

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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				ess revenue from			2			7a			0		
-	- - •	Net unrelat	ed busine	ss taxable income	from Form 990	0-T, line 34			Prior	7 <u>b</u>	 	Current Year	0	1	
	. 8	Contributio	ns and gr	ants (Part VIII, line	1h)					9,240			870		
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	<u>ہ</u>		-	Part VIII, column (/	•	•				11,905	 	<u>9,</u>	<u>319</u>	ĺ	
	1			VIII, column (A), is lines 8 through 11			-		1.	13,675	-	115.	115	}	
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				ing fees (Part IX, o				61	.,	V 81.	٠.				
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	Form 990 (2015) Tennessee J	uvenile Court Services	62-1275470	Page 2	ı
	Part III Statement of Progr	ram Service Accomplishments		<u></u>	İ
	Check if Schedule C Briefly describe the organization's r	ontains a response or note to any mission:	line in this Part III	1180 6 4 18 11 18 4 18 18 18 18 18 18 18 18 18 18 18 18 18	1
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	2 Did the organization undertake any pnor Form 990 or 990-EZ?	significant program services during the year	which were not listed on the	Yes X No	
		es on Schedule O ling, or make significant changes in how it coi	nducts, any program		
1	services? If "Yes," describe these changes or	n Schedule O		Yes X No	
	4 Describe the organization's program expenses Section 501(c)(3) and 50	n service accomplishments for each of its thr D1(c)(4) organizations are required to report the any, for each program service reported	he amount of grants and allocations to		
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8086 08/05/2016 2 55 PM Form 990 (2015) Tennessee Juvenile Court Services Page 3 Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes." complete Schedule A complete Schedule A

2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? X Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II X 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 98-197 if "Yes," complete Schedule C, X Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Yes * complete Schedule D. Part i X Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes " complete Schedule D, Part II X complete 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 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 X 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 If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D. Part VI X 11a 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 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 X 11c 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 e Did the organization report an amount for other habilities in Part X, line 25? If "Yes," complete Schedule D. Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a 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 Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Х 13 14a Did the organization maintain an office, employees, or agents outside of the United States? X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV X 14b 15 Did the organization report on Part IX. column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV Х Did the organization report on Part IX, column (A) line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F. Parts III and IV Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), tines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) X 17 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 X 18 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 X Form **990** (2015)

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8086 08/05/2016 2 55 PM Form 990 (2015) Tennessee Juvenile Court Services Page 4 Checklist of Required Schedules (continued) Yes No 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b. If "Yes" to line 20s diditie organization attach a copy of its suddied financial statements to this return?

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 20b χ. domestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II 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 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 X employees? If "Yes," complete Schedule J 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 X through 24d and complete Schedule K. If "No," go to line 25a b 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 dunno the year to defease any tax-exempt bonds? d : Did the organization act as an ion behalf of issuer for bonds outstanding at any time during the year? ۾ ، ڀَ 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit X + +; 可翻译 1 transaction with a disquatified person during the year? If "Yes," complete Schedule L, Part I 25a 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? Х If "Yes " complete Schedule I Part I 25b 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 X disqualified persons? If "Yes," complete Schedule L, Part II 26 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 X entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete **经职的地址** 1.3位 Schedule La Part IV " " TO TO THE PER COST ... An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) X was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 280 X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Х 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 Х complete Schedule N. Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R. Part I X Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R. Parts II, III, or IV, and Part V, line 1 から(ま) 構得的 **大学科学科学** 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(cN3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes." complete Schedule R, Part V, line 2 X 36 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. X Part VI 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and X 192 Note. All Form 990 filers are required to complete Schedule O Form 990 (2015)

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	990 (2015) Tennessee Juvenile Court Services 62-1275 1 V Statements Regarding Other IRS Filings and Tax Compliance					Page 5
	Check if Schedule O contains a response or note to any line in this Part \	/	374. * 1			
					Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0	- 3	33	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		777	
	Did the organization comply with backup withholding rules for reportable payments to vendors and			\Box		
	reportable gaming (gambling) winnings to prize winners?			1c_	1	
_	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1				-
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0		urs.	}\ <u>`</u> `
	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	ms?		2b		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)		100	\.\X\.	12.55
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3а		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule	0		3ь		
	At any time during the calendar year did the organization have an interest in, or a signature or other	author	ity			
	over, a financial account in a foreign country (such as a bank account, secunties account, or other fir	ancial				
	account)?			4a	\bot	<u> </u>
	If "Yes," enter the name of the foreign country. ▶			<u>-(5)</u>	. 77.7	'l
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accour	its	1		1 64
,	(FBAR)			1 32	133	
,	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
i	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transar	ction?		5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne .				
•	organization solicit any contributions that were not tax deductible as chantable contributions?			6a	<u> </u>	<u> </u>
-	If "Yes," did the organization include with every solicitation an express statement that such contribution	no and			1	
	gifts were not tax deductible?			6b		
1	Organizations that may receive deductible contributions under section 170(c)			, r		
1	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods		*	4.00	1. X
;	and services provided to the payor?			7a		X
1	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
1	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa	15				
-	required to file Form 8282?			7c		X
- 1	If "Yes," indicate the number of Forms 8282 filed during the year	7d			`′	***
-	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit o	ontraci	?	7e		X
١	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	acl?		7f	<u> </u>	X
١	if the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 889	9 as required?	79	<u> </u>	X
ı	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza-	tion fil	e a Form 1098-C?	7h		X
:	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine	d by th	e	:ر ا		`.
:	sponsonng organization have excess business holdings at any time during the year?			8		<u> </u>
,	Sponsoring organizations maintaining donor advised funds			100		
١	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
ŧ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		<u> </u>
:	Section 501(c)(7) organizations Enter			± 1.5	19.	* -
ı	nitiation fees and capital contributions included on Part VIII, line 12	10a		_ ~!!	19.43	£ 4
(Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10Ь		4 2	7	T.
٠ (Section 501(d)(12) organizations. Enter		Frank Co.		300	laci .
(Gross income from members or shareholders	11a			3,108	7,000 17
(Gross income from other sources (Do not net amounts due or paid to other sources		· -	· , .	1 38	1
é	against amounts due or received from them)	11b			11.53	Ŀ
:	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	·	12a	Ĺ	<u>L</u>
ı	f "Yes" enter the amount of tax-exempt interest received or accrued during the year	12b			,	
:	Section 501(c)(29) qualified nonprofit health insurance issuers.		··· 	1.0		<u>. </u>
	s the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O			1.4	2.5	15 7
	Enter the amount of reserves the organization is required to maintain by the states in which					ľ
	he organization is licensed to issue qualified health plans	13ь			(in the second	
	Enter the amount of reserves on hand	13c		T). []	- 3	1." `
	Did the organization receive any payments for indoor tanning services during the tax year?			14a	Γ'''-	x

