Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 201**3**

Open to Public

X Yes No

Form 990 (2013)

▶ Do not enter Social Security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service Inspection Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2013 calendar year, or tax year beginning 2013, and ending , 20 C Name of organization TENNESSEE COALITION TO END DOMESTIC AND Check if applicable: D Employer Identification number Address change Doing Business As 58-1632437 Number and street (or P.O. box if mall Is not delivered to street address) Name change Room/suite E Telephone number Initial return INTERNATIONAL PLAZA DRIVE SUITE 425 615.386.9406 City or town, state or province, country, and ZIP or foreign postal code Terminated NASHVILLE, TN 37217 Amended return G Gross receipts \$ 1,964,342 F Name and address of principal officer: KATHY WALSH Application pending H(a) is this a group return for subordinates? ☐ Yes X No 2 INTERNATIONAL PLAZA, SUITE 425, H(b) Are all subordinates included? Tyes X No. 501(c) (X 501(c)(3)) ◀ (Insert no.) ☐ 4947(a)(1) or ☐ 527 If "No," attach a list, (see Instructions) Tax-exempt status: Website: ► TNCOALITION.ORG H(c) Group exemption number ▶ Form of organization: X Corporation Trust Association ☐ Other ▶ L Year of formation: M State of legal domicile: TN Part I Summary Briefly describe the organization's mission or most significant activities: ASSIST DOMESTIC VIOLENCE AND 1 Activities & Governance SEXUAL ASSUALT PROGRAMS, LAW ENFORCEMENT, COURTS, COMMUNITY ORGANIZATIONS AND THE GENERAL PUBLIC: TRAINING AND TECHNICAL ASSISTANCE. Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 19 Number of independent voting members of the governing body (Part VI, line 1b) 4 19 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 19 Total number of volunteers (estimate if necessary) 6 30 Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 7b **Current Year** Я Contributions and grants (Part VIII, line 1h) . 2,186,609 1,946,351 Revenue 9 Program service revenue (Part VIII, line 2g) 16,390 16,212 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 879 470 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 977 309 Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 2,204,855 1,964, 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 996,461 1,090,783 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,230,269 856,224 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 2,226,730 1,947,007 19 Revenue less expenses. Subtract line 18 from line 12 (21,875)17,335 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 539,259 560,681 21 Total liabilities (Part X, line 26) $145,96\overline{6}$ 141,879 22 Net assets or fund balances. Subtract line 21 from line 20 397,380 414,715 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here Type or print name and title Print/Type preparer's name Date Paid Check X if JOHN R. POOLE, CPA 4/30/14 self-employed PO1466592 Preparer Firm's name ► JOHN R. POOLE, CPA Firm's EIN ▶ Use Only Firm's address ▶ 134 NORHTLAKE DRIVE, HENDERSONVILLE, 37075 Phone no.

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

For Paperwork Reduction Act Notice, see the separate instructions.

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	ASSIST DOMESTIC VIOLENCE AND SEXUAL ASSAULT PROGRAMS, LAW ENFORCEMENT, COURTS,
	COMMUNITY ORGANIZATIONS AND THE GENERAL PUBLIC: TRAINING AND TECHNICAL ASSISTANCE.
	OMMONITI OMMINISTRATION AND AND AND AND AND AND AND AND AND AN
	,
2	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.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services? ,
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 1,806,369 including grants of \$) (Revenue \$ 1,838,683)
	PREVENTION OF DOMESTIC VIOLENCE, SEXUAL ASSAULT AND STALKING. TRAINING AND TECHNICAL
	ASSISTANCE TO DOMESTIC VIOLENCE AND SEXUAL ASSAULT PROGRAMS, LAW ENFORCEMENT, COURTS,
	COMMUNITY ORGANIZATIONS AND THE GENERAL PUBLIC. LEGAL ADVICE AND DIRECT
	REPRESENTATION TO IMMIGRANT VICTIMS OF DOMESTIC AND SEXUAL ASSAULT.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
-U	/Oude/ (Expenses #
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)

4d	Other program services (Describe in Schedule O.)
TU	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 1,806,369

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	Ь
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
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			
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	5		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6	<u> </u>	X
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	-	х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	X	
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		х
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		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	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		х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Λ	x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
15	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		X
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Vae" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20h		

