EXTENDED TO NOVEMBER 15, 2016

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047 Open to Public Inspection

| <u>A F</u> | or the | 2015 calendar year, or tax year beginning and | ending | | | | |
|-------------------------|---------------------------------------|--|---------------------|---------------------------------|-----------------------------|--|--|
| Вс | heck if pplicable | TENNESSEE ASSOCIATION FOR THE EDUCATI | ON | D Employer identific | cation number | | |
| | Addres change | of Young Children, INC. | | | | | |
| | Name change | | | 23-7 | 037075 | | |
| | Initial return Final return/ | | Room/suite | E Telephone number 615-279-0111 | | | |
| - | termin- ated | | G Gross receipts \$ | 140,666. | | | |
| | Amend return | | | H(a) Is this a group re | eturn | | |
| | Applica | F Name and address of principal officer: CONNIE CASHA | | for subordinates | | | |
| | pendin | SAME AS C ABOVE | | H(b) Are all subordinates in | ocluded? Yes No | | |
| II | ax-exe | mpt status: X 501(c)(3) | or 527 | | list. (see instructions) | | |
| | | e: ► WWW.TAEYC.ORG | | H(c) Group exemptio | n number 🕨 | | |
| K F | orm of | organization: X Corporation Trust Association Other | L Year | of formation: 1954 N | State of legal domicile: TN | | |
| Pa | | Summary | | | | | |
| | 1 | Briefly describe the organization's mission or most significant activities: ${	t TAEY}$ | C EXIS | TS TO PROVII | DE MEMBERS | | |
| Activities & Governance |] | WITH PROFESSIONAL DEVELOPMENT OPPORTUNITI | ES AND | TO ADVOCAT | E FOR BEST | | |
| na | 2 | Check this box 🕨 🔲 if the organization discontinued its operations or dispos | ed of more | than 25% of its net ass | sets. | | |
| Ş. | 3 1 | Number of voting members of the governing body (Part VI, line 1a) | | 3 | 42 | | |
| õ | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | •••• | 4 | 42 | | |
| φ. () | 5 | Fotal number of individuals employed in calendar year 2015 (Part V, line 2a) | | 5 | <u>1</u> | | |
| itie | 6 | Total number of volunteers (estimate if necessary) | | 6 | 80 | | |
| SĘ. | | Total unrelated business revenue from Part VIII, column (C), line 12 | | | 0. | | |
| 4 | 1 | Net unrelated business taxable income from Form 990-T, line 34 | | | 0. | | |
| | | | | Prior Year | Current Year | | |
| 4. | 8 | Contributions and grants (Part VIII, line 1h) | | 12,319. | 9,047. | | |
| J. | 1 | Program service revenue (Part VIII, line 2g) | | 110,557. | 128,243. | | |
| Revenue | t | nvestment income (Part VIII, column (A), lines 3, 4, and 7d) | | 122. | 66. | | |
| ď | | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 3,808. | 3,310. | | |
| | E . | Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 126,806. | 140,666. | | |
| | | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | | 0. | 0. | | |
| | 1 | Benefits paid to or for members (Part IX, column (A), line 4) | | 0. | 0. | | |
| ιΔ | 4- 1 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 24,091. | 23,010. | | |
| Expenses | 16a I | Professional fundraising fees (Part IX, column (A), line 11e) | | 0. | 0. | | |
| per | Ь | Fotal fundraising expenses (Part IX, column (D), line 25) | 0. | | | | |
| Ä | 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 116,839. | 107,855. | | |
| | ı | Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | | 140,930. | 130,865. | | |
| | | Revenue less expenses. Subtract line 18 from line 12 | | -14,124. | 9,801. | | |
| P. S. | | | Be | ginning of Current Year | End of Year | | |
| Net Assets or | 20 | Fotal assets (Part X, line 16) | | 248,771. | 270,507. | | |
| Ass | 21 | Total liabilities (Part X, line 26) | | 32,242. | 44,177. | | |
| Net E | 22 | Net assets or fund balances. Subtract line 21 from line 20 | | 216,529. | 226,330. | | |
| | | Signature Block | | | | | |
| Unde | er pena | ties of perjury, I declare that I have examined this return, including accompanying schedules | and stateme | ents, and to the best of my | knowledge and belief, it is | | |
| | | , and complete. Declaration of preparer (other than officer) is based on all information of wh | | | | | |
| | | | | | | | |
| Sigi | n l | Signature of officer | | Date | • / | | |
| Her | - 1 | CONNIE CASHA, PRESIDENT | oho | - 10-6-1 | <u> </u> | | |
| | | Type or print name and title | | | | | |
| | | Print/Type preparer's name Preparer's signature | | Date Check | X PTIN | | |
| Paid | 1 | Print/Type preparer's name SARA G. MOON Preparer's signature Aug. Moon | CPA | 9.16-16 B self-employ | | | |
| | arer | Firm's name FRASIER, DEAN & HOWARD, PLLC | | Firm's EIN ▶ | 62-1073578 | | |
| - | Only | Firm's address 3310 WEST END AVE STE 550 | | | | | |
| | - | NASHVILLE, TN 37203 | | Phone no. 61 | 5-383-6592 | | |
| May | the IF | S discuss this return with the preparer shown above? (see instructions) | | | X Yes No | | |

TENNESSEE ASSOCIATION FOR THE EDUCATION 23-7037075 OF YOUNG CHILDREN, INC. Form 990 (2015) Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: TAEYC EXISTS TO PROVIDE MEMBERS WITH PROFESSIONAL DEVELOPMENT OPPORTUNITIES AND TO ADVOCATE FOR BEST PRACTICE IN THE CARE, DEVELOPMENT, AND EDUCATION OF TENNESSEE'S YOUNG CHILDREN. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 128,243. 80,407. including grants of \$) (Revenue \$) (Expenses \$ ANNUAL CONFERENCE - TO PROVIDE ITS MEMBERS WITH PROFESSIONAL DEVELOPMENT OPPORTUNITIES AND TO ADVOCATE FOR BEST PRACTICE IN THE CARE, DEVELOPMENT, AND EDUCATION OF TENNESSEE'S YOUNG CHILDREN. ANNUAL CONFERENCE IS A 3 DAY CONFERENCE AND WAS ATTENDED BY OVER 500 EARLY CHILDHOOD PROFESSIONALS THIS PAST YEAR. EACH PARTICIPANT WAS GIVEN THE OPPORTUNITY TO ATTEND VARIOUS WORKSHOPS/SEMINARS DEALING WITH ALL ASPECTS OF CHILD DEVELOPMENT AND EDUCATION OVER THE 3 DAY SEMINAR. (Code: _____) (Expenses \$ ______ including grants of \$ ______) (Revenue \$ ______ Other program services (Describe in Schedule O.)) (Revenue \$ including grants of \$

80,407.

Form 990 (2015)

Total program service expenses

| | TENNESSEE ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN, INC. 23-7037 | 1075 | О | age 3 |
|------|---|------|--------------|----------------|
| Form | 330 (2015) | 073 | P | age o |
| Par | t IV Checklist of Required Schedules | | 1 | l |
| | | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | 3,7 | ĺ |
| | If "Yes," complete Schedule A | 1 | X | ├ |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | X | ļ |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | - | | l |
| | public office? If "Yes," complete Schedule C, Part I | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | | | İ |
| - | during the tax year? If "Yes," complete Schedule C, Part II | 4 | X | |
| 5 | 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 | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | | |
| v | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | |
| 7 | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | Х |
| _ | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | | | |
| 8 | · · · · · · · · · · · · · · · · · · · | 8 | | x |
| _ | Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for | | <u> </u> | |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodial for | | | 1 |
| | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? | 9 | | x |
| | If "Yes," complete Schedule D, Part IV | ٠ | | |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | 10 | 1 | х |
| | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | 2/2 V | 1. |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X | | | |
| | as applicable. | 884 | paragraph | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | X |
| | Part VI | 11a | | A |
| b | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total | | | ,, |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | <u> </u> | X |
| 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 D, Part VIII | 11c | ļ | X |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in | ļ | 1 | l |
| | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | X |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | X | <u> </u> |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| - | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | X | <u> </u> |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | 1 | | |
| 124 | Schedule D. Parts XI and XII | 12a | | X |
| h | Was the organization included in consolidated, independent audited financial statements for the tax year? | 1 | | |
| | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | T | X |
| 14a | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | | | |
| D | 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 | 14b | | X |
| | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any | | | |
| 15 | Life the organization report on Part IA, column (A), line 3, more than \$5,000 or grains or other decisions to 5. 10. may | 15 | | Х |
| | foreign organization? If "Yes," complete Schedule F, Parts II and IV | | 1 | 1 |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | 16 | | x |
| | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 10 | 1 | † " |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | 4-7 | | x |
| | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | +- | 1 |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | x |
| | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | +* |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | | x |
| | complete Schedule G. Part III | 1 19 | 000 | /2015 |