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8086 08/05/2016 2 55 PM Form 990 (2015) Tennessee Juvenile Court Services 62-1275470 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Rody and Management of step advisor to the the state of the st Yes 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 236 b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Х Oid the organization make any significant changes to its governing documents since the pnor Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the gramuettors have members at ocknolders, or other persons who had the power to elect or appoint to one or more members of the governing body? 200 7a Are any governance decisions of the organization reserved to (or subject to approval by) members. stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a Each committee with authority to act on behalf of the governing body? 8b X 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No 10a Did the organization have local chapters, branches, or affiliates? 10a X 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. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 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? The organization's CEO, Executive Director, or top management official $\overline{\mathbf{x}}$ b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b if "Yes," did the organization follow a written policy of procedure requiring the organization to evaluate its (4) 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 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records Price CPAs, PLLC 3825 Bedford Avenue

9-11-25

	"Part VII"	Compensation	of Officers	Dir	oct.)re	Tr	1010	<u> </u>	ices 62-127	hest Compensated I	Page		
minalis in the second	_	Independent Co	ontractors									-mpioyees, and		
J. J. J.		Check if Schedu	ile O contain:	sar	esr	on:	se n	ון חר	ite t	o any line in this Part	VII - Jew Jewy	۲		
	Section A.	Officers, Directors	, Trustees, Key	/ Em	vola	905	. and	Hia	hest	Compensated Employe	95			
										on for the calendar year er				
	organization's ta	ax year								•	•			
	• List all of	the organization's cu Enter -0- in columns	rrent officers, d	irect	ors,	trust	ees	(whe	ther	individuals or organization	s), regardless of amount of			
	Compensation i	the organization's CI	(D), (E), and (F) IT NO	2001	npe	nsau	on w	as p	aid ons for definition of "key en	andama *			
	 List the or 	canization's five cur	rent highest cor	mpen	sate	d er	nolor	vees	(ath	er than an officer, director	trustee or key employee)			
į	 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 													
	 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 													
į	• List all of	the organization's fo	mer directors	or tr	uste	es t	hat o	ecen	ed o	ganizations in the canacity as a former	director or trustee of the			
	organization, me	ore than \$10,000 of i	eportable comp	ensa	ition	fron	ı the	orga	nıza	tron and any related organ	zations			
	List persons in t	he following order in	idividual trustee	s or c	direc	tors	, ınst	itutio	nal t	rustees, officers, key emp	loyees, highest			
APP "WALL CHES		npjoyees, and forme												
ļ	(A) Uneck this b			y rela	ited			tion	comp	pensated any current office	er, director, or trustee			
		(A)	(B)				C)			(D)	(E)	(F)		
	Nam	e and Title	Average hours per	(ct	o nat i		more	then o	ne	Reportable compensation	Reportable compensation from	Estimated amount of		
ľ			week (list any	bo	x unic	35 pe	erson i	s both	an	from	related organizations	other		
			1							the organization	organizations (W 2/1099-MISC)	compensation from the		
			related organizations	Individual trustee or director	nstitutional trusiee	Officer	Kay employee	Highest compensated employee	Former	(W-2/1099 MISC)		organization and related		
			below doited	dua:	ş		ag G	8 8 8	BE			organizations		
			line)	150	ş		Š	뤊			·			
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	Vice-Pres	ident	0.00	1		х				0	ol			
	(3) Nancy						T				······································			
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	Secretary		0.00			х				0	o			
	(4) Sharon	Fuller			Г						-			
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	orm 990 (2015) Tennessee									- 127 pensate	_		(continued)		S086 08/05/201	Page 8	٠ .
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_		organizations below dotted tine)	rector	nstitutional trustee	ě.	(ey employee	Highesi compensated employee	767							and related organizations		
_	一一 一 中 作 作	BATCH STE		25			_	15	· · · · · · · · · · · · · · · · · · ·	• •	ξ.	•••	·	ત શં	* * * * * * * * * * * * * * * * * * * *	• .# - है द्वार्ट्ड. 	গিলী হ
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	~~の計画情報 競	计解 值 : 20:34 ;	, ils ₹ ^#	特。		 	+ 4	* } 		*:	 	1) .	of M	- SAP	- 		門書類
_	1b Sub-total c Total from continuation shed d Total (add lines 1b and 1c) 2 Total number of individuals (in	cluding but not t	imite	d to ti	nose	liste	ı	► ► • •	a) who received n	ore than	\$100),000 of			-		
	reportable compensation from 3 Did the organization list any for employee on line 1a? If "Yes." 4 For any individual listed on line organization and related organization.	ormer officer, dir complete Schelle 1a, is the sum	ector dule . of re	, or tr J for s portal	uch ole o	ındı. omp	vidu: ens:	al atro	n and other comp	ensation	from	the			Yes	x	
-	individual Did any person listed on line 1 for services rendered to the or section B. Independent Control of Complete this table for your five gamensalion from the granus	gesization?()**)	ensa	comp	depe	Sche	eduk ent c	e j	or such person	ed more	than	\$100.00		., `	15 1	IX.	1. 大學
-	CONTROLLEGE IN TOTAL	zation Report o (A) business address	ompe	msatı	on fo	or the	e cal	lend	ar year ending w	D. O. 1110	01	e organiz services	zation's tax	year	(C) Compens	sation	
-																	ļ
-	2 (41) 2 (12) 10 (12) 2 (13)								nd ex n					<u>.</u>	[1
	2 Total number of independent of ind	of compensation	romg from	the	orga	nπeα n≀zat	tion	unos ▶	eristed above) w	no 			0		041	998	成都報酬

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8086 05/05/2016 2 55 PM Form 990 (2015) Tennessee Juvenile Court Services 62-1275470 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated business revenue (D) Revenue excluded from tax exempt function (RVM) 512-514 1a Federated campaigns 1a b Membership dues 1b 9,870 c Fundraising events 1c d Related organizations 1d Government grants (contributions) 10 f All other contributions, guits, grants and similar amounts not included above g Noncash contributions included in lines 1a-1! h Total. Add lines 1a-1f 9,870 Revenue Busn. Code Conference Registration 54,454 54,454 41,472 Program Ads, Events, Sponsor 41,472 Service C f All other program service revenue g Total. Add lines 2a-2f 95,926 3 Investment income (including dividends, interest, and other similar amounts) 4,406 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (iii) Personal 6a Gross rents b Less rentatiexps C Rental inc or (loss) d Net rental income or (loss)
7a Gross emount from (i) Secunties (a) Other sales of assets 4,913 other than inventor b Less cost or other basis & sales exps c Gain or (loss) 4,913 d Net gain or (loss) \blacktriangleright 4,913 8a Gross income from fundraising events Revenue (not including \$ of contributions reported on line 1c) See Part IV. line 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from garning activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 11a b c d All other revenue e Total Add lines 11a-11d 12 Total revenue. See instructions 115,115 95,926 9,319 Form **990** (2015) DAA

