me of security)	(b) Book	value	1.1116 12,		d of valuation: Cost or	
(1) Financial derivatives			·	<u> </u>	end-of-	year market value	
(2) Closely-held equity intere	sts			 			
(3) Other				 			
(A)							
(B) (C)							
(D)						· · · · · · · · · · · · · · · · · · ·	
(E)							-
(F)							
(G)		L					
(H)		***************************************					
(1)							
Total. (Column (b) must equal Form S	90, Part X, column (B) line 12.) 🕨						ile in the contract of
Part VIII Investments -	- Program Related. See	Form 990,	Part X,	line 13.	N/A		
(a) Description of	investment type	(b) Book	value		(c) Method	of valuation: Cost or	
(1)				<u> </u>	end-of-y	year market value	
(2)							
(3)							
(4)							
(5) (6)							
(7)							
(8)							·
(9)							
(10)				-			
Total. (Column (b) must equal Form 9:	90, Part X, column (B) line 13.) >						
Part IX Other Assets.	See Form 990, Part X, li	ne 15. 🚜 🕯	N/A				e translation in the
(1)	(a) Des	cription				(b) Book	value
(2)						,,==,	
(3)							
(4)	-						
(5)							
(6)							
(7)							
(8)							
(10)							 -
Total. (Column (b) must equal	Form 000 Ded V						
Part X Other Liabilitie	C Soo E-res 000 D 13	, line 15.)				▶	
(a) Descripti	on of liability		k value				
(1) Federal income taxes		(1) 500	in value				
(2)	· · · · · · · · · · · · · · · · · · ·	+					
(3)							
(4)							
(5)							
(6) (7)							
(8)							
(9)	· · · · · · · · · · · · · · · · · · ·						
(10)							
(11)				-			
Total. (Column (b) must equal Form 990), Part X, column (B) line 25.)	-					
FIN 48 (ASC 740) Footnote. In Part X	III provide the text of the feetness to	inden	financial st	atements that re	norts the organize	finn's liability for annuals	
under FIN 48 (ASC 740). Check here if the	ne text of the footnote has been provide	ed in Part XIII			SEE PART	XIII	positions
540		TCE A 2200V					

Schedule D (Form 990) 2012 TENNESSEE ASSOCIATION FOR THE EDUCATION	00 500505	
Edition of Revenue por Audited Circumstant	23-7037075	Page 4
	er Return	
		361,987.
a Net unrealized gains on investments		
b bounded services and use of ischines		
Circoveries of prior year drants		
The Control of the Co		
o / dd mies za dikough za		
	·	
The state of the s	3	361,987.
a investment expenses not included on Form 990. Part VIII. line 7h		
b Other (Describe in Part XIII.)		
C Add mies 4d arig 4D		
- 10th 10th 10th 10th 10th 3 dill AC. Title milet annal form 000 for it is		
Market Market 1 Court Child Hall Hall Carle Boy a Hall And Cincinnia Court Child Hall Carle Carl		361,987.
1 Total expenses and losses per audited financial statements	per Return	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1	377,785.
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses. 2b		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d. 2d		
3 Subtract line 2e from line 1.	2e	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	377,785.
a investment expenses not included on Form 990. Part VIII. tipe 7b		
b other (bescribe in Fait All).		
CAUCINICS 44 AUG 4B		
5 Fotal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I line 19)	4c	-
Supplemental information		377,785.
Complete this part to provide the descriptions required for Part II, lines 3, fee and 3, Part III, lines 1a and 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 6b. Also camplete this part to provide	irt IV, lines 1b and 2t	b; Part V,
PART X - FIN 48 FOOTNOTE		
THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROV	ISIONS OF INT	CERNAL
REVENUE CODE SECTION 501(C)(3). ACCORDINGLY, NO PROVISION FOR INC	OME TAXES IS	
INCLUDED IN THE ACCOMPANYING FINANCIAL STATEMENTS. THE ASSOCIATION		
FINANCIAL ACCOUNTING STANDARDS BOARD ACCOUNTING STANDARDS CODIFICA		
GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME T		
AN ENTITY'S FINANCIAL STATEMENTS. THIS GUIDANCE PRESCRIBES A MINI		
THRESHOLD THAT A TAX POSITION MUST MEET BEFORE A FINANCIAL STATEME		
	Schedule D (Forn	n 990) 2012