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| | [continued] | | | _ |
|-----|---|----------|------------|-----------|
| | | | Yes | No X |
| | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | |
| | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | <u> </u> |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | | х |
| | domestic government 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 or other assistance to or for domestic individuals on | | | х |
| | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | <u> </u> |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current | | | |
| | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | x |
| | Schedule J | 23 | | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | | |
| | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | v |
| | Schedule K. If "No", go to line 25a | 24a | | X |
| | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| C | 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 | | |
| 25a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | | | 77 |
| | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | X |
| þ | is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | | | |
| | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | l | | 3.7 |
| | Schedule L, Part I | 25b | | X |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or | İ | | |
| | former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," | | | 7.7 |
| | complete Schedule L, Part II | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial | | | |
| | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member | | | 7.7 |
| | of any of these persons? If "Yes," complete Schedule L, Part III | 27 | sessessit. | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | | | |
| | instructions for applicable filing thresholds, conditions, and exceptions): | 10000 | de la | v |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | -4- |
| C | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | | | 47 |
| | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | <u>X</u> |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | 7,7 |
| | contributions? If "Yes," complete Schedule M | 30 | | <u> X</u> |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | | | 47 |
| | If "Yes," complete Schedule N, Part I | 31 | | <u> </u> |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | 1 | | 4,5 |
| | Schedule N, Part II | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | ₹7 |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | 77 |
| | Part V, line 1 | 34 | | X |
| | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | <u> </u> |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | | | ₹7" |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | - V |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | X |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | | v | |
| | Note. All Form 990 filers are required to complete Schedule O | 38 | 990 | (2015) |
| | | rorm | 220 | (∠U I⊃) |

Form 990 (2015)

OF YOUNG CHILDREN, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

| ı aı | Check if Schedule O contains a response or note to any line in this Part V | | | | | |
|------|--|-----------|---|----------|-----------------------|--------------|
| | Officer in Schedule O contains a response of note to any line in the second | | *************************************** | | Yes | No |
| | The state of the s | 1a | 7 | 1.203 | | |
| | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1b | 0 | | 55 - V2 56 - 140) | |
| þ | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and re | | le gaming | X NUMBER | 10 | |
| С | | portabl | o garmig | 1c | X | 6803/26/03/5 |
| _ | (gambling) winnings to prize winners? | ï | | | | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | 2a | 1 | 10000 | | |
| | filed for the calendar year ending with or within the year covered by this return | | | 2b | Х | ESCAPONA- |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax return | no: | | | | 1,335 |
| _ | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions | | | 3a | 100041040491 | X |
| | | | | 3b | | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule of the state of | uthorit | • | -0.5 | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other a | ccount | 12 | 4a | j | X |
| | financial account in a foreign country (such as a bank account, securities account, or other financial account, or | ccoam | / ¹ | 100 | | |
| b | If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Actions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Actions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Actions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Actions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Actions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Actions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for Financial Act | counts | s (FBAR) | | | |
| _ | See instructions for filling requirements for Findelin Forms 114, Report of Foreign bank and I mandra Action in the second services of any time during the tay year? | | | 5a | CONT. CATALOGUES AND | X |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | ********* | | 5b | | X |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction file Form 2006 T2 | | | 5c | | |
| C | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | -00 | | |
| 6a | any contributions that were not tax deductible as charitable contributions? | | | 6a | | Х |
| | any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions. | | | <u> </u> | | |
| b | | J113 O1 ; | giito | 6b | | |
| | were not tax deductible? | ••••• | | | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser | vices or | ovided to the payor? | 7a | 300,000 | X |
| a | · · · · · · | | | 7b | | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | | | | | |
| C | to file Form 8282? | | | 7c | | Х |
| | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | •••• | 300.00 | | 100 |
| | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or | | ? | 7e | | X |
| e | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra | | - | 7f | | X |
| f | If the organization received a contribution of qualified intellectual property, did the organization file Fo | rm 889 | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 7g | | |
| g | the state of the s | tion file | a Form 1098-C? | 7h | | |
| h | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained | by the | • | | | |
| 8 | sponsoring organizations maintaining donor advised rands. See a devise a sponsoring organization have excess business holdings at any time during the year? | | | 8 | | |
| ^ | Sponsoring organizations maintaining donor advised funds. | | | | | |
| 9 | Did the sponsoring organization make any taxable distributions under section 4966? | | | 9a | | |
| a | | .,,., | | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | ••••• | | | | |
| | | 10a | <u>-</u> | | | |
| | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | | | ales. | 200 |
| 11 | Section 501(c)(12) organizations. Enter: | | | | | 100 |
| ''a | Gross income from members or shareholders | 11a | | | | |
| | Gross income from other sources (Do not net amounts due or paid to other sources against | | | | | |
| U | amounts due or received from them.) | 11b | | | | |
| 122 | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form | 1041? |) | 12a | | |
| h | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | | | 100 | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | |
| | Is the organization licensed to issue qualified health plans in more than one state? | | | 13a | | |
| 4 | Note. See the instructions for additional information the organization must report on Schedule O. | | | No. | | Messi |
| h | Enter the amount of reserves the organization is required to maintain by the states in which the | | | | | |
| D | organization is licensed to issue qualified health plans | 13b | | | | |
| _ | Enter the amount of reserves on hand | 13c | | | i)) (3) | |
| 142 | | | *************************************** | 14a | <u> </u> | X |
| h | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule | | | 14b | | |
| | | | | Forn | 990 | (2015) |

OF YOUNG CHILDREN, INC.

23-7037075

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 42 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X 7a more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X 7b persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a a The governing body? X 8b b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes." provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Х 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a 12a Did the organization have a written conflict of interest policy? If "No." go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this was done X 13 Did the organization have a written whistleblower policy? 13 14 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a a The organization's CEO, Executive Director, or top management official X 15b b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ►TN Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Other (explain in Schedule O) Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: > _ MARILYN MANNO - 615-646-4663 TN 37221 1124 SILVERLEAF TER. , NASHVILLE,

EDUCATION

TENNESSEE ASSOCIATION FOR THE OF YOUNG CHILDREN, INC.

23-7037075 Form 990 (2015) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0 in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

| (A) | (B) | (C) | | | (D) | (E) | (F) | | | |
|----------------------------|------------------|---|---------------------------------|----------|--------------|---------------------------------|--------------|-----------------|-----------------|-----------------------|
| Name and Title | Average | Position (do not check more than one | | | | | Reportable | Reportable | Estimated | |
| name and me | hours per | box, | unles | ss per | son i | s both | an | compensation | compensation | amount of |
| | week | | officer and a director/trustee) | | tee) | from | from related | other | | |
| | (list any | ector | | | | | | the | organizations | compensation |
| | hours for | or dir | q. | | | ated | | organization | (W-2/1099-MISC) | from the organization |
| | related | stee | ruste | | a | bens | | (W-2/1099-MISC) | | and related |
| | organizations | al tru | ona! | | gloye | E 89 | | | | organizations |
| | below | individual trustee or director | nstitutional trustee | Officer | Key employee | Highest compensated employee | Former | | | organization. |
| (A) | iine) 3 • 0 0 | 흈 | = | 0 | 3 | Ŧ 5 | <u></u> | | | |
| (1) CHERI LINDSLEY | 3.00 | X | | Х | İ | | | 0. | 0. | 0. |
| PRESIDENT | 3.00 | 7 | \vdash | | | \vdash | - | | | |
| (2) CONNIE CASHA | 3.00 | X | | X | | | | 0. | 0. | 0. |
| PRESIDENT ELECT | 3.00 | 7. | | 41 | | ┢ | \vdash | | | |
| (3) CANDYEE GOODE | 3.00 | X | | х | | | | 0. | 0. | 0. |
| VICE PRES (4) CORYE NELSON | 3.00 | 1 | | | - | - | _ | | | |
| (4) CORYE NELSON TREASURER | 3.00 | Х | | х | | | | 0. | 0. | 0. |
| (5) BEVERLY WIGINTON | 3.00 | | - | | - | | | | | |
| SECRETARY | 3.00 | х | | х | | | | 0. | 0. | 0. |
| (6) LISA MADDOX-VINSON | 3.00 | | | | | ┢ | | | | |
| SECA REP | | х | | x | | | | 0. | 0. | 0. |
| (7) DEBBIE FERGUSON | 3.00 | | | | | | | | | |
| NAEYC REP | | х | | Х | | | | 0. | 0. | 0. |
| (8) BRENDA LANGSTON | 3.00 | | | | | | | | | |
| CHAIR-EAST | | Х | | Х | | | | 0. | 0. | 0. |
| (9) KATHY ENNIS | 3.00 | | | | | | | | | |
| 2015 NOMINATION | | Х | | X | ŀ | | | 0. | 0. | 0. |
| (10) ELIZABETH WILSON | 3.00 | | | | Γ | Г | | | | _ |
| CHAIR-WEST | | X | | Х | | | | 0. | 0. | 0. |
| (11) CATHY WAGGONER | 3.00 | | | | Ī | | | |] | |
| SECA REP-ELECT | | X | <u> </u> | | | _ | | 0. | 0. | 0. |
| (12) ALICIA NORMAN | 2.00 | | | | ŀ | | 1 | _ | | |
| DIRECTOR | | X | | <u> </u> | | L | ļ | 0. | 0. | 0. |
| (13) MARGARET SCOTT | 2.00 | | | | | | | | | , |
| DIRECTOR | | Х | | | <u> </u> | <u> </u> | | 0. | 0. | 0. |
| (14) JAN KING | 2.00 | | | | | | | | | , |
| DIRECTOR | | Х | ļ | | _ | lacksquare | 1 | 0. | 0. | 0. |
| (15) ROSE CARVER | 2.00 | 1 | | | | | | | _ | , |
| DIRECTOR | | X | <u></u> | | <u> </u> | - | ـــ | 0. | 0. | 0. |
| (16) SANDY GUNTHARP | 2.00 | | | | | | | | | _ |
| DIRECTOR | | X | <u> </u> | _ | <u> </u> | — | ļ | 0. | 0. | 0. |
| (17) ELIZABETH JORDAN | 2.00 | ļ | | | | | | | 0. | 0. |
| DIRECTOR | <u> </u> | X | L. | <u> </u> | _ | | <u> </u> | 0. | <u> </u> | Form 990 (2015) |