Page 15 of 42

		Form	990 (2015) Tennessee Juven:	ile Court Se	rvices 62-1	2754	70		Page 10
			rt IX Statement of Functional Ex						
		Secti	on 501(c)(3) and 501(c)(4) organizations must			complet	e column (A)		
			Check if Schedule O contains a resp	, 			_ 	4:4-4	<u> </u>
(X	Юe ·		ot include amounts reported on lines 6b.	Total expenses	(B) Program service		(C) Management and (15) general expenses (3)	基礎物	(D) Fundraising:
. : : 经课	AL PAGE	70,0	Grants and other assistance to domestic organizations		4 b 1.3 N HTR. JA enchement , 1. 1)	2852	general expenses J.,	8 3 35 C 8	expenses /" .3"
		1		}	1	X			
		•	and domestic governments. See Part IV, line 21 Grants and other assistance to domestic		· 	93	* 1 80 80 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 2 3 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	and the same of the same of the same of the same of the same of the same of the same of the same of the same of
		2				1,50 €	되었잖아 연생		Kan da
		•	individuals See Part IV, line 22 Grants and other assistance to foreign			+	2 12 14 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	37	(, ,) , , , , , , , , , , , , , , , , ,
-		3			İ				
			organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16		Į	1	grandijski i kalib		100 (S.C.) N
		4	Benefits paid to or for members	}		+		;	
			Compensation of current officers, directors,			┿	'	 	
[,	trustees, and key employees					İ	
ĺ		6	Compensation not included above, to disqualified	·				+	
ľ		u	persons (as defined under section 4958(f)(1)) and	•					
			persons described in section 4958(c)(3)(B)			-			
		. •	Other salaries and wages () And The Hard of the	र क्रुन का एक	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	18	1	3 4 1.5	
· 1788			Pension plan accruals and contributions (include		****	+	, [:	3 -24	rt rete
		•		ļ	1	ŀ		1	
ł		•	section 401(k) and 403(b) employer contributions)			-		+	
		9	Other employee benefits						
ŀ		10	Payroll taxes						· · · · · · · · · · · · · · · · · · ·
ŀ		11	Fees for services (non-employees)			-			
			Management			 		+	
		ь	Legal	2,86	8 2,86	- -			
ı			Accounting	2,00	2,00	-	-	+	 -
l		d	Lobbying		1,000	1	N 200 / S.		
		9	Professional fundraising services. See Part IV, line 17		377 - 73 - 7	' - -		+	
l l			investment management fees		 	+		 	
ŀ		9	Other (If line 11g amount exceeds 10% of line 25, column						
l	 6.1		(A) amount, list line 11g expenses on Schedule () Advertising and promotion 324 # 1 13	1 13 1 112	1, 7, 1	+	· · · · · · · · · · · · · · · · · · ·	+:	· · · · · · · · · · · · · · · · · · ·
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		13		, ,,	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	—		 	
		14	Information technology		- 	+			
		15	Royalties		-			 	
		16	Occupancy		··· · ·······		 <u></u> -	+	
		17	Travel			+		- -	
		18	Payments of travel or entertainment expenses			ſ			
			for any federal, state or local public officials	62.05	62.05			 	
		19	Conferences, conventions, and meetings	63,25	0 63,25	<u></u>			
		20	Interest			-			
		21	Payments to affiliates						
		22	Depreciation, depletion, and amortization	_	·	 		 	···
		23	Insurance	4 70 70 70 70 70 70 70 70 70 70 70 70 70					W
		24	Other expenses Itemize expenses not covered					1000	
i	§* ·		above (List miscellaneous expenses in line 24e if			91336			
l			line 24e amount exceeds 10% of line 25, column C			in Kara	ing the state of t	A SOUTH STATE	ananing and
			(A) amount, list line 24e expenses on Schedule O)	1 Start Child States		<u> </u>	Walter warm	\$ 400 Vs_0	awali am
		8	Donations	20,00				 _	
J		ь	Committee Planning	13,46				ļ	
j		c	Printing	8,37			· · · · · · · · · · · · · · · · ·	<u> </u>	
l		đ	Hospitality Expense	7,97				ļ	
J			All other expenses	1,53					
			Total functional expenses. Add lines 1 through 24e	117,46	4 117,46	4	()	0
		26	Joint costs. Complete this line only if the organization reported in column (B) joint costs	1					
			from a combined educational campaign and	•					
			fundraising solicitation. Check here ▶ if						
- 1			following SOP 98-2 (ASC 958-720)			1		1	

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	art)	Check if Schedule O contains a response or note to any line in this Part X :			
		The state of the s	(A)	Π	(B)
_			Beginning of year		End of year
	1	Cashnon-interest bearing	22,102	1	20,04
	2	Savings and temporary cash investments		2	
_	3			3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
	6	Loans and other receivables from other disqualified persons (as defined under section	10 mg/s/m ² / ₂ /2	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(A. 15 (A. 24)
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and	Sec. 188 (20) (1/3)	32.5	Lie Consideration
		sponsoning organizations of section 501(c)(9) voluntary employees' beneficiary			
ş	,	organizations (see instructions) Complete Part II of Schedule L		_ 6	
Assets	7	Notes and loans receivable, net	1種中, recki 下一句英们。	47	المراجعة المساورة والمراجعة
⋖	8	Inventones for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or			,
		other basis Complete Part VI of Schedule D 10a 4,505	,	1	
		Less accumulated depreciation 10b 4,505		10c	
	11	Investments—publicly traded securities	198,683	11	160,91
	12	Investments—other securities See Part IV, line 11		12	ļ
j	13			13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	000	15	
-	16	Total assets Add lines 1 through 15 (must equal line 34)	220,785	16	180,96
	17	Accounts payable and accrued expenses		17	
		Grants payable Deferred revenue	到有是 图之。 上程 12年	18	A
	20	Tax-exempt bond liabilities			
	21	Escrow or custodial account liability Complete Part IV of Schedule D		20 21	
,	22	· · ·		41	
Liabilities		trustees, key employees, highest compensated employees, and	A		
<u></u>		disqualified persons Complete Part II of Schedule L	i	22	
تُـّ	23	Secured mortgages and notes payable to unrelated third parties		23	
ı	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
- [parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D		25	
	26	······································	0	26	
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and	yw (2) (5)(5)(5)	ch mì	a my for a st.
Balances	٤	complete lines 27-through 29, and lines 33 and 34.			180,96
ŝ	27	Unrestricted net assets	220,785	27	180,96
ğ	28	Temporanly restricted net assets	-1	28	
ב ב	29	Permanently restricted net assets		29	
Ξĺ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			
o s		complete lines 30 through 34.		İ	
, g	30	Capital stock or trust principal, or current funds		30	
Net Assets or Fund	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ğ	32	Retained earnings, endowment, accumulated income, or other funds		32	
ı	33	Total net assets or fund balances	220,785	33	180,96
\sqcup	34	Total liabilities and net assets/fund balances	220,785	34	180,964
					Form 990 (201

