Form 990

Return of Organization Exempt From Income Tax

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

2016

DLN: 93493286005157 OMB No 1545-0047

(چە

foundations) Do not enter social security numbers on this form as it may be made public

•	ment of the Treasu I Revenue Service	Information about Form 990 and its instructions is at www				open to Public Inspection
A F	or the 2016 c	alendar year, or tax year beginning 01-01-2016 , and ending 12-3	1-2016			
□ Ad	ck ıf applıcable dress change	C Name of organization Tennesseans For Student Success Inc		D Employer 10 47-254195		ication number
☐ Inr	me change tial return	Doing business as				
Fın ⊡ etur	n/terminated	Number and street (or P O box if mail is not delivered to street address) Room/su	ite	E Telephone nu	ımber	
	nended return	511 Union St		(615) 490-	6161	
⊔ Ар	plication pending	City or town, state or province, country, and ZIP or foreign postal code Nashville, TN 37219				445.040
		E Name and address of numerical officer		G Gross receip		.445,010
		F Name and address of principal officer Adam Lister	subord	a group returr inates? subordinates	n for	□Yes ☑No □Yes ☑No
I Tax	x-exempt status	☐ 501(c)(3)		" attach a list	•	instructions)
J W	ebsite:► TNS	SUCCESS ORG	H(c) Group	exemption nur	mber	>
K Forn	n of organization	✓ Corporation ☐ Trust ☐ Association ☐ Other ►	L Year of format	cion 2014 M	State	of legal domicile TN
Pa	rt I Sum	mary				
	1 Briefly des	scribe the organization's mission or most significant activities		- T		
Ce	ine missio	on is to support and pursue a better public education and improved student	acnievement i	n rennessee		
nan						
Activities & Governance	2 Check the	is box $ ightharpoonup \square$ if the organization discontinued its operations or disposed of m	ore than 25%	of its net asse	tc	
Ĝ		of voting members of the governing body (Part VI, line 1a)		or its het asse	3	5
≫ 5	4 Number	of independent voting members of the governing body (Part VI, line 1b) $$.		1	4	5
<u>u</u>	5 Total nur	nber of individuals employed in calendar year 2016 (Part V, line 2a)		•	5	0
<u>}</u>	6 Total nur	nber of volunteers (estimate if necessary)		•	6	25
ď		related business revenue from Part VIII, column (C), line 12			7a	0
	b Net unrel	lated business taxable income from Form 990-T, line 34			7b	
		(D 1)/(TT 41)	Prio	r Year		Current Year
흪		tions and grants (Part VIII, line 1h)		750,000		2,445,010
Rəvenue	1	ent income (Part VIII, column (A), lines 3, 4, and 7d)		256		0
æ		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		230		
		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		750,256		2,445,010
		nd similar amounts paid (Part IX, column (A), lines 1–3)				0
		paid to or for members (Part IX, column (A), line 4)				0
ç		other compensation, employee benefits (Part IX, column (A), lines 5–10)		514,139		489,964
Expenses	16a Professio	onal fundraising fees (Part IX, column (A), line 11e)				0
ē.	b Total fundr	raising expenses (Part IX, column (D), line 25) ▶12,185				
ŭ	17 Other exp	penses (Part IX, column (A), lines 11a–11d, 11f–24e)		667,989		1,600,668
	18 Total exp	penses Add lines 13–17 (must equal Part IX, column (A), line 25)		1,182,128		2,090,632
	19 Revenue	less expenses Subtract line 18 from line 12		-431,872		354,378
Net Assets or Fund Balances			Beginning o	of Current Year		End of Year
alar	20 Total ass	ets (Part X, line 16)		473,041		827,419
t As		ollities (Part X, line 26)		,		027,119
A L		ts or fund balances Subtract line 21 from line 20		473,041		827,419
Par	t III Sign	ature Block				
knowl		erjury, I declare that I have examined this return, included, it is true, correct, and complete $$ Declaration of prepa				

U kr any knowled

Type or print name and title

Sign Here Signature of officer Adam Lister President

Paid Preparer Use Only

Print/Type preparer's name W Craig Ballentine CPA Preparer's signature W Craig Ballentine CPA Firm's name PATTERSON HARDEE & BALLENTINE PC

Firm's address ► 1889 GENERAL GEORGE PATTON DR SUITE FRANKLIN, TN 37067

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2016)						Page 2
Par	t IIII Statement of	Program Servic	e Accomplis	hments			
	Check if Schedule	O contains a respo	nse or note to	any line in this Part III			. 🗆
1	Briefly describe the orga	nızatıon's mıssıon					
The	mission is to support and p	oursue a better pub	lic education an	d improved student ach	levement in Tennessee		
2	Did the organization und	ertake any significa	nt program ser	vices during the year wh	nich were not listed on		
	the prior Form 990 or 99	0-EZ?				☐ Yes [√ No
	If "Yes," describe these r	new services on Sch	nedule O				
3	Did the organization ceas	se conducting, or m	ake significant	changes in how it condu	icts, any program	_	_
	services?					☐ Yes	✓ No
	If "Yes," describe these o	changes on Schedul	e O				
4		01(c)(4) organizatio	ns are required	to report the amount o	largest program services, as measur f grants and allocations to others, th		es
4a	(Code) (Expenses \$	1,791,161	including grants of \$) (Revenue \$)	
	See Additional Data						
	-						
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)	
	-						
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)	
70	(code	/ (Expenses \$		merading grants or \$	/ (Nevenue 3	,	
	-						
	-						
4d	Other program services	(Describe in Schedi	ıle O)				
	(Expenses \$		uding grants of	\$) (Revenue \$)	
4e	Total program service	expenses >	1,791,1	.61			