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

Part	V Statements Regarding Other IRS Filings and Tax Compliance			•
	Check if Schedule O contains a response or note to any line in this Part V		<u></u>	
_		, S2885-A	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 13	1 2 PR		4.5
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	reportable gaming (gambling) winnings to prize winners?	1c	X	242 d
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			200
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 19			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	X	Patento Cu
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		* //	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	3 2 2 2 2 2 2 2 3 7 7 1	X
b	If "Yes," enter the name of the foreign country:			198
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	379905-166	X
7_	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		X
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1.2		
	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7е		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		No.	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	的物理學	X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		<u>X</u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	:343331	X
0	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			***
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)		26.0	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	E 1848	67 0000
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	4	100	
3 a	Is the organization licensed to issue qualified health plans in more than one state?	13a		经济观核
a	Note. See the instructions for additional information the organization must report on Schedule O.			XIG Y
	Enter the amount of reserves the organization is required to maintain by the states in which		统计	1 m
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand		1	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Χ
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b	1	

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See in	struci	tions.
Sect	ion A. Governing Body and Management			
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.	1	Yes	No
b 2	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 officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4 5 6	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?	5 6		X X
7a b	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a		x
8	stockholders, or persons other than the governing body?	7b		X
a b	The governing body?	8a 8b	X X	
9 Sacti	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	ode i	x
Secu	Of B. Policies (This Section B requests information about policies not required by the internal Never	ide O	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		Х
11a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	X	
12a b	Did the organization have a written conflict of interest policy? If "No," go to Ilne 13	12a 12b	_ X	
с 13	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	X	
14 15	Did the organization have a written document retention and destruction policy?	14	Х	
a b	The organization's CEO, Executive Director, or top management official	15a 15b	X X	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ► NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☒ Another's website ☐ Upon request ☐ Other (explain in Schedule O)	ı 501(c)(3)s	only)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.			, and
20	State the name, physical address, and telephone number of the person who possesses the books and records	Of the	!	

organization: ► TANA KIMBRO, 2 INTERNATIONAL PLAZA DRIVE, SUITE 425, 37217

						
Part VII	Compensation of Officers, Directors	, Trustees,	Key Employees,	Highest Compe	nsated Employee	s, and
	Independent Contractors					

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.

Check this box if neither the organization no	r any relate	d org	aniz	atio	n c	ompe	nsa	ted any currer	t officer, directo	r, or trustee.
(A) Name and Tille	(B) Average hours per week (list any	tage box, unless person is both an officer and a director/trustee) Reportable compensation compensation						(E) Reportable compensation from related	(F) Estimated	
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) KATHY WALSH, EXECUTIVE DIRECTOR. NASHVILLE, TN	40				x			116,000	0	0
(2) SEE ATTACHED LISTING FOR BOARD MEMBERS (3)	<u> </u>		 					0	0	0
(4)										
(5)										
(6)										
(7)										
(9)										
(10)						;				
(11)										
(12)										
(13)										
(14)										

Par	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees	s, a	nd F	lighe	st C	ompensated E	mployees (continu	ied)
	(A) Name and title	(B) Average hours per week (list any	officer and a director/tr					n an tee)	(D) Reportable compensation from	(E) Reportable compensation related		(F) Estimated amount of other
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizalio		compensation from the organization and related organizations
(15)												
(16)					_							
(17)					-							
(18)												
(19)												
(20)												
(21)											- 1	
(22)									<u> </u>			
(23)												
(24)				\dashv						l .		
(25)												
1b	Sub-total						•	*	116,000		0	0
d 2	Total (add lines 1b and 1c)	not limited						▶) wi	116,000 no received mo	ore than \$10	0 0,000	of
3	Did the organization list any former of employee on line 1a? If "Yes," complete 8	icer, direct						-	loyee, or high	=		Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep	ortab	ole c	om	pen	satio	n ar	nd other comp	ensation fro	m the	
5	Dld any person listed on line 1a receive of for services rendered to the organization?									ation or ind	ividual 	
Section	on B. Independent Contractors											
1	Complete this table for your five highest compensation from the organization. Rep year.											
	(A) Name and business addi	ess							(B) Description of se	ervices	C	(C) Compensation
2	Total number of independent contractor received more than \$100,000 of compens							the	ose listed abo	ve) who		