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Form 990 (2015) Tennessee Juvenile Court Services 62-1275470	Page 12
Part XI Reconciliation of Net Assets Check if Schedule O contains a resonnse or note to any line in this Part XI	
2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Prior partod adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line	15,115 17,464 -2,349 20,785
1 Accounting method used to prepare the Form 990 X Cash Accoual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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 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 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 audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X X
· 「如果」(1915年) - 1915年 1915年	mm 990 (2015)
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SCHEDULE A		olic Charity Statu				OMB No 1545-0047
(Form 990 or 990-EZ)	Complet	te if the organization is a se				2015
		4947(a)(1) nonex ▶ Attach to Form				Open to Public
Department of the Treasury Internal Revenue Service	▶ Information ab				ons is at www.irs.gov/form990	Inspection
Name of the organization		-			Employer identifi	cation number
		venile Court S			62-1275	470
Part I Reas	on for Public Charity	Status (All organization	is must c	omplete	this part) See instruction:	s
		se it is (For lines 1 through 1				
- [7]		sociation of churches describe)(A)(i)	
—		(A)(II) (Attach Schedule E (Fi				
		ice organization described in				
A medical re		o in conjunction with a nospit	ar described	ın secuo	n 170(b)(1)(A)(di). Enter the hos	spitars name,
		of a college or university own	ed or opera	ed by a or	overnmental unit described in	
	(b)(1)(A)(iv). (Complete Par		o o oporo		TOTAL GIRL GOOGLEG IT	
		governmental unit described in	section 1	70(ь)(1)(А)(v).	
7 An organizat	on that normally receives a	substantial part of its support	from a gov	emmental	unit or from the general public	
$\overline{}$	section 170(b)(1)(A)(vi) (C	Complete Part II)				
·		170(b)(1)(A)(vi) (Complete P	•			
					ons, membership fees, and gros	\$
		npt functions—subject to cent nd unrelated business taxable		-) no more than 33 1/3% of its	
		0, 1975 See section 509 (a)				
	-	exclusively to test for public s			•	
	·				ns of, or to carry out the purpose	es of
one or more	publicly supported organizat	tions described in section 50:	3(a)(1) or se	ction 509	(a)(2) See section 509(a)(3). (heck
		conbes the type of supporting				
		ed, supervised, or controlled i				
			majority of	the directo	rs or trustees of the supporting	
	You must complete Part I					
		vised or controlled in connecti organization vested in the sa			•	
	s) You must complete Par		ine persons	i inai wiii	or or manage me supported	
	•		n connectio	n with, and	d functionally integrated with,	
		tions) You must complete F				
d Type III non	functionally integrated A	supporting organization opera	ated in conn	ection with	nits supported organization(s)	
that is not fur	ictionally integrated. The org	ganization generally must sati	sfy a distnb	ution requi	rement and an attentiveness	
	•	t complete Part IV, Sections	-			
		ed a written determination from			ype I, Type II, Type III	
	r of supported organizations	nctionally integrated supportin	g organizai	ion		
_	ing information about the si			,	en 有一种基本企业的基本内主人对应。	
(I) Name of supported	(II) EIN	(III) Type of organization	(lv) is the	rganization	(v) Amount of monetary	(vi) Amount of
organization		(described on lines 1~9		ır göverning	support (see	Other support (see
		above (see instructions))	0000	ment?	instructions)	unstructions)
			Yes	No		
(A)	·	 				
	1	l				
(A) (B)						
(B)						
(B)						
(B)						
(B)						
(B) (C) (D)				3.1	er, was about the grane.	
(B) (C) (D)					و درود پر دارای و رفی را محر ارای	

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		<u>Pai</u>	t II-y	orm 990 or 990-EZ) 2 Support Sched (Complete only Part III If the or	l ule for O If you che	rganizations cked the box	Described in on line 5, 7, or	Sections 170(b 8 of Part I or if t)(1)(A)(iv) and he organization	n failed to qualif		<u>!</u> -	! !
				Public Support (or fiscal year beginning	ig in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total	-	
			member	ants, contributions, ar ship fees received (C any "unusua! grants ";	o not							_	
			organizatio or ex	enues levied for the atton's benefit and eit pended on its behalf	建超越 3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	s par s salv k ert	2 5 n ·) ·	1 1	4.5	. <u> </u>		
MIN MIN			fumishe organiza	d by a governmental ation without charge	unit to the			K	,	15. 16.11	1.1019	_	11313
		5	The port	dd lines 1 through 3 tion of total contributions on (other than a	ons by	Constitution of the Consti						-	
			supporte	nental unit of publicly ed organization) inclu- at exceeds 2% of the on line 11, column (f)								_	
		_		upport. Subtract line 5 fr Total Support	om line 4	1/8	J. 13. * .3	10 - 27		2 3 20 3 3 3		-	
ŀ		Cateno 7	•	(or fiscal year beginning s from line 4	ig in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total	-	
1988 B	Mic	8 8 (\%10)	Gross in	ncome from interest, on the received on security		5年1月	in Later	ak, v.	事, 5 等。	. 此情事		- - 140.	家會
		9	Net inco	ome from unrelated bu s, whether or not the l arly carned on								_	
			Other in	come Do not include in the sale of capital a in Part VI)	•					_		_	
		11	Total su	upport. Add lines 7 th		33877 %			C. 1000	C described		_	
				eceipts from related a re vears. If the Form 9				fough or fifth toward	and as a spetion EO	12	J	-	
				ation, check this box a		-	ist, second, tillo,	TOUTER, OF MILITIES YE	fal as a section 50	11(0)(3)	▶ [7	
				Computation of			ntage					_] '
- 1				upport percentage for						14	*	-	1.
利利格	HATE			upport parsentide in support test—2015 stop here The organ						check this	4	763399); T	199
				support test—2014		· ·			15 is 33 1/3% or m	nore.		_)
Ì				nis box and stop here	_			=	A	4.4	▶ [J	
		17a		cts-and-circumstanc more, and if the organ		_							
				how the organization								_	1
l			organiza								▶ [_	
			15 is 10	cts-and-circumstanc % or more, and if the in Part VI how the org	organizatioi	n meets the "facts	-and-circumstand	es" test, check this	box and stop here	•	_		;
		40		ed organization			- AA 1:44 42 40	16h 17 49t •	and the to		. •	J	1.
		18	Private	foundation, if the org ons	janization d	o not check a box	x on line 13, 16a,	100, 1/a, or 1/b, ch	eck this box and s	ee			1 .