Schedule D (Form 990) 2012 TENNESSEE ASSOCIATION FOR THE EDUCATION Part XIII Supplemental Information (continued)	23-7037075	Page !
PART X - FIN 48 FOOTNOTE (CONTINUED)		
RECOGNIZED. THE MINIMUM THRESHOLD IS DEFINED AS A TAX POSITION	THAT IS MORE LIK	 Crt v
THAN NOT TO BE SUSTAINED UPON EXAMINATION BY THE APPLICABLE TAX	ING AUTHORITY	
INCLUDING RESOLUTION OF ANY RELATED APPEALS OR LITIGATION PROCES	SSES, BASED ON TH	 IR
TECHNICAL MERITS OF THE POSITION. THE TAX BENEFIT TO BE RECOGNI	IZED IS MEASURED	 AS
THE LARGEST AMOUNT OF BENEFIT THAT IS GREATER THAN FIFTY PERCENT	LIKELY OF BEING	;==
REALIZED UPON ULTIMATE SETTLEMENT. THE ASSOCIATION HAS NO TAX F	PENALTIES OR INTE	REST
REPORTED IN THE ACCOMPANYING FINANCIAL STATEMENTS. TAX YEARS TH	AT REMAIN OPEN FO	 OR
EXAMINATION INCLUDE THE YEARS ENDED DECEMBER 31, 2009 THROUGH DE	CEMBER 31, 2012.	
THE ASSOCIATION HAD NO UNCERTAIN TAX POSITIONS AT DECEMBER 31, 2	012	
	· · · · · · - · · · · · · · ·	
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	·	
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<u> </u>		

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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 2012

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Name of the organization TENNESSEE ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN, INC. Employer Identification number 23-7037075 990 PART VI-B LINE 15A - COMPENSATION THE ORGANIZATION DOES NOT EMPLOY A CEO/EXECUTIVE DIRECTOR. HOWEVER, THERE IS A PERSONNEL COMMITTEE THAT REVIEWS THE PERFORMANCE OF THE OFFICE MANAGER AND THEY MAKE RECOMMENDATIONS TO THE EXECUTIVE BOARD AND THEN THE FULL BOARD. FORM 990, PART VI, LINE 1A - EXPLANATION OF DELEGATED BROAD AUTHORITY TO COMMITTEE THE EXECUTIVE COMMITTEE HAS SOME DELEGATED AUTHORITY, AND WE USE THE MOST CURRENT EDITION OF ROBERT'S RULES OF ORDER AS THE PARLIAMENTARY AUTHORITY OF THE ASSOCIATION. VOTES ON FINANCIAL MATTERS MUST BE APPROVED BY THE ENTIRE BOARD AND BY-LAW CHANGES MUST BE APPROVED BY THE MEMBERSHIP FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES AND PROCEDURES WERE MGED TO INCLUDE AN ELECTED POSITION OF FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER THE ORGANIZATION HAS MEMBERS THAT PAY MEMBERSHIP DUES AND HAVE THE ABILITY TO VOTE ON GOVERNANCE ISSUES OF THE ORGANIZATION. FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY THE MEMBERSHIP VOTES FOR ALL EXECUTIVE BOARD OFFICERS: PRESIDENT, VICE PRESIDENT VICE PRESIDENT-ELECT, SECRETARY, TREASURER, SECA REP, NAEYC REP, AND NOMINATING CHAIRS FOR EAST, MIDDLE, AND WEST TN. FORM 990, PART VI, LINE 7B - DECISIONS OF GOVERNING BODY APPROVAL BY MEMBERS OR SHAREHOLDERS CHANGES TO BY-LAWS AND ELECTING OFFICERS ARE SUBJECT TO THE APPROVAL OF THE MEMBERSHIP MUST BE CURRENT BEFORE VOTING IS PERMITTED MEMBERSHIP.

Schedule 0 (Form 990 or 990-EZ) 2012	Page 2
Name of the organization TENNESSEE ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN, INC.	Employer Identification number 23-7037075
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
THE 990 IS FORMALLY REVIEWED BY THE FINANCE AND EXECUTIVE COMMI	TTEE. THE 990 IS SENT
TO THE ENTIRE BOARD FOR APPROVAL PRIOR TO FILING.	
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEM	ENT OF CONFLICTS
ALL BOARD MEMBERS ARE REQUIRED TO ANNUALLY SIGN THE CONFLICT OF	INTEREST POLICY, AND
IF A SITUATION IS IDENTIFIED, WE WILL ADDRESS THIS ISSUE WITH T	HE EXECUTIVE BOARD.
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	AILABLE
THE DOCUMENTS ARE MADE AVAILABLE UPON REQUEST AND MADE AVAILABL	E TO ALL BOARD
MEMBERS.	
, ,	
PUBLIC COPY	<u></u>
PU-	
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	<b></b>