Par	t VIII	Statement of Revenue									
To commence	er torramen	Check if Schedule C) contains a	res	ponse or note t						
6				ņ.		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
윺	1a	Federated campaigns	s	1a					Approximation of the second		
ē 5	b	Membership dues .	,	1b	20,117						
A A	С	Fundraising events .		1c							
ia ia	d	Related organizations		1d					Professional Control		
ž, ž	e	Government grants (con		1e	1,791,669						
er di	f	All other contributions, g				Selection of	0.00		CANADA AND		
듗		and similar amounts not inc	L	1f	134,565						
Contributions, Gifts, Grants and Other Similar Amounts	9	Noncash contributions includ				1 046 251		1000	Share version		
	<u> </u>	Total. Add lines 1a-1	<u> </u>	•	Business Code	1,946,351					
ž	200	Conforman and	tmainin	~	Busiliess Code	16,212	16,212				
ě	2a b	Conference and	rrainiii	9		10,212	10,212				
8	"					_					
Program Service Revenue	Ä					_					
	٦	4							<u> </u>		
grai	f	All other program ser	vice revenue	a .							
P	g	Total. Add lines 2a-2			>	16,212	3 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2				
	3	Investment income		divid	ends, interest,						
		and other similar amo	ounts)		•	470	470				
	4	Income from investment	t of tax-exem	ipt be	ond proceeds >						
	5	Royalties	<u></u>		<u> ▶</u>						
			(i) Real		(ii) Personal	10 to 10 to 10	100000000				
	6a	Gross rents									
	b	Less: rental expenses									
	C	Rental income or (loss)		0	0	26 S 1. C 1	dear a see la	Protection Character	Land Arman Carlos		
	_d	Net rental income or (•	, , , ▶ (ii) Other	0		Salata Salata Cas			
	7a	Gross amount from sales of assets other than inventory	(i) Securitie	95	(ii) Other			or service and	And the second of the		
	1_	Less: cost or other basis			-				and the second		
	ь	and sales expenses .									
		Gain or (loss)		0	0	0.0000000000000000000000000000000000000	v v		188		
	c d	Net gain or (loss)		U	•	0					
	u	1401 gain or (1000) .		•							
ne	8a	Gross income from fu	ındraising								
le l		events (not including \$	•			45 Year 1 100 St.		248			
Other Revenue		of contributions reporte									
ē		See Part IV, line 18 .		а							
睛		Less: direct expenses		b			era Valoria i i				
		Net income or (loss) for			events . >	0					
	9a	Gross income from ga									
		See Part IV, line 19 .									
		Less: direct expenses Net income or (loss) fi			vitios						
		Gross sales of in			VICES P				a de la companya de		
	IVa	returns and allowance									
	b	Less: cost of goods s		_			ting and the second	and the Samuel	Maria de la compansión de		
		Net income or (loss) fr			entory >	0					
ł		Miscellaneous R									
İ	11a					A 100 CO	S. C.	ALL PROPERTY OF STREET, AND STREET, ST	The second secon		
	b										
ļ	C										
1	d	All other revenue .				1,309	1,309		Survivoria Control (Control Control Co		
		Total. Add lines 11a-			🟲				Maria de la composición dela composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición de la composición de la composición dela composición de la composición dela composición de		
	12	Total revenue. See in	structions.		<u>.</u> . 🟲	1,964,342	17,991				