Page 20 of 42

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If the organization fails totion A. Public Support endar year (or fiscal year beginning in) Grits, 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
Girls, 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 Gross receipts from activities that are not an unrelated trade or business under section 513		(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
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 Gross receipts from activities that are not an unrelated trade or business under section 513						
sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose. Gross receipts from activities that are not an unrelated trade or business under section 513.				9,240	9,870	19,1
unrelated trade or business under section 513		ļ <u>.</u>		92,530	95,926	198,4
Tax revenues levied for the						
organization's benefit and either paid to or expended on its behalf						
The value of services or facilities furnished by a governmental unit to the organization without charge						
Total. Add lines 1 through 5				101,770	105,796	207,5
Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
Add lines 7a and 7b						
Public support. (Subtract line 7c from line 6)	Y 1200	No 18				207,5
				,		
	(a) 2011	(b) 2012	(c) 2013		(e) 2015	(f) Total
Amounts from line 6		· · · · · · · · · · · · · · · · · · ·		101,770	105,796	207,5
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				5,017	9,319	14,3
Unrelated business taxable income (les section 511 taxes) from businesses acquired after June 30, 1975	s					
Add lines 10a and 10b				5,017	9,319	14,3
Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
Total support (Add lines 9, 10c, 11,	1			1		
and 12)	L	l	<u> </u>			221,9
•	-	t, second, third, fo	urth, or fifth tax ye	ear as a section 501(c	:)(3)	
		tage				
			na (f))		15	93 545
•••	• •	-	(177		~ ~	93.54° 95.30°
			, column (f))		17	6 9
• •	,	· .	` ''		18	5 '
•			e 14, and line 15 i	s more than 33 1/3%		
	•					•
33 1/3% support tests—2014 If the or	ganization did not ch	eck a box on line	14 or line 19a, and	line 16 is more than	33 1/3%, and	
				-		.
	organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons. Amounts included on lines 2 and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. Add lines 7a and 7b Public support. (Subtract line 7c from line 6) ction B. Total Support amounts from line 6 Gross income from interest, dividends, payments received on securities bans, rents, royalties and income from similar sources. Unrelated business taxable income (les section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization, check this box and stop heteron. Computation of Public. Public support percentage from 2014 Sinvestment income percentage from 2015 linvestment income percentage from 2013 1/3% support tests—2015. If the or 17 is not more than 33 1/3%, check this 33 1/3% support tests—2014. If the or line 18 is not more than 33 1/3%, check this	organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Add lines 7a and 7b Public support. (Subtract line 7c from line 6) Ction B. Total Support Endar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) First flive years. If the Form 990 is for the organization's firs organization, check this box and stop here. Ction C. Computation of Public Support Percen. Public support percentage from 2014 Schedule A, Part III, linction D. Computation of Investment Income Pel Investment income percentage from 2014 Schedule A, Part III, to ction D. Computation of Investment Income Pel Investment income percentage from 2014 Schedule A, Part III, to not more than 33 1/3%, check this box and stop here. 33 1/3% support tests—2015. If the organization did not chance in the support tests—2014. If the organization did not chance in the support tests—2014. If the organization did not chance in the support tests—2014. If the organization did not chance in the support tests—2014. If the organization did not chance in the support tests—2014. If the organization did not chance in the support tests—2014. If the organization did not chance in the support tests—2014. If the organization did not chance in the support tests—2014. If the organization did not chance in the support tests—201	organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Add lines 7a and 7b Public support. (Subtract line 7c from line 6) Ction B. Total Support andar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, forganization, check this box and stop here ction C. Computation of Public Support Percentage Public support percentage for 2015 (line 8, column (f) divided by line 13, column Public support percentage form 2014 Schedule A, Part III, line 15 ction D. Computation of Investment Income Percentage Investment income percentage from 2014 Schedule A, Part III, line 17 33 1/3% support tests—2015 (if the organization did not check the box on line line 18 is not more than 33 1/3%, check this box and stop here. The organization is 13 1/3% support tests—2014 If the organization did not check a box on line line 18 is not more than 33 1/3%, check this box and stop here. The organization is 11 in 12 in 13 1/3% support tests—2014 If the organization did not check a box on line line 18 is not more than 33 1/3%, check this box and stop here. The organization is 13 1/3% support tests—2014 If the organization did not check a box on line line 18 is not more than 33 1/3%, check this box and stop	organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceet the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support. (Subtract line 7c from line 6) Ction B. Total Support Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, toyalties and income from similar sources Unrelated business taxable income (less section 5.11 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax ye organization, check this box and stop here ction C. Computation of Public Support Percentage Public support percentage from 2014 Schedule A, Part III, line 15 In is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publ 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 in 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publ 33 1/3% support tests—2014. If the organization did not check the box on line 14 or line 19a, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publ 33 1/3% support tests—2014. If the organization did not check the box on line 14 or line 19a, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publ	organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from disqualified persons Amounts included on lines 2 and 3 received from disqualified persons Amounts included on lines 2 and 3 received from disqualified persons Amounts included on lines 2 and 3 received from diher fain disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support. (Subtract line 7c from line 6 ction B. Total Support amounts from line 6 ction B. Total Support amounts from line 6 ction B. Total support amounts from line 6 ction B. Total support amounts from line 6 ction B. Total support amounts from lines subject the subject of the support subject of the sub	organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from disqualified persons Amounts included on lines 2 and 3 received from disqualified persons Amounts included on lines 2 and 3 received from disqualified persons Amounts included on lines 2 and 3 received from disqualified persons Amounts included on lines 2 and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support. (Subtract line 7c from line 6) Cition B. Total Support Indiar year (or fiscal year beginning in) > (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 Amounts from line 6 Ciross income from interest, dividends, payments received on securities loans, rents, royalbes and income from similar sources Unrelated business cacunities loans, rents, royalbes and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business acquired after June 30, 1975 Add lines 10a and 10b St, 017 9, 319 Net income Do not included gain or loss from the sale of capital assets (Explain in Part V) Total support (Add lines 9, 10c, 11, and 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) organization, check this box and stop here cition C. Computation of Public Support Percentage Public support percentage from 2015 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2015 (line 8, column (f) divided by line 13, column (f)) Investment income percentage from 2014 Schedule A, Part III, line 15 Investment income percentage from 2014 Schedule A, Part III, line 15 Investment income percentage from 2014 Schedule A, Part III, line 15

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Schedule A (Form 990 or 990-EZ) 2015 Tennessee Juvenile Court Services
Part IV Supporting Organizations

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	and B If you checked 11b of Part I, complete Sections A and C If you checked 11c				
	Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and	complete Pa	<u>rt V)</u>		
ection A.	All Supporting Organizations				
		ſ		Yes	No
1 Are a	ll of the organization's supported organizations listed by name in the organization's governing	j	. 1		`35″ ,
docur	nents? If "No." describe in Part VI how the supported organizations are designated. If designated by			÷	చేసి .
dass	or purpose, describe the designation. If historic and continuing relationship, explain	ļ	1_		
Did th	e organization have any supported organization that does not have an IRS determination of status		, 9X		
	section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported		O#		
organ	ization was described in section 509(a)(1) od(2) 4 is the state of the section of		2	<u> </u>	-2.5
a Dit th	e organization nave a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," enswer				
(b) an	d (c) below.	ļ	3a		
b Did th	e organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and		43		3.5000
satisfi	ied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	[a	1300
organ	ization made the determination		3b		
c Did th	e organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)				`
purpo	ses? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	į.	3c		
a Was	any supported organization not organized in the United States ("foreign supported organization")? If	1	, ,	١,	. 1
"Yes,	and if you checked 11a or 11b in Part I, answer (b) and (c) below		4a		
Did th	e organization have ultimate control and discretion in deciding whether to make grants to the foreign	ļ			3.37
suppo	orted organization? If "Yes," describe in Part VI how the organization had such control and discretion	Ī	, ,	8.00	33.3
despr	te being controlled or supervised by or in connection with its supported organizations	1	4b		
Did th	e organization support any foreign supported organization that does not have an IRS determination			400	M. A.Z
under	sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used	_ {	K.		
o to ena	sure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)				
purpo			4c		
Did th	e organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"		3,	3 %	
альж	er (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			1 6 1	` }`,
numb	ers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			<	93
(m) th	e authority under the organization's organizing document authorizing such action, and (Iv) how the action		٠.	`	
was a	ccomplished (such as by amendment to the organizing document)		5a		l
Туре	l or Type II only. Was any added or substituted supported organization part of a class already		1	X .	3
	nated in the organization's organizing document?		5b		
-	titutions only. Was the substitution the result of an event beyond the organization's control?		5c	-	
Did th	e organization provide support (whether in the form of grants or the provision of services or facilities) to		· .	277	450
	ne other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited		1		رينال بي
-	e or more of its supported organizations, or (iii) other supporting organizations that also support or	ł	£6.6	\$2.55°	
	it one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	,	В		
,	e organization provide a grant; loan, compensation, or other similar payment to a substantial contributor			ář.	(\$600)
	ed in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with		Ž.4.	Ņ.X	
•	to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	ì	7		
-	e organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	Ī	; ;		
	s," complete Part I of Schedule L (Form 990 or 990-EZ)	i	8		
	the organization controlled directly or indirectly at any time during the tax year by one or more	Ī	,		15
	alified persons as defined in section 4946 (other than foundation managers and organizations described	ţ		Ý.	160.0
•	tion 509(a)(1) or (2))? If "Yes," provide detail in Part VI	1	9a	,	207
	ne or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	İ		2	<i>(</i>) \
	pporting organization had an interest? If "Yes," provide detail in Part VI	!	9ь		
	disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	İ	()	^ y/ \	200.0
	assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.		9c		`~~
	he organization subject to the excess business holdings rules of section 4943 because of section	ŀ	<u> </u>	SE ADMINIT	diam'r
	f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	, [
,	dia	_ , _ ; }	46-	433 TX 945	(#####.
onhbo	e organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to		10a	499.000	200000000000000000000000000000000000000
		ľ	400	ar vindage in	000.00000000000000000000000000000000000
ceten	nine whether the organization had excess business holdings)	edule A (Form	10b	L	Щ