| TENNESSE | E ASSOCI | ΤA | OI | N | FO | R | TH | E EDUCATION | | | |
|--|--|--------------------------|----------------------|----------|--------------------------------|------------------------------|-------------|--|---|---------------------|---|
| Form 990 (2015) OF YOUNG | CHILDRE | N, | I | NC | | | | | 23-703 | 3707 <u>5</u> | Page 8 |
| Part VII Section A. Officers, Directors, Trust | tees, Key Emp | loye | es, | and | Hig | ąhes | t C | ompensated Employee | s (continued) | | |
| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | ee or director | not ci | s per | tion nore son i recto | Highest compensated employee | an | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC | cor) or a | (F) Estimated amount of other mpensation from the ganization nd related ganizations |
| 18) SHAVETTE SUMMERS | 2.00 | | | <u> </u> | ×- | | | | | | |
| DIRECTOR | | х | | | | | | 0. | (|). | 0. |
| 19) NINA DUDLEY | 2.00 | | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | (|). | 0. |
| 20) ELAINE PIPER | 2.00 | | | | | | | | | | |
| DIRECTOR | | Х | | | | | | 0. | (|). | 0. |
| 21) KATARI COLEMAN | 2.00 | | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | (|). | 0. |
| 22) KELLY TIVEY | 2.00 | | | | | | | | | | |
| DIRECTOR | | Х | | | | | | 0. | (|). | 0. |
| 23) DIANE NEIGHBORS | 2.00 | | | | | | | | | | _ |
| DIRECTOR | | X | | | | | | 0. | (|). | 0. |
| 24) PHIL ACORD | 2.00 | | | | | | | | | | _ |
| PIRECTOR | | Х | | | | | | 0. | (|). | 0. |
| 25) RHONDA LAIRD | 2.00 | | | | | | | | | | _ |
| PIRECTOR | | X | | | | | | 0. | (|). | 0. |
| 26) JANA CROSBY | 2.00 | | | | | | | _ | _ | | _ |
| DIRECTOR | | Х | | | | | | 0. | |). | 0. |
| 1b Sub-total | | | | | | | | 0. | |). | 0. |
| c Total from continuation sheets to Part VI | , Section A | | | •••• | | | > | 0. | |). | 0. |
| d Total (add lines 1b and 1c) | | | | | | | <u> </u> | 0. | |). | 0. |
| 2 Total number of individuals (including but n | ot limited to th | ose | liste | d ab | ove |) wh | o re | ceived more than \$100,0 | 000 of reportable | | ^ |
| compensation from the organization | | | | | | | | | | | 0 |
| Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for state of the sequence of | uch individual m of reportabl 0,000? If "Yes, accrue compen | e co " co sati | mpe mple on fr | ete S | tion che | and edule unre | oth J fe | ner compensation from the for such individualed organization or individual | ne organization | . 3 | X |
| Section B. Independent Contractors | ORACE CHEMICAL | . u. u | 71 131 | | 7.77.7 | Milani | | | | | |
| Complete this table for your five highest contains the second | mpensated ind | epe | nder | nt co | ntra | acto | s th | nat received more than \$ | 100,000 of compe | nsation 1 | irom |
| the organization. Report compensation for | | | | | | | | | | | |
| (A) Name and business | | | ONE | | | | | (B) Description of s | | | (C) ensation |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | _ | | | | ····· |
| | | | | | | <u>-</u> | _ | | | | |
| | | | | | | | - 1 | | 1 | | |

Total number of independent contractors (including but not limited to those listed above) who received more than 0 \$100,000 of compensation from the organization ▶ 0
SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990
Part VII Section A. Office OF YOUNG CHILDREN, INC. 23-7037075

| Part VII Section A. Officers, Directors, (A) | (B) | | | -{ | C) | | | (D) | (E) | (F) |
|--|----------------|--------------------------------|--|----------|-------------|------------------------------|--------|-----------------|-------------------------------|-----------------|
| Name and title | Average | | | | ition | | | Reportable | Reportable | Estimated |
| | hours | (c | heck | ail | that | app | ly) | compensation | compensation | amount of other |
| | per week | | | | | gy. | | from the | from related organizations | compensation |
| | (list any | ğ | | | | ploye | | organization | (W-2/1099-MISC) | from the |
| | hours for | direc | | | | ma pa | | (W-2/1099-MISC) | (| organization |
| | related | tee o | ustee | | | ensat | | | | and related |
| | organizations | al frus | nai i | | loyee | d es | Ì | | | organizations |
| | below line) | Individual trustee or director | Institutional trustee | Officer | Кеу етрюуее | Highest compensated employee | Former | | | |
| (27) LORI GOFF | 2.00 | | | | | | | | | |
| DIRECTOR | | Х | | | | | | 0. | 0. | 0. |
| (28) JANE BAKER | 2.00 |] | | | | | | | | |
| DIRECTOR | | X | L | <u> </u> | | | | 0. | 0. | 0. |
| (29) MARTHA HOWARD | 2.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (30) STEPHANIE STEPHENS | 2.00 | | ŀ | | | | | | | |
| DIRECTOR | | X | <u>. </u> | <u> </u> | | | | 0. | 0. | 0. |
| (31) CINDY HORNSBY | 2.00 | | | | | | | | · | |
| DIRECTOR | | X | | L | | | | 0. | 0. | 0. |
| (32) GAIL COLLINS | 2.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (33) MARCUS HARRIS | 2.00 | | | | | | | | | |
| DIRECTOR | | Х | | | | | | 0. | 0. | 0. |
| (34) MELISSA FLECK | 2.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (35) SHERRY HARPOLE | 2.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (36) NANCY JAMES | 2.00 | | ĺ | | | | | | | |
| DIRECTOR | | X | | | Ш | | | 0. | 0. | 0. |
| (37) MARY ANN NELSON | 2.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (38) JOYCE BRIDGES | 2.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (39) GAIL CRAWFORD | 2.00 | | | | | | i | İ | _ | _ |
| DIRECTOR | | X | | | Щ | | | 0. | 0. | 0. |
| (40) LIN VENABLE | 2.00 | , | | | İ | | | _ | _ | _ |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (41) JANET COSCARELLI | 2.00 | | | | | | | | _ | _ |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (42) JENNIFER JACKSON | 2.00 | | | | | | | . 1 | _ | _ |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | Ш | | | | | |
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| | 1 | | | | I I | | | 1 | i | |