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).										
Check If Schedule O contains a response or note to any line in this Part IX										
Do no 8b, 9	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing expenses					
1	Grants and other assistance to governments and									
	organizations in the United States. See Part IV, line 21									
2	Grants and other assistance to individuals in the United States. See Part IV, line 22									
3	Grants and other assistance to governments,									
	organizations, and individuals outside the	ł I	•							
	United States. See Part IV, lines 15 and 16				7 a y - 5 ga - 5 g					
4 5	Benefits paid to or for members									
9	trustees, and key employees	ļ	I							
6	Compensation not included above, to disqualified			<u> </u>						
•	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)	{								
7	Other salaries and wages	901,000	828,920	67,080	5,000					
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)	20,520	19,178	1,342						
9	Other employee benefits	100,503	92,175	8,328						
10	Payroll taxes	68,760	63,247	5,130	383					
11 a	Fees for services (non-employees): Management									
b	Legal									
C	Accounting									
ď	Lobbying									
e	Professional fundraising services. See Part IV, line 17									
f	Investment management fees									
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)									
12	Advertising and promotion									
13	Office expenses	17,792	17,014	778						
14	Information technology									
15	Royalties	100 500	0							
16	Occupancy	103,503	94,612	8,891						
17 18	Travel									
	for any federal, state, or local public officials	110.010	110 010							
19	Conferences, conventions, and meetings .	118,210	118,210							
20 21	Interest									
22	Depreciation, depletion, and amortization									
23	Insurance	13,636		13,636						
24	Other expenses. Itemize expenses not covered			Jan 1						
	above (List miscellaneous expenses in line 24e. If									
	line 24e amount exceeds 10% of line 25, column									
	(A) amount, list line 24e expenses on Schedule O.)	0.630	0.100	404						
а	Telephone	9,672	9,188	484						
b	Supplies Contracted services	67,680 514,378	48,480 506,878	2,200 7,500	17,000					
c d	Dues and fees	8,639	7,367	1,272						
u e	All other expenses Miscellaneous	2,714	1,100	1,614						
25	Total functional expenses. Add lines 1 through 24e	1,947,007	1,806,369	118,255	22,383					
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)									
	TOTIONTING OUT 30-2 (AOO 330-720)		,,	<u></u>	Form 990 (2013)					

Part X Balance Sheet (A) (B) Beginning of year End of year 119,261 133,420 1 2 190,031 2 190,414 223,062 224,305 3 4 155 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions), Complete Part II of Schedule L. 6 7 8 8 9 Prepaid expenses and deferred charges . . . 6,750 12,542 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 84,157 Less: accumulated depreciation 10b 84,157 b 11 11 12 12 Investments—other securities. See Part IV, line 11 Investments—program-related. See Part IV, line 11 13 13 14 14 15 15 560,681 Total assets. Add lines 1 through 15 (must equal line 34) 539,259 16 16 17 95,460 17 85,332 18 18 19 19 46,419 60,634 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 141,879 26 145,966 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ 💢 and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 359,773 377,089 27 27 28 37,607 28 37,626 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds. 414,715 397,380 33 33

539,259

34

560,681

Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,	964,	342
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	947,	007
3	Revenue less expenses. Subtract line 2 from line 1	3			335
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		397 ,	380
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
_	33, column (B))	10		414,	715
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII		· · ·		
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were com reviewed on a separate basis, consolidated basis, or both:		2a		X
b	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	 ed on a	2b	X	
С	⊠ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account.	ıntant?	2c	X	1.12
	If the organization changed either its oversight process or selection process during the tax year, exschedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?		3a	х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b	х	
			Form	990	(2013)

SCHEDULE A (Form 990 or 990-EZ)

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.

2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

温⊎する Open to Public

Inspection

Employer identification number Name of the organization TENNESSEE COALITION TO END DOMESTIC AND SEXUAL VIOLENCE 58-1632437 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 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.) ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 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 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 331/3% 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 331/3% 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. d Type III-Non-functionally integrated b ☐ Type II c Type III-Functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (I) A person who directly or Indirectly controls, either alone or together with persons described in (ii) and Yes No 11g(i) 11g(II) (III) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (v) Dld you nolify the organization in col. (i) of your support? (iv) is the organization (iii) Type of organization (vii) Amount of monetary (i) Name of supported (II) EIN (vi) is the organization in col. in col. (i) listed in your organization (described on lines 1-9 support governing document? (i) organized in the above or IRC section U.S.? (see Instructions)) Yes Yes Yes Nο No No (A) (B) (C) (D) (E)

Page 2 Schedule A (Form 990 or 990-EZ) 2013 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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 (a) 2009 (e) 2013 (f) Total Calendar year (or fiscal year beginning in) (b) 2010 (c) 2011 (d) 2012 Gifts, grants, contributions, membership fees received. (Do not include any "unusual grants.") . . . <u>2</u>,203 2,290 1,946 3,235 2,213 11,887 revenues levied organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities 3 furnished by a governmental unit to the organization without charge Total, Add lines 1 through 3 3,235 2,213 2,290 2,203 1,946 11,887 4 The portion of total contributions by each person (other than governmental unit publicly or supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 11,887 Public support, Subtract line 5 from line 4. Section B. Total Support (f) Total Calendar year (or fiscal year beginning in) (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 2,290 2,203 1,946 11,887 Amounts from line 4 2,213 3,235 7 8 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar Net income from unrelated business 9 activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets Total support. Add lines 7 through 10 11,983 11 12 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) 13 Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f) 99.20% 14 Public support percentage from 2012 Schedule A, Part II, line 14 15 15 331/3% support test-2013. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 16a box and stop here. The organization qualifies as a publicly supported organization X 331/3% support test-2012. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2013. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2012. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

18

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.)