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	C-k-4	dule A (Form 990 or 990-EZ) 2015 Tennessee Juvenile Court Services 62-1275470	Page 5
		int IV Supporting Organizations (continued)	- r age 5
	<u>~r ai</u>	You	es No
	11	Has the organization accepted a gift or contribution from any of the following persons?	
		A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	
		below, the governing body of a supported organization?	
	ь	A family member of a person described in (a) above?	
	c	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.	
	Secti	tion B. Type I Supporting Organizations	11 of (14 Ob)
A. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 10 10	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	ss - No (歌歌 2) P (東 / 1)
, , ,	1	Did the directors, trustees or membership of one or more supported organizations have the power to	
		regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	
į		tax year? If "No " describe in Part VI how the supported organization(s) effectively operated supervised, or	翔ら 1
		controlled the organization's activities. If the organization had more than one supported organization,	
		describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	***
	•	organizations and what conditions or restrictions if any, applied to such powers during the tax year	
	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 carned out the purposes of the supported organization(s) that operated,	
		supervised, or controlled the supporting organization	```
	Secti	tion C. Type II Supporting Organizations	
	=	Y	s No
-4	. 1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	
ार हुएसँ इ.स.	3.7	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1	' '	or management of the supporting organization was vested in the same persons that controlled or managed	
		the supported organization(s)	
	Sect	tion D. All Type III Supporting Organizations	
	i		es No
	1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	製 1 年
		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?	
	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	`_j!`\
		the organization maintained a close and continuous working relationship with the supported organization(s)	~
] 3	By reason of the relationship described in (2), did the organization's supported organizations have a	3 5 5
	1	A second	A COLUMN TO LAND
2. 3. C	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	income or assets at all times during the tax year? If Yes,* describe in Part VI, the role the organization's	
	3 13 .	supported organizations played in this regard	
	Sect	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 Instructions)	
	а		
	ь		
	٢	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)	
		Activities Test Answer (a) and (b) below	es No
	l ','	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	
	i °	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	27 (27 - 1)
		those supported organizations and explain how these activities directly furthered their exempt purposes.	
	1	how the organization was responsive to those supported organizations, and how the organization determined	
	<u>.</u>	that these activities constituted substantially all of its activities	
ا أو ا	والمراجعة الما	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2
,,,		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	ごとい 。
	Ī	activities but for the organization's involvement	
	3	Parent of Supported Organizations Answer (a) and (b) below	2 January
	а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	
	1	trustees of each of the supported organizations? Provide details in Part VI	
	l b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	` ~ ~ ~
	l —	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard 3b	20 573 0005
	DAA	Schedule A (Form 990 or 9	#V-EX)#475m \$2

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8086 08/05/2016 2:55 PM Schedule A (Form 990 or 990-EZ) 2015 Tennessee Juvenile Court Services 62-1275470 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (B) Current Year Section A - Adjusted Net Income (A) Pnor Year (optional) 1 Net short-term capital gain 2 Recovenes of prior-year distributions 2 அன் பாக்கின் இடிக்க 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) (B) Current Year Section B - Minimum Asset Amount (A) Pnor Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) 1a a Average monthly value of securities b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 10 d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI) Acquisition indebtedness applicable to non-exempt-use assets Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 035 6 Recovenes of pnor-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Current Year 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A Enter greater of line 2 or line 3 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to

Schedule A (Form 990 or 990-EZ) 2015

emergency temporary reduction (see instructions)

instructions)

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The Address of the second in the second