| Par | Part VIII Statement of Revenue | | | | | | | | | | | |
|--|--------------------------------|---|------------------|---------------------------------------|--|--|---|--|--|--|--|--|
| | | Check if Schedule O contain | ns a response | or note to any lin | e in this Part VIII | (D) | (C) | (D) | | | | |
| | | | | | (A) Total revenue | (B) Related or exempt function revenue | Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 | | | | |
| 6 10 | 1.0 | Federated campaigns | tal | 35 | | | | | | | | |
| ti si | | Membership dues | | | | | | | | | | |
| 9 | | | ······ | | | | | NEW TEXTS AND AND AND AND AND AND AND AND AND AND | | | | |
| Ę,ţŝ | | Related organizations | | | The second of th | | | | | | | |
| 2 5 | ď | Government grants (contribution | | | | | | 100 | | | | |
| Sig | e f | All other contributions, gifts, grants | | · · · · · · · · · · · · · · · · · · · | FY SHEAR SHEET | 9,4800,444,46040 | yled, it forgali | 6.000.000 | | | | |
| 英희 | ' | similar amounts not included above | 1 1 | 9,047. | | | | | | | | |
| G | g | | ., | | grad Copyright | AND COLORS OF SAME | | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | _ | Total. Add lines 1a-1f | | | 9,047. | | | | | | | |
| | - '' | | | Business Code | | | | | | | | |
| 0 | 2 a | TAEYC ANNUAL CON | IFERENC | 611430 | 97,495. | 97,495. | | | | | | |
| Š | b | MEMBERSHIP DUES | | 611430 | 30,748. | 30,748. | | | | | | |
| Ser | c | | | | | | | | | | | |
| u. | d | | | | | | | | | | | |
| Program Service Revenue | e | | | | | | | | | | | |
| Pro | f | All other program service reven | ue | | | | | Access to the Control of the Control | | | | |
| | g | Total. Add lines 2a-2f | | | 128,243. | Legislation (Control of Control | | | | | | |
| | 3 | Investment income (including d | ividends, intere | est, and | | | | ر ا | | | | |
| | | other similar amounts) | | | 66. | | | 66. | | | | |
| | 4 | Income from investment of tax- | exempt bond p | roceeds | | | | | | | | |
| | 5 | Royalties | | 1 | 70 X 50 10 X 50 X 50 X 50 X 50 X 50 X 50 | | 71127 | | | | | |
| | | <u>}</u> | (i) Real | (ii) Personal | | 6.6 9.6 6.6 | allegation beau | 5 PR 685 050 | | | | |
| | 6 a | Gross rents | | | | | | | | | | |
| | b | Less: rental expenses | | | | | | | | | | |
| | c | • | | | | | | | | | | |
| | | Net rental income or (loss) | | | | | | | | | | |
| ļ | 7 a | Gross amount from sales of | (i) Securities | (ii) Other | | | 1000 | | | | | |
| | | assets other than inventory | | <u> </u> | 1981 W. S. S. S. S. | arakonenas e | 100000000000000000000000000000000000000 | All of the second | | | | |
| | b | Less: cost or other basis | | | | | | | | | | |
| | | and sales expenses | | | | | | | | | | |
| | | Gain or (loss) | | > | ALLES PROPERTY OF THE PROPERTY | | | | | | | |
| | | Net gain or (loss) | | | | | | | | | | |
| 9 | 8 a | Gross income from fundraising | | | 8.03 | Same Suppose | 400 C G G | 0.00 | | | | |
| len. | | including \$ contributions reported on line 1 | | | | State State | 0.00 | | | | | |
| Re | | Part IV, line 18 | | | io s | | | | | | | |
| Other Revenue | h | Less: direct expenses | | | | 0.000 | | | | | | |
| ₹ | | Net income or (loss) from fundr | | > | | | | | | | | |
| | 9 2 | Gross income from gaming act | ivities. See | | 862 (B.S. (1) (E.S.) | Park David Co | 100000 | 100000000000000000000000000000000000000 | | | | |
| | | Part IV, line 19 | | · | | | | | | | | |
| | ь | Less: direct expenses | | | | | | | | | | |
| | | Net income or (loss) from gamin | | . <u></u> | | | | | | | | |
| | | Gross sales of inventory, less re | | | | | | | | | | |
| | | and allowances | a | | | 680,55 (5.00,60,60,00) | 46.00.034.05.34 | | | | | |
| | i | Less: cost of goods sold | | · <u> </u> | | | Constitution of the second | | | | | |
| | <u></u> | : Net income or (loss) from sales | | <u> </u> | WASHING CONSTRUCTOR | | | (3) (6) (6) (6) (6) (6) (6) (6) (6) (6) (6 | | | | |
| | <u> </u> | Miscellaneous Revenue |) | Business Code | 3,310. | | | 3,310. | | | | |
| | l | MISCELLANEOUS | | 900099 | 3,310. | | | -,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | |
| | b | | | | | | | | | | | |
| | C | | | | | | | | | | | |
| | 1 | All other revenue | ** | | 3,310. | | | | | | | |
| | l . | Total revenue. See instructions. | | | 140,666. | 128,243. | 0. | | | | | |
| | 12 | Total levenue. See manuchons. | | | <u> </u> | | | Form 990 (2015) | | | | |

23-7037075 Page 10

Form 990 (2015) OF YOUNG CHILDREN, INC.
Part IX | Statement of Functional Expenses

| Sect | ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon | | | mplete column (A). | |
|------|--|-----------------------|------------------------------|-------------------------------------|--|
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | | 1000 (0.000) | |
| | and domestic governments. See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to domestic | İ | | | |
| | individuals. See Part IV, line 22 | | | 0.000 | Paramatan Parama |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and foreign | | | | |
| | individuals. See Part IV, lines 15 and 16 | | | 49 (4 (5)) | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | • | | | |
| | trustees, and key employees | | | | |
| 6 | Compensation not included above, to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | 16 166 | F 300 | |
| 7 | Other salaries and wages | 21,555. | 16,166. | 5,389. | |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | | 4 004 | 254 | |
| 10 | Payroll taxes | 1,455. | 1,091. | 364. | |
| 11 | Fees for services (non-employees): | | | | |
| a | Management | | | | |
| b | Legal | 557. | | 557. | |
| C | Accounting | 11,575. | | 11,575. | |
| d | Lobbying | 5,000. | | 5,000. | |
| ę | Professional fundraising services. See Part IV, line 17 | | | | |
| f | investment management fees | | | | |
| g | Other. (If line 11g amount exceeds 10% of line 25, | | | | |
| | column (A) amount, list line 11g expenses on Sch O.) | 169. | 127. | 42. | |
| 12 | Advertising and promotion | 212. | | 212. | |
| 13 | Office expenses | 1,829. | | 1,829. | |
| 14 | Information technology | 1,145. | | 1,145. | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 2,472. | | 2,472. | |
| 17 | Travel | | | | |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 63,023. | 63,023. | | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | | | | |
| 23 | Insurance | 2,082. | | 2,082. | |
| 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) | \$324XXXXXXX | Service above that the | | |
| | amount, list line 24e expenses on Schedule 0.) | | | | |
| а | PROGRAM/EVENT EXPENSE | 12,386. | | 12,386. | |
| b | BOARD MEETING EXPENSE | 4,856. | | 4,856. | |
| c | PROFESSIONAL DEVELOPMEN | 1,760. | | 1,760. | |
| ď | MISCELLANEOUS | 789. | | 789. | |
| e | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 130,865. | 80,407. | 50,458. | 0. |
| 26 | Joint costs. Complete this line only if the organization | | | | |
| | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation. | | ; | | |
| | Check here if following SOP 98-2 (ASC 958-720) | | | | |
| | 1 11 (Oliothing Oot: 30-2 (NOO 300-120) | | | LL | Form 990 (2015) |

| Par | t X | Balance Sheet | | | |
|-----------------------------|-----|--|--------------------------|----------|----------------------------------|
| | · | Check if Schedule O contains a response or note to any line in this Part X | 1 | | |
| | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | 193,083. | 1 | 218,441. |
| | 2 | Savings and temporary cash investments | 38,638. | 2 | 38,754. |
| | 3 | Pledges and grants receivable, net | | 3_ | |
| | 4 | Accounts receivable, net | 795. | 4 | 25. |
| | 5 | Loans and other receivables from current and former officers, directors, | | | |
| | | trustees, key employees, and highest compensated employees. Complete | | Natura. | |
| | | Part II of Schedule L | | 5 | Section (April National Research |
| l | 6 | Loans and other receivables from other disqualified persons (as defined under | | | |
| | | section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing | | | |
| | | employers and sponsoring organizations of section 501(c)(9) voluntary | | | |
| S | | employees' beneficiary organizations (see instr). Complete Part II of Sch L | | 6 | |
| Assets | 7 | Notes and loans receivable, net | | 7 | |
| & | 8 | Inventories for sale or use | | 8 | 1 116 |
| | 9 | Prepaid expenses and deferred charges | 238. | 9 | 1,116. |
| | 10a | Land, buildings, and equipment: cost or other | | | |
| | | basis. Complete Part VI of Schedule D 10a | | | |
| | b | Less: accumulated depreciation10b | | 10c | |
| | 11 | Investments - publicly traded securities | | 11 | |
| | 12 | Investments - other securities. See Part IV, line 11 | | 12 | |
| | 13 | Investments - program-related. See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | 16 017 | 14 | 12,171. |
| | 15 | Other assets. See Part IV, line 11 | 16,017. | 15 | 270,507. |
| | 16 | Total assets, Add lines 1 through 15 (must equal line 34) | 248,771. | | 32,006. |
| | 17 | Accounts payable and accrued expenses | 16,225. | 17 | 32,000. |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | | 19 20 | |
| | 20 | Tax-exempt bond liabilities | | 21 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | | |
| es | 22 | Loans and other payables to current and former officers, directors, trustees, | | | |
| ili: | | key employees, highest compensated employees, and disqualified persons. | | 22 | |
| Liabilities | | Complete Part II of Schedule L | | 23 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | 24 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third | | <u> </u> | |
| | 25 | parties, and other liabilities not included on lines 17-24). Complete Part X of | | | |
| | | Schedule D | 16,017. | 25 | 12,171. |
| | 26 | Total liabilities. Add lines 17 through 25 | 32,242. | 26 | 44,177. |
| | 20 | Organizations that follow SFAS 117 (ASC 958), check here X and | | 38.00 | |
| | ĺ | complete lines 27 through 29, and lines 33 and 34. | | | |
| Ses | 27 | Unrestricted net assets | 214,951. | 27 | 225,264. |
| lan | 28 | Temporarily restricted net assets | 1,578. | 28 | 1,066. |
| Ba | 29 | Permanently restricted net assets | | 29 | |
| nug | | Organizations that do not follow SFAS 117 (ASC 958), check here | | 48 | |
| ᄕ | | and complete lines 30 through 34. | | | |
| Net Assets or Fund Balances | 30 | Capital stock or trust principal, or current funds | | 30 | |
| SSe | 31 | Paid in or capital surplus, or land, building, or equipment fund | | 31 | |
| χĄ | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | 206 220 |
| Z | 33 | Total net assets or fund balances | 216,529. | 33 | 226,330. |
| | 34 | Total liabilities and net assets/fund balances | 248,771. | 34 | 270,507. |
| | | | | | Form 990 (2015) |