Secti	on A. Public Support						
Caler	dar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees			1			
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities				İ		
	furnished in any activity that is related to the	1					
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the				ļ		
	organization's benefit and either paid						
	to or expended on its behalf	<u> </u>					
5	The value of services or facilities		1				
	furnished by a governmental unit to the						
•	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
	·						
b	Amounts included on lines 2 and 3 received from other than disqualified	}	· ·				
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b		-				
8	Public support (Subtract line 7c from		7.8				
	line 6.)	1.0	e de la companya de la companya de la companya de la companya de la companya de la companya de la companya de	TO MAKE			
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
þ	Unrelated business taxable income (less						
	section 511 taxes) from businesses		<u> </u>				
	acquired after June 30, 1975		<u> </u>				
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						
40							
12	Other income. Do not include gain or loss from the sale of capital assets			ĺ			
	(Explain in Part IV.)	į į					
13	Total support. (Add lines 9, 10c, 11,				_		
	and 12.)						
14	First five years. If the Form 990 is for th	ne organization	's first, secon	d, third, fourth	, or fifth tax ye	ear as a section	n 501(c)(3)
	organization, check this box and stop he						▶ □
	on C. Computation of Public Suppor					11	
15	Public support percentage for 2013 (line 8					15	<u>%</u>
16	Public support percentage from 2012 Sch			· · · · ·	<u> </u>	16	<u> </u>
	on D. Computation of Investment Inc			u lino 10 - colum	on (f))	17	%
17	Investment income percentage for 2013 (18	
18	Investment Income percentage from 2012 331/3% support tests—2013. If the organi	s ocnedule A, I	raπ III, IINΘ 17	on line 14 on	 nd ling 15 is m		
19a	17 is not more than 331/3%, check this box	and etan here	The organization	n qualifiee se s	ia iiiie 19 i8 ffi Anihlick suppe	orted organization	o, and ime סח . ▶ 🗍
L	331/2% support tests—2012. If the organiz						
b	line 18 is not more than 331/3%, check this t						
20	Private foundation. If the organization di						
20	- Trate teatradeen it the organization of	01100h u	~ - 1 - 1 - 1 - 1 - 1				- - <u>-</u>

Part IV	Page 4 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and
Faittv	Part III, line 12. Also complete this part for any additional information. (See instructions).
**	
*	
•••••	

Schedule B

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

Schedule of Contributors

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

OMB No. 1545-0047

Employer Identification number

58-1632437

Department of the Treasury Internal Revenue Service

Name of the organization

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

TENNESSEE COALITION TO END DOMESTIC AND SEXUAL VIOLENCE

Organization type (check one): Filers of: Section: Form 990 or 990-EZ X 501(c)() (enter number) organization 3 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations

Special Rules

under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution 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.
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions of \$5,000 or more during the year

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

property) from any one contributor. Complete Parts I and II.

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

Employer identification number

TENNESSEE COALITION TO END DOMESTIC AND SEXUAL VIOLENCE

58-1632437

Part I	Contributors (see instructions). Use duplicate cop	oles of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1	Verizon Wireless New York, New York	\$ 30,000	Person 🖾 Payroll 🔲 Noncash 🗍 (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ \$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

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

2013

Schedule C (Form 990 or 990-EZ) 2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Open to Public Inspection

 Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. Section 527 organizations: Complete Part I-A only. If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then · Section 501(c)(4), (5), or (6) organizations: Complete Part III. Employer identification number Name of organization TENNESSEE COALITION TO END DOMESTIC AND SEXUAL VIOLENCE 58-1632437 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 3 Volunteer hours . . . Complete if the organization is exempt under section 501(c)(3). Part I-B Enter the amount of any exclse tax incurred by the organization under section 4955 . Enter the amount of any excise tax incurred by organization managers under section 4955 . If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 l Yes Nο b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function 2 Enter the amount of the filing organization's funds contributed to other organizations for section 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filling organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (c) EIN (d) Amount paid from (e) Amount of political (a) Name (b) Address filing organization's contributions received and funds. If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-. (1)(2) (3) (4)(5) (6)

d Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

		•					
	;	Complete if the organizat section 501(h)).					
A		if the filing organization to name, address, EIN, exp	enses, and sha	re of excess lobl	oying expenditui	es).	oup member's
В	Check ► [☐ if the filing organization of	checked box A a	and "limited con	trol" provisions a	apply.	
			bbying Expendit			(a) Filing	(b) Affiliated
		(The term "expenditures"	means amounts	paid or incurred.)	organization's totals	group totals
	ia Total lob	bying expenditures to influen	ce public opinion	(grass roots lobby	ring)	0	
		bying expenditures to influen				0	
	c Total lob	bying expenditures (add lines	1a and 1b) .			0	
	d Other ex	empt purpose expenditures				0	·
	e Total exe	empt purpose expenditures (a	dd lines 1c and 1	d)		0	
		g nontaxable amount. Ente					
	columns	•				0	
	If the amo	ount on line 1e, column (a) or (b)	is: The lobbying	nontaxable amoun	t is:	\$24 a	Britis Day
	Not over \$	5500,000	20% of the an	rount on line 1e.			
	Over \$500	0,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000.		
	Over \$1,0	00,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000.	100	
	Over \$1,5	00,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000.		100000000000000000000000000000000000000
	Over \$17,	000,000	\$1,000,000.				
	g Grassro	ots nontaxable amount (enter	25% of line 1f)			0	
	h Subtract	line 1g from line 1a. If zero or	less, enter -0-			0	
		line 1f from line 1c. If zero or				0	
		is an amount other than zei		1h or line 1i, did	the organization	file Form 4720	□Vaa □ Na
	reporting	section 4911 tax for this yea	ır?	<u></u>	<u></u>		Yes No
		(Some organizations that n columns below	nade a section 5	ctions for lines 2a	not have to com through 2f on pa	plete all of the five age 4.)	
		Lobbyi	ng Expenditures	During 4-Year Av	eraging Period	r -	
	Calenc	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011 -	(c) 2012	(d) 2013	(e) Total
2	<u> </u>	g nontaxable amount	0	0	0	0	0
		g ceiling amount f line 2a, column (e))					0
	c Total lob	bying expenditures	0	0	0	0	0

0

0

Schedule C (Form 990 or 990-EZ) 2013

0

0

0

•				
Part II-B		the organization is exempt under section 501(c)(3) and has NOT	filed Form	ı 5768
•	(election un	der section 501(h)).		
			(0)	

		1	a)		(b)	
	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed ription of the lobbying activity.	Yes		_	mount	······································
ucso	iption of the lobbying douvey.	' ' ' '	110	′	illouil	•
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?	<u>X</u>				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Х			
C	Media advertisements?		Х			
d	Mailings to members, tegislators, or the public?		Х			
е	Publications, or published or broadcast statements?		Х			
f	Grants to other organizations for lobbying purposes?		Х			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Х			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х			
1	Other activities?		Х			
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	300		
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) 501(c)(6).	(5), (or se	ction		
·	001(0)(0):				Yes	No
1	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		
	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)					
. urc	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."				line (3, is
1	Dues, assessments and similar amounts from members	•	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby					
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Part	IV Supplemental Information					
Provid	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou	isil qu	t); Par	t II-A, I	ine 2;	and
Part II	-B, line 1. Also, complete this part for any additional information.					
				,		
		-3-4				-3*
						

Schedule C (Forn	1 990 or 990-EZ) 2013	Page 4
Part IV	Supplemental Information (continued)	
	······································	