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

Pa	tule A (Form 990 or 990-EZ) 2015 Tennessee Juvenil t V Type III Non-Functionally Integrated 509(a)(3)				Page
	tion D - Distributions	· · · · · · · · · · · · · · · · · · ·		Current	Year
_ <u>1</u> _2	Amounts paid to supported organizations to accomplish exempt purpo			 	
. 4	Amounts paid to perform activity that directly furthers exempt purposes organizations, in excess of income from activity	s or supported			
3	Administrative expenses paid to accomplish exempt purposes of supp	orted organizations		 	
4	Amounts paid to acquire exempt-use assets	ortaa organizaaana	·	 	
5	Qualified set-aside amounts (prior IRS approval required)				
6	Other distributions (describe in Part VI) See instructions				
7	Total annual distributions. Add lines 1 through 6				
8.	· Dispupntrolus for appeintake enbbouted ordenrisations to which the olderiffs	ition is responsive			
	(provide details in Part VI) See instructions	£\$			
9	Distributable amount for 2015 from Section C, line 6			<u> </u>	
10	Line 8 amount divided by Line 9 amount	(1)	l m	4	
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions	(m) Distribu	
	- Distribution Percentions (pre-monderions)		Pre-2015	Amount fo	
1	Distributable amount for 2015 from Section C, line 6	733,8, 37,	(3)	- Carlount II	. 2013
2	Underdistributions, if any for years prior to 2015	Radak z t		in C	7 7 7 7 8
	(reasonable cause required-see instructions)	135 C 18 7 18 18 18 18 18 18 18 18 18 18 18 18 18		13 C. C.	<u> </u>
3		. 17	100 000	1 3 7	w5 7
<u>a</u>		34.4	-		, , ,
b		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Sa 16 2 17 7 17 7 18		3,4,7,
		\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		2000,000	1 2/100
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	From 2014		18.4.5.1.1.18.5.1.1.17.15.15.15.15.15.15.15.15.15.15.15.15.15.	\$480 \$77 C	a coss
	Total of lines 3a through e Applied to underdistributions of prior years	1 100 100 100	· · · · · · · · · · · · · · · · · · ·	25.2 07	7. J. W.
	Applied to 2015 distributable amount	77 7 7 7 7 7 7	7. 7. 3.4	- / 17 / 1 / - / -	
1	Carryover from 2010 not applied (see instructions)	12 1 1 1 2	, , , , , , , , , , , , , , , , , , , ,		
j	Remainder Subtract lines 3g, 3h, and 3i from 3f		1 (1 1 t t t)	1777 11	1 , "3'
4	Distributions for 2015 from Section			25° (57)	~\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	D, line 7 \$	3.24 % 31 % cc			<u> </u>
a	Applied to underdistributions of prior years	" 4		" ."	·
	Applied to 2015 distributable amount	,			
	Remainder Subtract lines 4a and 4b from 4		- 1 / V V	<u> </u>	<u> </u>
5	• · · · · · · · · · · · · · · · · · · ·	(1) M. G. M. W. W. W. W. W. W. W. W. W. W. W. W. W.		1.00.000	
,	any Subtract lines 3g and 4a from line 2 (if amount	BALAMIZSKA		Mare Dr	- 58/8 ⁹ 2
6	greater than zero, see instructions) Remaining underdistributions for 2015 Subtract lines 3h		Parent 1/1 1/25/53	<u> </u>	7 77 72
٠	and 4b from line 1 (if amount greater than zero, see	S. S. S. S. S. S. S. S. S. S. S. S. S. S		i	
	instructions)	A RESIDENCE	24/2018/24/2014		
7	Excess distributions carryover to 2016 Add lines 3j		3 7 A Z Z Z Z	do	
	and 4c		19 m/10 19 19 19	19119	
8		7 / 1 / 0 / 0 / 0 / 0 / 0 / 0 / 0 / 0 / 0	<u> </u>	Manager Control	. 3.73
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<u>e</u>	Excess from 2015	S. J. 1877 Sep.	March 1999 14		Dept.
			**************************************	Form 990 or 99	

Schedule A (Form 990 or 990 Ez) 2015 Tennessee Juvenile Court Services Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions) Schedule A (Form 990 or 990-FZ) 2015 8 DAA

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation of education) 2: Preservation of a fistiorically important band area Preservation of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2 c 1 Number of conservation easements included in (c) acquired after 8/17/06 and not on a historic structure listed in the National Register 3 Number of conservation easements modified transferred, released, extinguished, or terminated by the organization during the tax year > 4 Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements the habitans of violations, and enforcing conservation easements during the year > S 4 Does the organization and the conservation easements in the requirements of section 170(h)(4)(B)(i) and section 170(h)(A)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organization shall interest on the footnote to the organization in the revenue statement in the balance sheet works of art, historical yeasures, or other similar assets held for public exhibition, education in hytheriance of public service, prowder in Part XIII she te	_					_			8086 08/05/3	7016 2 55 PM
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Information about Schedule D (Form 990) and its instructions is at www.irs.nov/form990. Insigneticin	Departir	nent of the Treasury	Part IV, time			, or 12b			Open to	Public
Part II	Internal	Revenue Service	Information about Sche			www.irs.gov	form99			
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public service, provide the following amounts relating to these items				•			,			
(i) Revenue included on Form 990, Part VIII, line 1		•		-			•	s		
(ii) Assets included in Form 990, Part X		• •					•	\$		
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the				cal treasures, or othe	er similar assets for financia	il gain, provid	e the			
following amounts required to be reported under SFAS 116 (ASC 958) relating to these items		-				J, p. 5	_			
a Revenue included on Form 990, Part VIII fine 1				, , , , , , , , , , , , , , , , , , , ,	-		•	\$		
b Assets included in Form 990, Part X	_b_/	Assets included in For	rm 990, Part X				•	\$		
For Paperwork Reduction Act Notice, see the Instructions for Form 990 Schedule D (Form 990) 20		sperwork Reduction	Act Notice, see the Instruction	s for Form 990				Schedul	e D (Form	990) 2015

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chedule D (Form 990) 2015 Tennesse	ee Juvenile Co	urt Services	62-1275470	Page
Partill Organizations Maintaini	na Collections of Art.	Historical Treasures.		Assets (continued)
3 .Using the organization's acquisition, accer- collection items (check all that apply)	ssion; and other records chi	ckieny of the following that	are a significant use of;i	s 持数的 化对极槽
a Public exhibition	d 🗍 Loan	or exchange programs		
b Scholarty research	e Othe			
c Preservation for future generations	٠ ـــ			
4 Provide a description of the organization's	collections and explain how	they further the organization	n's exempt purpose in Pa	ari
XIII	Concentration and explain man	and, rather the digunctation		
5 During the year, did the organization solice	it or receive donations of art.	historical treasures, or other	r sımilar	
assets to be sold to raise funds rather tha				Yes N
Part IV Escrow and Custodial A				
Complete if the organization		Form 990, Part IV, line	9, or reported an a	mount on Form
990, Part X, line 21.				
1a Is the organization an agent, trustee, cust	odian or other intermediary f	or contributions or other asse	ets not	, – –
included on Form 990, Part X?	8			∐ Yes ∐ !
b If "Yes," explain the amangement in Part X	(III and complete the following	ng table:	-	4 6 2 1 1 1 1 1 1 1
			ļ	Amount
c Beginning balance			1c	
d Additions during the year			1d	
e Distributions during the year			_1e	
f Ending balance			1f	<u> </u>
2a Did the organization include an amount or	n Form 990, Part X, line 21,	for escrow or custodial accou	int liability?	Yes J
b If "Yes," explain the arrangement in Part X	(III Check here if the explan	ation has been provided on f	Part XIII	
Part V. Endowment Funds.				
Complete if the organization	on answered "Yes" on	Form 990, Part IV, line	10	
	(a) Current year	(b) Prior year (c) Two y	ears back (d) Three ye	ers back (e) Four years bac
1a Beginning of year balance				
b Contributions				
c Net investment earnings, gains, and				
losses	1. 1. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	48 1 184 184		- 44 mil 1 1 2 1 2 1 2 1 4 1
d Grants or scholarships			7	, TO 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
e Other expenditures for facilities and				
programs				
f Administrative expenses				
	1	t		1
g End of year balance	urrent year end balance /lin	e 10, column (a)) held as		
g End of year balance2 Provide the estimated percentage of the control		B 1g, column (a)) held as		
g End of year balance 2 Provide the estimated percentage of the c a Board designated or quasi-endowment ▶	%	e 1g, column (a)) held as		
g End of year balance Provide the estimated percentage of the case a Board designated or quasi-endowment	%	e 1g, column (a)) held as		
g End of year balance Provide the estimated percentage of the case Board designated or quasi-endowment became became the permanent endowment became the permanent permanent became the permanent permanent became the permanent permanent became the permanent permanent became the permanent	% % %	e 1g, column (a)) held as		
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g End of year balance Provide the estimated percentage of the case a Board designated or quasi-endowment ▶ Permanent endowment ▶ The percentages on lines 2a, 2b, and 2c s Are there endowment funds not in the possible.	% % should equal 100%		ed for the	
g End of year balance 2 Provide the estimated percentage of the case a Board designated or quasi-endowment ▶ b Permanent endowment ▶ c Temporanily restricted endowment ▶ The percentages on lines 2a, 2b, and 2c s 3a Are there endowment funds not in the posorganization by	% % should equal 100%		ed for the	Yes
g End of year balance 2 Provide the estimated percentage of the case a Board designated or quasi-endowment ▶ b Permanent endowment ▶ c Temporanily restricted endowment ▶ The percentages on lines 2a, 2b, and 2c s 3a Are there endowment funds not in the posorganization by (i) unrelated organizations	% % should equal 100%		ed for the	3a(i)
g End of year balance 2 Provide the estimated percentage of the case a Board designated or quasi-endowment ▶ b Permanent endowment ▶ c Temporanly restricted endowment ▶ The percentages on lines 2a, 2b, and 2c s 3a Are there endowment funds not in the posorganization by (i) unrelated organizations (ii) related organizations	% % should equal 100% ssession of the organization	that are held and administere	ed for the	3a(i) .
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g End of year balance 2 Provide the estimated percentage of the case a Board designated or quasi-endowment became the case of the case and designated or quasi-endowment became the case of the case	% should equal 100% seession of the organization mizations listed as required of the organization's endowment	that are held and administered to the second		3a(i) 3a(ii) 4 3b 4 8
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Schedule D (Form 990) 2015