EDUCATION TENNESSEE ASSOCIATION FOR THE

| Form 990 (2015) OF YOUNG CHILDREN, INC. | 23-70 | 3/0/5 | Pag | e 12 |
|---|-------------|-------------|--------------|-------------|
| Part XI Reconciliation of Net Assets | | | | |
| Check if Schedule O contains a response or note to any line in this Part XI | | | <u></u> . | |
| | | 4.40 | ~ ~ | - |
| 1 Total revenue (must equal Part VIII, column (A), line 12) | 1 | 140 | | |
| Total expenses (must equal Part IX, column (A), line 25) | 2 | 130 | | |
| 3 Revenue less expenses. Subtract line 2 from line 1 | 3 | | ,80 | |
| 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 216 | ,52 | <u> 19.</u> |
| 5 Net unrealized gains (losses) on investments | 5 | | ··· | |
| 6 Donated services and use of facilities | 6 | | | |
| 7 Investment expenses | 7 | | | |
| 8 Prior period adjustments | 8 | | | |
| 9 Other changes in net assets or fund balances (explain in Schedule O) | 9 | | | 0. |
| Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, | | 000 | • | |
| column (B)) | 10 | 226 | ,33 | <u> </u> |
| Part XIII Financial Statements and Reporting | | | | |
| Check if Schedule O contains a response or note to any line in this Part XII | | | | <u></u> |
| | | 43854/GA 12 | Yes | No |
| 1 Accounting method used to prepare the Form 990: Cash X Accrual Other | | | | |
| If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule | O. | 170000 | | AUSTON S |
| 2a Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | X | 2000 |
| If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed | on a | | | |
| separate basis, consolidated basis, or both: | | | | |
| X Separate basis Consolidated basis Both consolidated and separate basis | | | 29,500 | 77 |
| b Were the organization's financial statements audited by an independent accountant? | | 2b | 25-200-200-0 | X |
| If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate | basis, | | | |
| consolidated basis, or both: | | | | |
| 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 oversight of the | e audit, | 100000 | Mails | |
| review, or compilation of its financial statements and selection of an independent accountant? | | 2c | X REALERS A | and makes |
| If the organization changed either its oversight process or selection process during the tax year, explain in Sche | dule O. | | | |
| 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin | gle Audit | 2000 | | |
| Act and OMB Circular A-133? | | 3a | | X |
| b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required | red audit | | | |
| or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | 3b | 200 // | |

Form 990 (2015)

SCHEDULE A

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public

Inspection

Employer identification number TENNESSEE ASSOCIATION FOR THE EDUCATION Name of the organization 23-7037075 OF YOUNG CHILDREN, INC. Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990 EZ).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in 7 section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (vi) Amount of (v) Amount of monetary (iii) Type of organization (iv) Is the organization (ii) EIN (i) Name of supported listed in your other support (see support (see (described on lines 1-9 organization governing document? above (see instructions)) instructions) instructions) Yes No

Schedule A (Form 990 or 990-EZ) 2015 OF YOUNG CHILDREN, INC.

23-7037075 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (e) 2015 (f) Total (c) 2013 (d) 2014 Calendar year (or fiscal year beginning in) 🕨 (a) 2011 (b) 2012 1 Gifts, grants, contributions, and membership fees received. (Do not 396,233. 9,047. 46,675. 114,515. 213,677. 12,319. include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 12,319. 9.047. 396,233. 114,515. 213,677. 46.675. 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 396,233. 6 Public support. Subtract line 5 from line 4 Section B. Total Support (f) Total (a) 2011 (c) 2013(d) 2014 (e) 2015 (b) 2012 Calendar year (or fiscal year beginning in) 396,233. 9,047. 213,677. 12,319 46.675 114.515 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 66. 1,047. 174. 122. 440. 245. and income from similar sources ... 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 4,011. 3,808. 6.243. 7.423. assets (Explain in Part VI.) 422,075 11 Total support. Add lines 7 through 10 906,445 12 Gross receipts from related activities, etc. (see instructions) 13 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 this box and stop here Section C. Computation of Public Support Percentage 93.88 14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 95.07 15 Public support percentage from 2014 Schedule A, Part II, line 14 16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright X$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

qualify under the tests listed below, please complete Part II.) Section A. Public Support (e) 2015 (f) Total (d) 2014 Calendar year (or fiscal year beginning in) (a) 2011 (b) 2012 (c) 2013 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge ... 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support. (Subtract line 7c from line 6.) Section B. Total Support (f) Total (c) 2013 (d) 2014 (e) 2015 Calendar year (or fiscal year beginning in) (b) 2012 (a) 2011 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 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) organization, check this box and stop here Section C. Computation of Public Support Percentage % 15 15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f) 16 % 16 Public support percentage from 2014 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage % 17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f)) 17 18 18 Investment income percentage from 2014 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2015. 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 b 33 1/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 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, 19a, or 19b, check this box and see instructions

23-7037075 Page 4

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L. (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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| Sche | dule A (Form 990 or 990-EZ) 2015 OF YOUNG CHILDREN, INC. | 23-7037075 | Pa | ge 5 |
|----------|--|---------------------------------------|---------|-------------|
| | rt IV Supporting Organizations (continued) | | | |
| • | | | /es | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) | ionivis s | arto) | |
| | below, the governing body of a supported organization? | 11a | | |
| b | A family member of a person described in (a) above? | 11b | | |
| | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. | 11c | | |
| | tion B. Type I Supporting Organizations | | | |
| | | | /es | No |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to | | | 40.0 |
| | regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the | | | |
| | tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or | | | |
| | controlled the organization's activities. If the organization had more than one supported organization, | | | alkş |
| | describe how the powers to appoint and/or remove directors or trustees were allocated among the supported | | | |
| | organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | GNYME S | tuburani sa |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported | | | |
| | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in | | | |
| | Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, | | 25.5 | |
| | supervised, or controlled the supporting organization. | 2 | | |
| Sec | tion C. Type II Supporting Organizations | | | |
| | | | /es | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors | | | |
| | or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | | |
| | or management of the supporting organization was vested in the same persons that controlled or managed | | | |
| | the supported organization(s). | 1 | 1 | |
| Sec | tion D. All Type III Supporting Organizations | Ι. | . T | |
| | | Separation 3 | /es | No |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the | | | |
| | organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax | | | |
| | year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the | | *** | |
| | organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | 200 |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported | | | |
| | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how | | | |
| | the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a | | | |
| | significant voice in the organization's investment policies and in directing the use of the organization's | | | 131 |
| | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | 3 | | |
| <u> </u> | supported organizations played in this regard. | | | |
| Sec | tion E. Type III Functionally-Integrated Supporting Organizations | · · · · · · · · · · · · · · · · · · · | | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru | uctions): | | |
| a | The organization satisfied the Activities Test. Complete line 2 below. | | | |
| b | The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity | (eas instructions) | | |
| c | | | Yes | No |
| 2 | Activities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of | | | 6.80600 |
| а | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify | | | |
| | | | | |
| | The second of th | 1 | | 31.10 |
| | how the organization was responsive to those supported organizations, and how the organization determined | 2a | | |
| L. | that these activities constituted substantially all of its activities. Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more | 5.23 | | |
| D | of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the | | | |
| | reasons for the organization's position that its supported organization(s) would have engaged in these | | | |
| | activities but for the organization's involvement. | 2b | | |
| 3 | Parent of Supported Organizations. Answer (a) and (b) below. | | | |
| о a | as the state of the state of the state of the officers directors or | | | |
| a | trustees of each of the supported organizations? Provide details in Part VI. | 3a | | |
| h | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | | | |
| N | of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | 3b | | |

| Sche | dule A (Form 990 or 990 EZ) 2015 OF YOUNG CHILDREN, INC. | V1. 11 | 2 | 3-7037075 Page 6 |
|------|--|-------------|-------------------------------|--|
| | Type III Non-Functionally Integrated 509(a)(3) Supportin | g Orga | | |
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifyin | | | uctions. All |
| • | other Type III non-functionally integrated supporting organizations must co | | | |
| Sect | ion A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3 | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or | | | |
| | collection of gross income or for management, conservation, or | | | |
| | maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | | |
| | ion B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see | 1275 | | |
| • | instructions for short tax year or assets held for part of year): | 0.000 | Secretary services | Committee of the Commit |
| a | Average monthly value of securities | 1a | | |
| | Average monthly cash balances | 1b | | |
| | Fair market value of other non-exempt-use assets | 1c | | |
| | Total (add lines 1a, 1b, and 1c) | 1d | | |
| | Discount claimed for blockage or other | | | |
| Ŭ | factors (explain in detail in Part VI): | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 | Subtract line 2 from line 1d | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, | | | |
| • | see instructions). | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by .035 | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| | ion C - Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | | |
| 2 | Enter 85% of line 1 | 2 | | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | | 28 28 28 |
| 4 | Enter greater of line 2 or line 3 | 4 | | |
| 5 | Income tax imposed in prior year | 5 | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to | | | |
| • | emergency temporary reduction (see instructions) | 6 | | |
| 7 | Check here if the current year is the organization's first as a non-functional | lly-integra | ated Type III supporting orga | inization (see |
| • | instructions). | | | |