or X as applicable

17

Yes

Yes

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11a

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11c

11d

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12a

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Form **990** (2016)

ı	Par	EIV	Che	cklis	st c	of R	equ	uire	ed S	Sch	edu	ıles	5	
			organ Iule A											، (

Section 501(c)(3) organizations.

If "Yes." complete Schedule C. Part III 🥦 .

Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1
Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2
Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 🔁	3

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

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 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

b Was the organization included in consolidated, independent audited financial statements for the tax year?

14a Did the organization maintain an office, employees, or agents outside of the United States?

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

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

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

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

Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 Did the organization maintain collections of works of art, historical treasures, or other similar assets?

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

13 Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

assessments, or similar amounts as defined in Revenue Procedure 98-19?

29

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

current and former officers, directors, trustees, key employees, and highest compensated employees If "Yes,"

20a No 20b

22

23

24a

24b

24c

24d

25a

25b

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Yes

Form 990 (2016)

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Nο

Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a	12		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gan (gambling) winnings to prize winners?	ning 1c		No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		No
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		No
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority or financial account in a foreign country (such as a bank account, securities account, or other financial account)?			No
h	If "Yes," enter the name of the foreign country	14		INO
٠	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAI	₹)		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	on 6a	Yes	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts with the deductible?	vere 6b	Yes	
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to Form 8282?	o file 7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
_	Did the consumation discount the consumation of the discount of the contract o	7e 7f		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	/1		
y	required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Fo 1098-C?	orm 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time duthe year?	-		
_		8		No
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
ь 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter	9b		No
	1 1			
	Initiation fees and capital contributions included on Part VIII, line 12	 		
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	$ \mid$		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		No
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	224		
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		F	orm 00	0 (2016)

Par	t VI	Governance, Management, and DisclosureFor each "Yes" response to lines 2 to 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedu			" respo	nse to l	ines
		Check if Schedule O contains a response or note to any line in this Part VI					✓
Se	ction	A. Governing Body and Management					ı
		,	ı			Yes	No
1a	Enter	the number of voting members of the governing body at the end of the tax year	1a	5			
	body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or r committee, explain in Schedule O					
b	Enter	the number of voting members included in line 1a, above, who are independent	1b	5			
2	Did ar officer	ny officer, director, trustee, or key employee have a family relationship or a busines r, director, trustee, or key employee?	ss rela	tionship with any other	2		No
3		e organization delegate control over management duties customarily performed by cers, directors or trustees, or key employees to a management company or other p			3		No
4	Did th	e organization make any significant changes to its governing documents since the	prior F •	Form 990 was filed?	4		No
5	Did th	e organization become aware during the year of a significant diversion of the organ	nizatioi	n's assets?	5		No
6	Did th	e organization have members or stockholders?			6		No
7a		e organization have members, stockholders, or other persons who had the power toers of the governing body?	o elect	t or appoint one or more	7a		No
b		ny governance decisions of the organization reserved to (or subject to approval by) as other than the governing body?			7b		No
8	Did th	e organization contemporaneously document the meetings held or written actions illowing					
а	The g	overning body?			8a	Yes	
b	Each (committee with authority to act on behalf of the governing body?			8b	Yes	
9		re any officer, director, trustee, or key employee listed in Part VII, Section A, who o ization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>		t be reached at the	9	Yes	
Se	ction	B. Policies (This Section B requests information about policies not requi	red b	y the Internal Revenu	e Code	e.)	
						Yes	No
		e organization have local chapters, branches, or affiliates?			10a		No
b		s," did the organization have written policies and procedures governing the activitie ranches to ensure their operations are consistent with the organization's exempt pu			10b		
11a	Has th	ne organization provided a complete copy of this Form 990 to all members of its go	vernin	g body before filing the	11a	Yes	
b	Descr	be in Schedule O the process, if any, used by the organization to review this Form	990				
		e organization have a written conflict of interest policy? If "No," go to line 13	•		12a		No
b	Were conflic	officers, directors, or trustees, and key employees required to disclose annually int its?	erests	that could give rise to	12b		No
С		e organization regularly and consistently monitor and enforce compliance with the fule O how this was done			12c		No
13	Did th	e organization have a written whistleblower policy?			13		No
14	Did th	e organization have a written document retention and destruction policy?			14		No
15		e process for determining compensation of the following persons include a review ans, comparability data, and contemporaneous substantiation of the deliberation and					
а	The o	rganization's CEO, Executive Director, or top management official			15a		No
b	Other	officers or key employees of the organization			15b		No
	If "Ye	s" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a		e organization invest in, contribute assets to, or participate in a joint venture or sir e entity during the year?			16a		No
b		s," did the organization follow a written policy or procedure requiring the organizati					
		It venture arrangements under applicable federal tax law, and take steps to safegue with respect to such arrangements?		e organization's exempt	16b		
Se		C. Disclosure					
17		e States with which a copy of this Form 990 is required to be filed▶					
18		n 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990 ble for public inspection Indicate how you made these available Check all that app		990-T (501(c)(3)s only)			
		wn website 🔲 Another's website 🗹 Upon request 🗹 Other (explain in Sc		•			
19	policy	be in Schedule O whether (and if so, how) the organization made its governing doo , and financial statements available to the public during the tax year					
20		the name, address, and telephone number of the person who possesses the organi erson Hardee Ballentine 1889 General George Patton Dr Ste 2 Franklin,TN 37061					