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

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Part VII	Investments—Other Securities.	ile Court Services	62-1275470	Page
<u> </u>	Complete if the organization answered (a) Description of security or category	tes on Form 990, Part IV, III (b) Book value	(c) Method of valuation	ne 12
	(including name of security)	(5) 225 112	Cost or end-of-year market val	tue -
) Financial (denvallves		 	
	eld equity interests		<u> </u>	
3) Other				
—(A)——	· · · · · · · · · · · · · · · · · · ·			
(B)				
(C)			1	
(D)				
(E)				
(F)				
(G)				
(H)			<u> </u>	
	n (b) must equal Form 990, Part X, col (B) line 12.) ▶	12 C S WAS SON	
Part VIII		W	. 44. 0 = 530030 544.0	
	Complete of the organization answered (a) Description of investment	(b) Book value	(c) Method of valuation (c) Method of valuation (cost or end-of-year market valuation	
(1)			, , , , , , , , , , , , , , , , , , , ,	
(2)				·
(3)	***************************************		1	
(4)				
(5)				
(6)				
(7)				
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otal. (Colum	n (b) must equal Form 990, Part X, col (B) line 13)) >	Company of	
	Other Assets.			
otal. (Colum	Other Assets. Complete if the organization answered	"Yes" on Form 990, Part IV, lir		
Part IX	Other Assets. Complete if the organization answered (a) De-	"Yes" on Form 990, Part IV, III	ne 11d See Form 990, Part X, lu	
Part IX	Other Assets. Complete if the organization answered	"Yes" on Form 990, Part IV, III	ne 11d See Form 990, Part X, lu	ne 15
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Part IX (1) (2)	Other Assets. Complete if the organization answered (a) De-	"Yes" on Form 990, Part IV, III	ne 11d See Form 990, Part X, lu	ne 15
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chedule D (Form 990) 2015 Tennessee Juvenile Court		Page 4	
Pärt XI Reconciliation of Revenue per Audited Financial St. Complete if the organization answered "Yes" on Form S		m	
Total revenue, gains, and other support per audited financial statements	1	ı	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		· ·	
a Net unrealized gains (losses) on investments	2a		
b Donated services and use of facilities	26	\$^}	
c Recovenes of prior year grants	2c	grad	
d Other (Describe in Part XIII)	2d]		٠
e Add lines 2a through 2d 3 Subtract line 2 from lines 2 to 13 Subtract line 2 from lines 1 to 13 Part VIII, line 12, but not on line 1:	Mary Mary Mary Mary Mary Mary Mary Mary	r reguler regions.	12
a Investment expenses not included on Form 990, Part VIII, line 7b	4a 📑		
b Other (Describe in Pari XIII)	4b 3		
c Add lines 4a and 4b		<u>c </u>	
5 Total revenue Add lines 3 and 4c (This must equal Form 990, Part I, line 12)			
Part XII Reconciliation of Expenses per Audited Financial S Complete if the organization answered "Yes" on Form S		um.	
Total expenses and losses per audited financial statements	1	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	7	7.	
a Donated services and use of facilities	2a .	">\	
b Prior year adjustments	2b		
c Other losses	2c		٠
d Other (Describe in Part XIII)	2d		٤.
of Add lines 2a through 20 high to the line of the line of the lines are through the lines are the lines of the lines are the lines of the lines are the lines of the lines are the lines of the lines are the lines of the lines are the lines of the lines are the lines of the lines are the lines ar		● はないではないできょうをというと、食業が は、はないできょうない 対象がははか 当	Ш
Subtract line 20 from the 1.		3 N. 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Arthu
Amounts included on Form 990, Part IX, line 25, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b	· ' 4a · ' 🏁	*	
b Other (Describe in Part XIII)	 " 	** I	
w Suici (Subulua III i dit Am /	41b .	<u> </u>	
•	4b	.	
c Add lines 4a and 4b	4	6 5	
•	Part IV, lines 1b and 2b, Part V, line 4, Part	5	
c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18 Part:XIII Supplemental Information. ovide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part IV, lines 1b and 2b, Part V, line 4, Part provide any additional information	5	
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	Schedule D (Form 990) 2015	Tennessee .	Juvenile Court Services		
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· 167 連繫,政獨	建新式连畅点对翻译经过	ស្ថែក ដែលប្រឹក្សា ស្ត្រាស់ ស្រុក ស្រុក ស្រុក ស្រុក ស្រុក ស្រុក ស្រុក ស្រុក ស្រុក ស្រុក ស្រុក ស្រុក ស្រុក ស្រុក ស្រុក ស្រុក ស្រុក	· 本 的图》中 明 教学 和 的特别特别和教育	· 查查 / 每每 / 每	loggerik kalit-dega de e - vizi (v. kje d
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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 2015

Department of the Treasury Internal Revenue Service

Attach to Form 990 or 990-E7

Open to Public

Name of the organization

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

Inspection

Tennessee Juvenile Court Services

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 y of Rorm 990 is sent to and reviewed by the President and Secretary/Treasurer prior to signing and filing tax return with the IRS.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy After disclosure of all material facts and appropriate investigation, the governing board and/or committee members will decide if a conflict of interest exists. The governing board and committee members will then consider all options or alternatives and a decision will be made as to entering into a transaction or arrangement.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing documents are made available to the public on the website.

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Unrealized Loss on Investments -37,472 1912连沙走上,惟能横冰横横横,横横,连渡 横脚的横横,茫茫 200 Total

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

Schedute O (Form 990 or 990-EZ) (2015) 0 4 80 0 8