	·	
•••••		

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer Identification number

TENN	ESSEE COALITION TO END DOMESTIC AND SEXUAL VIOLENCE	58-1632437
	t I Organizations Maintaining Donor Advised Funds or Other Similar Fo	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 6	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year) .	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets	held in donor advised
	funds are the organization's property, subject to the organization's exclusive legal con	
6	Did the organization inform all grantees, donors, and donor advisors in writing that g	rant funds can be used
	only for charitable purposes and not for the benefit of the donor or donor advisor, or	
-	conferring impermissible private benefit?	Yes No
Par	Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7	7
	Purpose(s) of conservation easements held by the organization (check all that apply).	<u> </u>
1	Preservation of land for public use (e.g., recreation or education) Preservation	of an historically important land area
		of a certified historic structure
	☐ Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribu	tion in the form of a conservation
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a)	
d	Number of conservation easements included in (c) acquired after 8/17/06, and no	
	historic structure listed in the National Register	
3	Number of conservation easements modified, transferred, released, extinguished, or to	erminated by the organization during the
	tax year >	
4	Number of states where property subject to conservation easement is located ► Does the organization have a written policy regarding the periodic monitoring, if	papartian handling of
5	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation	
U	Stati and volunteer flours devoted to mornioning, mopeoung, and emerging concernant	on outsino deling the year
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation ea	sements during the year
•	▶ \$	• ,
8	Does each conservation easement reported on line 2(d) above satisfy the requirement	s of section 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?	· · · · · · · 🗌 Yes 🗌 No
9	In Part XIII, describe how the organization reports conservation easements in its reven	ue and expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's	financial statements that describes the
	organization's accounting for conservation easements.	
Part		
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in works of art, historical treasures, or other similar assets held for public exhibition,	education or research in furtherance of
	public service, provide, in Part XIII, the text of the footnote to its financial statements to	nat describes these items.
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in it	
D	works of art, historical treasures, or other similar assets held for public exhibition,	education, or research in furtherance of
	public service, provide the following amounts relating to these items:	•
	(I) Revenues included in Form 990, Part VIII, line 1	▶ \$
	(ii) Assets included in Form 990, Part X	▶ \$
2	If the organization received or held works of art, historical treasures, or other simil	lar assets for financial gain, provide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these	
а	Revenues included in Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	<u> ▶ \$</u>

Par	t III Organizations Maintaining Co								
3	Using the organization's acquisition, according the organization's acquisition, according to the organization of the organizat	ession, and oth	ner reco	rds, chec	k any of ti	he follo	wing that are a	significant use	of its
а	☐ Public exhibition				or exchan				
b	Scholarly research		е	☐ Other	r				
C	Preservation for future generations								D
4	Provide a description of the organization XIII.								Part
5	During the year, did the organization soli assets to be sold to raise funds rather that	n to be maintair	ionation ned as i	s of art, part of the	historical t e organizat	reasure tion's co	s, or other sim llection? .	nilar · 🔲 Yes 🗀] No
Par			_			_			
	Complete if the organization and	swered "Yes"	to Forr	n 990, P	art IV, line	e 9, or i	reported an a	mount on Form	7
	990, Part X, line 21.								
1a	Is the organization an agent, trustee, cui								1 As -
	included on Form 990, Part X?							· ☐ Yes ☐) NO
b	If "Yes," explain the arrangement in Part	tili and complet	te the to	llowing ta	abie:			Amount	
_	Beginning balance					10			
c d	Additions during the year					10			•
e	Distributions during the year					1e			
f	Ending balance					11			
2a	Did the organization include an amount or							. Yes	No
	If "Yes," explain the arrangement in Part X								
	t V Endowment Funds.								
	Complete if the organization ans	swered "Yes"							
	(a	a) Current year	(b) Pric	or year	(c) Two yea	rs back	(d) Three years ba	ack (e) Four years t	ack_
1a	Beginning of year balance								•
b	Contributions								
С	Net investment earnings, gains, and losses								
ď	Grants or scholarships								
е	Other expenditures for facilities and programs								
f	Administrative expenses		-						
g	End of year balance				•				
2	Provide the estimated percentage of the c			e (line 1g	, column (a	a)) held a	as:		
а	Board designated or quasi-endowment	,	%						
b	Permanent endowment ▶	6							
С	Temporarily restricted endowment	%	.0.6						
20	The percentages in lines 2a, 2b, and 2c sh Are there endowment funds not in the po	•		ration tha	nt are held	and ad	ministered for	the	
3a	organization by:	226221011 01 1119	organiz	auon ma	it ale lielu	and ad	Tillinstered to		No
	(i) unrelated organizations							. 3a(i)	140
	(ii) related organizations							. 3a(II)	
h	If "Yes" to 3a(ii), are the related organization							. 3b	
4	Describe in Part XIII the intended uses of t							· []	
Part								-	
	Complete if the organization ans		to Forn	n 990, Pa	art IV, line	11a. S	See Form 990	, Part X, line 10).
	Description of property	(a) Cost or othe (investmen		• •	r other basis her)		Accumulated preclation	(d) Book value	
1a	Land	 	1						
b	Buildings					CONTRACTOR OF A	Commence of the Secretarian Secretarian	•	
c	Leasehold improvements								
d	Equipment]		84,157		84,157		0
е	Other								
Γotal.	Add lines 1a through 1e. (Column (d) must	equal Form 990), Part X	, column	(B), line 10)(c).) .	▶		0