Schedule A (Form 990 or 990-EZ) 2015

INC. 23-7037075 Page 7 Schedule A (Form 990 or 990-EZ) 2015 OF YOUNG CHILDREN, Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2015 from Section C, line 6 Line 8 amount divided by Line 9 amount 10 (iii) (i) **Underdistributions** Distributable **Excess Distributions** Amount for 2015 Pre-2015 Section E - Distribution Allocations (see instructions) Distributable amount for 2015 from Section C, line 6 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2015: 3 b d From 2013 e From 2014 Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2015 distributable amount i Carryover from 2010 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2015 from Section D, line 7: a Applied to underdistributions of prior years b Applied to 2015 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions). Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions). Excess distributions carryover to 2016. Add lines 3j and 4c. 8 Breakdown of line 7: а b c Excess from 2013 CARLES AND EAST OF THE TRAINING THE d Excess from 2014 e Excess from 2015

| Schedule A i | Form 990 or 990-E2 | 2) 2015 OF Y | OUNG CHI | LDREN, | INC. | | 23-7037075 Page 8 |
|--------------|---|--|---|--|---|---|---|
| Part VI | Supplemental Part IV, Section A, line 1: Part IV, Section | Information. lines 1, 2, 3b, 3c ion D. lines 2 and | Provide the ex , 4b, 4c, 5a, 6, d 3: Part IV Se | planations red 9a, 9b, 9c, 11 ction F. lines 1 | quired by Part II, Ii a, 11b, and 11c; F Ic. 2a. 2b. 3a and | ne 10; Part II, line 17a o Part IV, Section B, lines 3b; Part V, line 1; Part V e this part for any addition | r 17b; Part III, line 12; 1 and 2; Part IV, Section C, /, Section B, line 1e; Part V, |
| | Section D, lines 5, (See instructions.) | 6, and 8; and Pa | rt V, Section E, | lines 2, 5, and | 1 6. Also complete | this part for any addition | mai mormadori. |
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Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and

its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Employer identification number

2015

| | YOUNG CHILDREN, INC. | 23-7037075 | | | | | | |
|--|---|--|--|--|--|--|--|--|
| Organization type (check o | | | | | | | | |
| Filers of: | Section: | | | | | | | |
| Form 990 or 990-EZ | X 501(c)(3) (enter number) organization | | | | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | | | | | | |
| | 527 political organization | | | | | | | |
| Form 990-PF | 501(c)(3) exempt private foundation | | | | | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | | | |
| | 501(c)(3) taxable private foundation | | | | | | | |
| General Rule For an organization | (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling | \$5,000 or more (in money or | | | | | | |
| property) from any Special Rules | one contributor. Complete Parts I and II. See instructions for determining a contributor's | total contributions. | | | | | | |
| Special nules | | | | | | | | |
| sections 509(a)(1) a any one contributo | For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. | | | | | | | |
| year, total contribu | n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from artions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educa ruelty to children or animals. Complete Parts I, II, and III. | | | | | | | |
| year, contributions is checked, enter h purpose. Do not co | described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from an exclusively for religious, charitable, etc., purposes, but no such contributions totaled more rethe total contributions that were received during the year for an exclusively religious, amplete any of the parts unless the General Rule applies to this organization because it is e, etc., contributions totaling \$5,000 or more during the year | re than \$1,000. If this box charitable, etc., received nonexclusively | | | | | | |
| but it must answer "No" on | hat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Forthe filing requirements of Schedule B (Form 990, 990-EZ, or 990-PE) | | | | | | | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization
TENNESSEE ASSOCIATION FOR THE EDUCATION
OF YOUNG CHILDREN, INC.

Employer identification number

| Part I | Contributors (see instructions). Use duplicate copies of Part I if addition | al space is needed. | |
|------------|---|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | MAEYC PO BOX 11060 MEMPHIS, TN 38111 | \$ 5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Occash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Occash Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization
TENNESSEE ASSOCIATION FOR THE EDUCATION
OF YOUNG CHILDREN, INC.

Employer identification number

| Part II | Noncash Property (see instructions). Use duplicate copies of Part | Il if additional space is needed. | |
|------------------------------|---|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |

Name of organization
TENNESSEE ASSOCIATION

Employer identification number

TENNESSEE ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN. INC.

| lo. | | | |
|-------|---|----------------------|---|
| m | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | (e) Transfer of gift | |
| | Transferee's name, address, a | | Relationship of transferor to transferee |
| D. 1 | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| - | | | |
| | | (e) Transfer of gift | |
| | Transferee's name, address, ar | ad ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| | - | | |
| | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | (e) Transfer of gift | |
| | (b) Purpose of gift Transferee's name, address, an | (e) Transfer of gift | (d) Description of how gift is held Relationship of transferor to transferee |
| | | (e) Transfer of gift | |
| | Transferee's name, address, an | (e) Transfer of gift | Relationship of transferor to transferee |
| | Transferee's name, address, an | (e) Transfer of gift | Relationship of transferor to transferee |

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on 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," on 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," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

| • | Section 501(c)(4), (5), or (6) organiza | ations: Complete Part III. | | | |
|-------------|--|---|---|---|-------------------------------|
| Nar | ne of organization TENNESS | SEE ASSOCIATION F | OR THE EDU | CATION Er | nployer identification number |
| | OF YOUN | NG CHILDREN, INC. | • | | 23-7037075 |
| Pé | art I-A Complete if the or | ganization is exempt und | der section 501(c) | or is a section 527 | organization. |
| 2 | Provide a description of the organi Political expenditures Volunteer hours | | | > | * \$ |
| Pε | int B Complete if the or | ganization is exempt und | ler section 501(c) | (3). | |
| - 2. 00-4.2 | Enter the amount of any excise tax | | | | · \$ |
| | Enter the amount of any excise tax | | | | |
| 3 | If the organization incurred a section | on 4955 tax, did it file Form 4720 |) for this year? | *************************************** | Yes No |
| | Was a correction made? | | | | |
| b | olf "Yes," describe in Part IV. | | | | |
| Pa | irt I-C Complete if the org | ganization is exempt und | ler section 501(c), | , except section 501 | (c)(3). |
| 1 | Enter the amount directly expended | d by the filing organization for se | ection 527 exempt fund | tion activities | · \$ |
| 2 | Enter the amount of the filing organ | nization's funds contributed to o | ther organizations for s | ection 527 | |
| | exempt function activities | *************************************** | | | ·\$ |
| 3 | Total exempt function expenditures | s. Add lines 1 and 2. Enter here: | and on Form 1120-POL | •• | |
| | line 17b | *************************************** | *************************************** | > | · \$ |
| 4 | Did the filing organization file Form | 1120-POL for this year? | *************************************** | | Yes No |
| 5 | Enter the names, addresses and en | | | | |
| | made payments. For each organiza | | | | |
| | contributions received that were properties (CAC). If | | | | ate segregated fund or a |
| | political action committee (PAC). If | 1 | | | |
| | (a) Name | (b) Address | (c) EiN | (d) Amount paid from filing organization's funds. If none, enter -0 | contributions received and |
| | | | | | |
| | | | | | |
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| | | | | | |

| Schedule C (Form 990 or 990-EZ) 2015 Part II-A Complete if the or | OF YO | UNG CH | IILDREN, INC | n 501(c)(3) and fil | 23-7 ed Form 5768 (el | 037075 Page 2 ection under |
|--|--|--|---|---|--|--------------------------------|
| section 501(h)). | | | | | , | |
| | | | | n Part IV each affiliated | l group member's name | e, address, EIN, |
| expenses, and sha | | | | | | |
| B Check if the filing organiz | ation check | ed box A a | nd "limited control" pro | ovisions apply. | · · · · · · · · · · · · · · · · · · · | [|
| | nits on Lobb nditures" m | | nditures unts paid or incurred. |) | (a) Filing organization's totals | (b) Affiliated group totals |
| 1a Total lobbying expenditures to inf | luence publ | ic opinion (| grass roots lobbying) | | | |
| b Total lobbying expenditures to inf | fluence a leg | islative bo | dy (direct lobbying) | | | |
| c Total lobbying expenditures (add | | | | | | |
| d Other exempt purpose expenditu | | | | | | |
| e Total exempt purpose expenditur | | | ** | | | |
| f Lobbying nontaxable amount. En | ter the amou | ant from the | | | | |
| If the amount on line 1e, column (a) | | | bying nontaxable am | 7 | | |
| Not over \$500,000 | | | the amount on line 1e. | | | |
| Over \$500,000 but not over \$1,00 | 000 000 | | 00 plus 15% of the exc | | | |
| Over \$1,000,000 but not over \$1, | | | 00 plus 10% of the exc | | | |
| Over \$1,500,000 but not over \$17 | | | 00 plus 5% of the exce | | | |
| Over \$17,000,000 | ,000,000 | \$1,000, | | 33 Over \$1,000,000. | | |
| | | Ψ1,000, | 000, | | | |
| g Grassroots nontaxable amount (er | ntor 25% of | line 16 | | | | |
| h Subtract line 1g from line 1a. If ze | | | *************************************** | | | |
| i Subtract line 1f from line 1c. If zer | | | | | | |
| | | | | | | |
| j If there is an amount other than ze reporting section 4911 tax for this | | | - | | Г | ¬., -,. |
| reporting section 4911 tax for this | | | nanina Davie d Hedeu | | L | Yes No |
| (Some organizations t | hat made a | section 5 | eraging Period Under 01(h) election do not l ate instructions for lin | nave to complete all o | of the five columns be | low. |
| | Lobb | ying Expe | nditures During 4-Yea | r Averaging Period | | |
| Calendar year (or fiscal year beginning in) | (a) 2 | 012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) Total |
| 2a Lobbying nontaxable amount | | | | | | |
| b Lobbying ceiling amount | 10 (10 (10 (10 (10 (10 (10 (10 (10 (10 (| | | | | |
| (150% of line 2a, column(e)) | | | | Ambery Cons | | |
| | CONTRACTOR CONTRACTOR | *************************************** | 1 | | | |
| c Total lobbying expenditures | | | | | | |
| and any any any any any any any any any any | | | | | | |
| d Grassroots nontaxable amount |] | ı | | | | |
| e Grassroots ceiling amount | No. of the second | | | Note that the second | | |
| (150% of line 2d, column (e)) | 300 B B | | | | | |
| 3,77 | THE REST NEWSCREEN | A CONTRACTOR OF THE PARTY OF TH | | was 19 Facilities and was transposed to the second transposed to the second | nemon major teriprot program eli filologia tribulta (di Mali | |
| f Grassroots lobbying expenditures | | _ | | | | |