Part VII	Investments - Other Securities.	rorad "Vaa" ta Ear	m 000 Port IV lis	an 11h San Form	2000 Dort V line 12
	Complete if the organization answ (a) Description of security or category	rerea res la For	(b) Book value		thod of valuation:
	(including name of security)		(b) book raido		d-of-year market value
(1) Financial					
	neld equity interests				
(3) Other					
(A)					
(B) (C)					
(D)					
(E)	-			-	· · · · · -
(F)					
(G)					
(H)					
Total. (Column (l	b) must equal Form 990, Part X, col. (B) line 12.) 🕨				
Part VIII	Investments—Program Related.				
	Complete if the organization answ	ered "Yes" to For	m 990, Part IV, Iir	<u>ne 11c. See Form</u>	990, Part X, line 13.
	(a) Description of Investment		(b) Book value		ilhod of valuation: I-of-year market value
_		· · · · · · · · · · · · · · · · · · ·		Cost of ent	J-OI-year market value
<u>(1)</u>		7			
(2)					
(3)					 .
(4) (5)					<u>-</u>
(6)	·				
(7)					
(8)					
(9)					
	n) must equal Form 990, Part X, col. (B) line 13.) 🕨				
Part IX	Other Assets.				
	Complete if the organization answ		n 990, Part IV, lin	ie 11d. See Form	990, Part X, line 15.
/1)	(a)	Description			(b) BOOK VAIUE
(1)					
(2)	··				
(4)			_		
(5)					
(6)					
(7)					
(8)					
(9)		(5) (7)			
	nn (b) must equal Form 990, Part X, col.	(B) line 15.)		•	
Part X	Other Liabilities.	avad "Vaa" ta Faur	~ 000 Dort IV IIa	a 11a av 11f Caa	Form 000 Bort V
	Complete if the organization answering 25.	ered ites to Fon	ir 990, Part IV, iiri	e Tie or Til. See	Form 990, Part A,
1.	(a) Description of liability	(b) Book value			
(1) Federal in					ALC: NO.
(2)					
(3)					
(4)				200 38	
(5)			4 3		ALC: THE RESERVE
(6)				7.29 (A.27), 29 6 .	
(7)					
(8)					
(9) Total <i>(Column l</i> h) must equal Form 990, Part X, col. (B) line 25.)				
r aran tanannı (n)	times adomicant and assit ment our letting earl				THE ROOM OF THE PERSON OF THE

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

Part	Reconciliation of Revenue per Audited Financial Stateme Complete if the organization answered "Yes" to Form 990, F	•	r Return.	
 1	Total revenue, gains, and other support per audited financial statements		111	1,964,342
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			1/301/312
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c		
ď	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	1,964,342
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b		4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	1,964,342
Part				
	Complete if the organization answered "Yes" to Form 990, P			••
1	Total expenses and losses per audited financial statements		T i	1,947,007
2	Amounts Included on line 1 but not on Form 990, Part IX, line 25:			, , , , , , , , , , , , , , , , , , , ,
_	Donated services and use of facilities	2a		
b	Prior year adjustments			
c	Other losses			
ď	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	1,947,007
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			1,511,007
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	.	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	1,947,007
Part	Supplemental Information.	<u> </u>		
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part t			

Schedule D (Foi	m 990) 2013 Page
Part XIII	Supplemental Information (continued)

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 2013

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Open to Public ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection

Name of the organization Employer Identification number TENNESSEE COALITION TO END DOMESTIC AND SEXUAL VIOLENCE INC 58-1632437 Part VI. 11b Full Board reviews. Part VI. 12c. Full Board reviews all such items. Part VI-B. 15b Full Board reviews.