Schedule C (Form 990 or 990-EZ) 2015

23-7037075 Page 3

Schedule C (Form 990 or 990 EZ) 2015 OF YOUNG CHILDREN, INC. 23-70370 Part II-B 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 on lines 1a through 1i below, provide in Part IV a detailed description | (a | 1) | (b) |
|--|---|----------------------------|-------------------|
| of the lobbying activity. | Yes | No | Amount |
| 1 During the year, did the filing organization attempt to influence foreign, national, state or | 2000000 | ent i e de la | |
| local legislation, including any attempt to influence public opinion on a legislative matter | | | |
| or referendum, through the use of: | | | |
| a Volunteers? | | X | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | Х | |
| c Media advertisements? | | X | |
| d Mailings to members, legislators, or the public? | Х | | |
| e Publications, or published or broadcast statements? | 1 3 | X | |
| f Grants to other organizations for lobbying purposes? | | X | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | |
| i Other activities? | X | | 5,000 |
| j Total. Add lines 1c through 1i | | ta kang di | 5,000 |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | Х | |
| b If "Yes," enter the amount of any tax incurred under section 4912 | | | |
| c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | |
| d. If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | |
| Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). | on 501(c)(5 |), or sec | tion |
| | | | Yes No |
| Were substantially all (90% or more) dues received nondeductible by members? | • | 1 | |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? | ***************** | 2 | |
| 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? | | 3 | |
| Part IIISB Complete if the organization is exempt under section 501(c)(4), section | on 501(c)(5 |), or sec | tion |
| 501(c)(6) and if either (a) ROTU Port III A lines 4 and 0 are answered | JIM - B OD | (la) Danut | HI A I'm A A I'm |
| 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." | "No," OR | (b) Part | III-A, line 3, is |
| answered "Yes." | "No," OR | (b) Part | III-A, line 3, is |
| answered "Yes." 1 Dues, assessments and similar amounts from members | "No," OR | (b) Part | III-A, line 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures) | "No," OR | (b) Part | III-A, line 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polit expenses for which the section 527(f) tax was paid). | "No," OR (| (b) Part | III-A, line 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polit expenses for which the section 527(f) tax was paid). Current year | "No," OR (| (b) Part | III-A, line 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polit expenses for which the section 527(f) tax was paid). Current year b Carryover from last year | "No," OR (| (b) Part | III-A, line 3, is |
| answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total | "No," OR (| (b) Part 1 2a 2b 2c | III-A, line 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | "No," OR | (b) Part 1 2a 2b 2c | III-A, line 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds | "No," OR (| (b) Part 1 2a 2b 2c 3 | III-A, line 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and particular agree to carryover to the reasonable estimate of nondeductible lobbying and particular agree to carryover to the reasonable estimate of nondeductible lobbying and particular agree to carryover to the reasonable estimate of nondeductible lobbying and particular agree to carryover to the reasonable estimate of nondeductible lobbying and particular agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expensions). | "No," OR (| (b) Part 1 2a 2b 2c 3 | III-A, line 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? | "No," OR (| (b) Part 2a 2b 2c 3 | III-A, lîne 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) | "No," OR (| (b) Part 1 2a 2b 2c 3 | III-A, line 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information | "No," OR (| (b) Part 2a 2b 2c 3 4 5 | III-A, lîne 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group) | "No," OR (| (b) Part 2a 2b 2c 3 4 5 | III-A, line 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) | "No," OR (| (b) Part 2a 2b 2c 3 4 5 | III-A, lìne 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group estructions); and Part II-B, line 1. Also, complete this part for any additional information. PART II-B, LINE 1, LOBBYING ACTIVITIES: | "No," OR (ical cess political | (b) Part 1 2a 2b 2c 3 4 5 | III-A, lîne 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group instructions); and Part II-B, line 1. Also, complete this part for any additional information. | "No," OR (ical cess political list); Part II-A | (b) Part 1 2a 2b 2c 3 4 5 | III-A, line 3, is |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded set organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group instructions); and Part II-B, line 1. Also, complete this part for any additional information. PART II-B, LINE 1, LOBBYING ACTIVITIES: THE ORGANIZATION PAYS AN ADVOCATE \$5,000 TO WORK ON BETWEENESSEE'S CHILDREN, KEEPING THE ORGANIZATION INFORMS | "No," OR (ical cess political chalf OF B | (b) Part 1 2a 2b 2c 3 4 5 | MND |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group instructions); and Part II-B, line 1. Also, complete this part for any additional information. PART II-B, LINE 1, LOBBYING ACTIVITIES: | "No," OR (ical cess political chalf OF B | (b) Part 1 2a 2b 2c 3 4 5 | MND |

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

► Attach to Form 990.

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

2015
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

TENNESSEE ASSOCIATION FOR THE

EDUCATION

Employer identification number

| Pa | or 100NG CHILDREN, I | unds or Other Similar Funds or | Accounts. Complete if the |
|----------------|--|--|---|
| | organization answered "Yes" on Form 990, Part IV, line 6 | | oonplate ii tild |
| | | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | | (5) |
| 2 | Aggregate value of contributions to (during year) | | |
| 3 | Aggregate value of grants from (during year) | | |
| 4 | Aggregate value at end of year | | |
| 5 | Did the organization inform all donors and donor advisors in writi | ing that the greate hald in day, and it also | |
| • | | | |
| 6 | are the organization's property, subject to the organization's exc | lusive legal control? | Yes L. No |
| O | Did the organization inform all grantees, donors, and donor advis | | |
| | for charitable purposes and not for the benefit of the donor or do impermissible private benefit? | | |
| Pa | rt II Conservation Easements. Complete if the organi | ration annuared "Voc" on Farm 000 Ded | Yes No |
| | | | IV, line 7. |
| 1 | Purpose(s) of conservation easements held by the organization (c | | |
| | Preservation of land for public use (e.g., recreation or educ | , , | |
| | Protection of natural habitat | Preservation of a certified | I historic structure |
| _ | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization held a qualified | conservation contribution in the form of a | one received |
| | day of the tax year. | | Held at the End of the Tax Year |
| a | The state of the s | | |
| b | | *************************************** | |
| C | Number of conservation easements on a certified historic structu | | . 2c |
| d | Number of conservation easements included in (c) acquired after | | ** |
| | listed in the National Register | | |
| 3 | Number of conservation easements modified, transferred, release | ed, extinguished, or terminated by the orga | anization during the tax |
| | year > | | |
| 4 | Number of states where property subject to conservation easeme | | |
| 5 | Does the organization have a written policy regarding the periodic | - · · · · · · · · · · · · · · · · · · · | |
| | violations, and enforcement of the conservation easements it hold | *************************************** | |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, hand | dling of violations, and enforcing conserva | tion easements during the year |
| | <u> </u> | | |
| 7 | Amount of expenses incurred in monitoring, inspecting, handling | of violations, and enforcing conservation | easements during the year |
| | > \$ | | |
| 8 | Does each conservation easement reported on line 2(d) above sat | | |
| | and section 170(h)(4)(B)(ii)? | ••••• | Yes No |
| 9 | In Part XIII, describe how the organization reports conservation ea | asements in its revenue and expense state | ement, and balance sheet, and |
| | include, if applicable, the text of the footnote to the organization's | s financial statements that describes the o | rganization's accounting for |
| Name of Street | conservation easements. | | |
| Hai | Organizations Maintaining Collections of Art | | Similar Assets. |
| | Complete if the organization answered "Yes" on Form 990 | | |
| 1a | If the organization elected, as permitted under SFAS 116 (ASC 95 | | |
| | historical treasures, or other similar assets held for public exhibition | on, education, or research in furtherance o | of public service, provide, in Part XIII, |
| | the text of the footnote to its financial statements that describes t | these items. | |
| b | If the organization elected, as permitted under SFAS 116 (ASC 95 | 58), to report in its revenue statement and | balance sheet works of art, historical |
| | treasures, or other similar assets held for public exhibition, education | tion, or research in furtherance of public s | ervice, provide the following amounts |
| | relating to these items: | • | • |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | > \$ |
| | ## Assats to build to Essay 200 Box 137 | | X A |
| 2 | If the organization received or held works of art, historical treasure | | |
| | the following amounts required to be reported under SFAS 116 (A | _ | • • |
| а | Revenue included on Form 990, Part VIII, line 1 | | > \$ |
| | Assets included in Form 990, Part X | | > \$ |

| | Schedule D (Form 990) 2015 OF YOUNG CHILDREN, INC. 23-7037075 Page | | | | | | | | Page 2 | | |
|---|---|--|----------------------------|-------------------|-------------|--|-------------|----------------|--|------------|-------------|
| Pa | Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) | | | | | | | | | | |
| 3 | 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items | | | | | | | | | | |
| | (check all that apply): | | | | | | | | | | |
| а | Public exhibition | (| | | change prog | - | | | | | |
| b | | • | e 🔲 (| Other | | | | | | | |
| C | | | | | | | | | | | |
| 4 | | Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. | | | | | | | | | |
| 5 | During the year, did the organization solicit or | | | | | | | | | _ | |
| | to be sold to raise funds rather than to be maintained as part of the organization's collection? | | | | | | | | | | |
| Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or | | | | | | | | | | | |
| reported an amount on Form 990, Part X, line 21. | | | | | | | | | | | |
| 1a | Is the organization an agent, trustee, custodia | | | | | | | | | **** | |
| | on Form 990, Part X? | | | | ••••• | ••••• | | L | Yes | L | No |
| b | If "Yes," explain the arrangement in Part XIII a | and complete the fo | llowing ta | able: | | | _ | | | | |
| | | | | | | | <u> </u> | | Amou | <u>int</u> | |
| C | ~ | | ••••• | | •••••• | | · _ | 1c | | | |
| | Additions during the year | | | | | | | 1d | | | |
| e | V / | | | | | | | le | | | |
| f | Ending balance | | | | | | | 1f | <u></u> | | ٦., |
| | Did the organization include an amount on Fo | | | | | | ity? | ـــ | Yes | 늗 | _ No |
| Pa | If "Yes," explain the arrangement in Part XIII. TO BE COMPLET IN THE PART OF | the organization an | planatior | You" on Eo | provided or | Part XIII | | | ****** | - | |
| State Course | Session = 1120 Total Complete II | (a) Current year | | ior year | 1 | | | roa waara baal | 103.50 | | n hank |
| 1a | Beginning of year balance | (a) Current year | (0) PI | ioi year | (c) Two ye | ais back | (a) 111 | ree years back | (e) FU | ur years | SDACK |
| b | 1 | | | | | | | | | | |
| c | | | | | | | | | | | |
| d | · · · | | | | | | | | | | |
| e | | | | | | | | | | | |
| • | and programs | | | | | | | | | | |
| f | | | | ···· | | | | | | | |
| g | End of year balance | | | | | | | | 1 | | |
| 2 | Provide the estimated percentage of the curre | ent year end balance | e (line 1a. | column (a) |) held as: | ·· · · · · · · · · · · · · · · · · · · | | | - L | | |
| а | | , | % | · // | , | | | | | | |
| b | Permanent endowment | % | · | | | | | | | | |
| ¢ | Temporarily restricted endowment | <u>~~~</u> | | | | | | | | | |
| | The percentages on lines 2a, 2b, and 2c shou | ld equal 100%. | | | | | | | | | |
| За | Are there endowment funds not in the posses | sion of the organiza | tion that | are held an | d administe | ered for the | e orga | nization | | | |
| | by: | | | | | | | | | Yes | No |
| | (i) unrelated organizations | | *********** | | | | | ••••• | 3a(i) | | |
| | (ii) related organizations | | | | | | | | 3a(ii | | |
| | If "Yes" on line 3a(ii), are the related organization | ions listed as require | ed on Sch | nedule R? | | | | | 3b | <u> </u> | <u> </u> |
| 4 | Describe in Part XIII the intended uses of the o | organization's endov | vment fu | nds. | | | | | | | |
| Par | t VI Land, Buildings, and Equipme | | | | | | | | | | |
| | Complete if the organization answered | | | line 11a. Se | ee Form 990 | | | | | | |
| | Description of property | (a) Cost or of | | (b) Cost or other | | (c) Accumulated | | | (d) Book value | | |
| | | | (investment) basis (other) | | other) | depreciation | | | | | |
| | Land | | | | | | | | | | |
| þ | Buildings | - | | | ··· • | | | | | | |
| | Leasehold improvements | | | | | ļ | | | | | |
| | Equipment | | | | | | | | | | |
| | Other | | | | | <u> </u> | | | | | |

| 1. (a) Description of liability | (b) Book value |
|--|--|
| (1) Federal income taxes | |
| (2) AMOUNTS HELD FOR THE BENEFIT OF | |
| (3) CHAPTERS | 12,171. |
| (4) | |
| (5) | |
| (6) | described a second that the second second second second second second second second second second second second |
| (7) | ACHART UNITED TO THE TOTAL OF T |
| (8) | |
| (9) | Mind the Control of t |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) | ▶ 12,171. |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF INTERNAL REVENUE CODE SECTION 501(C)(3). ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS INCLUDED IN THE ACCOMPANYING FINANCIAL STATEMENTS. ASSOCIATION FOLLOWS FINANCIAL ACCOUNTING STANDARDS BOARD ACCOUNTING STANDARDS CODIFICATION ("FASB ASC") GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS. THIS GUIDANCE PRESCRIBES A MINIMUM PROBABILITY THRESHOLD THAT A TAX POSITION MUST MEET BEFORE A FINANCIAL STATEMENT BENEFIT IS RECOGNIZED. THE MINIMUM THRESHOLD IS DEFINED AS A TAX POSITION THAT IS MORE LIKELY THAN NOT TO BE SUSTAINED UPON EXAMINATION BY THE APPLICABLE

TAXING AUTHORITY, INCLUDING RESOLUTION OF ANY RELATED APPEALS OR

TENNESSEE ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN, INC. Schedule D (Form 990) 2015 23-7037075 Page 5 Part XIII | Supplemental Information (continued) LITIGATION PROCESSES, BASED ON THE TECHNICAL MERITS OF THE POSITION. TAX BENEFIT TO BE RECOGNIZED 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 PENALTIES OR INTEREST REPORTED IN THE ACCOMPANYING FINANCIAL STATEMENTS. TAX YEARS THAT REMAIN OPEN FOR EXAMINATION INCLUDE THE YEARS ENDED DECEMBER 31, 2012 THROUGH DECEMBER 31, THE ASSOCIATION HAD NO UNCERTAIN TAX POSITIONS AT DECEMBER 31, 2015.

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.

<u> 2015</u>

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization ► Attach to Form 990 or 990-EZ.

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

Employer identification number

TENNESSEE ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN, INC.

| FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: |
|---|
| PRACTICE IN THE CARE, DEVELOPMENT, AND EDUCATION OF TENNESSEE'S YOUNG |
| CHILDREN. |
| |
| FORM 990, PART VI, SECTION A, LINE 6: |
| LINE 6 EXPLANATION - THE ORGANIZATION HAS MEMBERS THAT PAY MEMBERSHIP DUES |
| AND HAVE THE ABILITY TO VOTE ON GOVERNANCE ISSUES OF THE ORGANIZATION. |
| |
| FORM 990, PART VI, SECTION A, LINE 7A: |
| LINE 7A EXPLANATION - 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, SECTION A, LINE 7B: |
| LINE 7B EXPLANATION - CHANGES TO BY-LAWS AND ELECTING OFFICERS ARE SUBJECT |
| TO THE APPROVAL OF THE MEMBERSHIP. MEMBERSHIP MUST BE CURRENT BEFORE |
| VOTING IS PERMITTED. |
| |
| FORM 990, PART VI, SECTION B, LINE 11: |
| LINE 11A EXPLANATION - THE 990 IS FORMALLY REVIEWED BY THE FINANCE AND |
| EXECUTIVE COMMITTEE. THE 990 IS SENT TO THE ENTIRE BOARD FOR APPROVAL PRIOR |
| TO FILING. |
| |
| FORM 990, PART VI, SECTION B, LINE 12C: |

| Schedule O (Form 990 or 990-EZ) (2015) | Page |
|--|---|
| Name of the organization TENNESSEE ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN, INC. | Employer identification number 23-7037075 |
| THE BEGINNING OF THEIR TWO YEAR TERM. IF A SITUATION IS ID | ENTIFIED, WE WILL |
| ADDRESS THIS ISSUE WITH THE EXECUTIVE BOARD. | |
| | |
| FORM 990, PART VI, SECTION B, LINE 15: | |
| NOT APPLICABLE TO TN ASSOCIATION FOR THE EDUCATION OF YOUN | G CHILDREN, INC. |
| THE ORGANIZATION HAS ONE EMPLOYEE DESCRIBED BELOW. | |
| THE ORGANIZATION EMPLOYS AN OFFICE MANAGER TO HANDLE THE D | AILY OPERATIONS. |
| THERE IS A PERSONNEL COMMITTEE THAT REVIEWS THE PERFORMANC | E OF THE OFFICE |
| MANAGER AND THEY MAKE RECOMMENDATIONS TO THE EXECUTIVE BOA | RD AND THEN THE |
| FULL BOARD. | |
| | |
| FORM 990, PART VI, SECTION C, LINE 19: | |
| THE DOCUMENTS ARE MADE AVAILABLE UPON REQUEST AND MADE AVA | ILABLE TO ALL |
| BOARD MEMBERS. | |
| | |
| 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 EXECUT | IVE BOARD AND |
| THEN THE FULL BOARD. | |
| | |
| | |
| | |
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| | · · · · · · · · · · · · · · · · · · · |
| | |