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

- of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, or 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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours		ne bo	ox, ι n of	t che unle: ficer	ss pers	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) Adam Lister	40 00									
President	0 00	Х		X				122,400	0	11,002
(2) Austın McMullin	0 00									
Chairman	0 00			Х				0	0	0
(3) Kurt Faires	0 00			,,					0	
Secretary	0 00	Х		X				0	0	0
(4) Christi Gibbs	0 00									
Director	0 00	Х						0	0	0
(5) Scott Broyles	0 00									
Director	0 00	Х						0	0	0
(6) Darrell Cobbins Director	1 00	х						0	0	0
										Form 990 (2016)

Form 990 (2016) Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (C)
Position (do not check more (B) **(F)** Estimated (A) (D) Name and Title Reportable Reportable Average

Name and Tide	hours per week (list any hours	than c	ne b	ox, u in of	inles ficer rusti	and a	on	compensation from the organization (W-	compensation from related organizations (W-	amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b Sub-Total						>					
c Total from continuation sheets to P	art VII, Sectio	nΑ.				•					
d Total (add lines 1b and 1c)						>		122,400			
Total number of individuals (including	but not limited	to thos	e liste	ed al	bove	e) who	rece	eived more than	\$10	0,000	

1b Sub-Total				٠.		•				
c Total from continuation sheets to Pa	art VII, Sectio	nΑ.				•				
d Total (add lines 1b and 1c)						•		122,400		11,002
2 Total number of individuals (including			e liste	ed a	bove) wh	o rece	eived more than	\$100,000	•

c	otal from continuation sheets to Part VII, Section A	>				
d ·	otal (add lines 1b and 1c)	•	122,400			11,002
2	Total number of individuals (including but not limited to those listed above of reportable compensation from the organization \blacktriangleright 1	e) wh	no received more than	\$100,000		
				_	Yes	No
				Г		

С	Total from continuation sheets to Part VII, Section A ▶					
d	Total (add lines 1b and 1c)			11,002		
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 1					
			Yes	No		

	Total from continuation sheets to Part VII, Section A ▶ Total (add lines 1b and 1c)			11,002	
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 1				
			Yes	No	
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the				

	Fotal from continuation sheets to Part VII, Section A			11,002			
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 1						
			Yes	No			
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No			
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the						

d 1	Total (add lines 1b and 1c)			11,002
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \blacktriangleright 1			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4		No

	interface for the second of th	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		No
		4	110
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	No
S	ection B. Independent Contractors		

7	organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	No				
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	No				
Se	Section B. Independent Contractors						
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of confrom the organization. Report compensation for the calendar year ending with or within the organization's tax year.	mpensa	tion				

			-	1	140		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person						
S	Section B. Independent Contractors						
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year						
	(A)	(B)		(C)			

from the organization. Report compensation for the calendar year ending with or within the organization's tax year.						
(A) Name and business address	(B) Description of services	(C) Compensation				
,	Data Research	329,472				
1878 Watermark Dr SE Grand Rapids, MI 49546						
AdVictory LLC	Issue Advocacy	313,580				

Form **990** (2016)

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

190 Monroe Ave Ste 500 Grand Rapids, MI 49503

compensation from the organization ▶ 2

Part		II Statement of	Revenue						rage 3
				a respo	onse or note to an	y line in this Part VII	ı		🗆
						(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1	a Federated campaig	ınc	1a			revenue		512-514
इंद	ľ	b Membership dues							
ran		·		1b					
 A.G.		c Fundraising events		1c					
iffs ar		d Related organization		1d					
ع <u>ئ</u> ر		e Government grants (c		1e					
Contributions, Gifts, Grants and Other Similar Amounts		f All other contributions and similar amounts n		1f	2,445,010				
outi her		above			2,443,010				
		g Noncash contribute in lines 1a-1f \$	ons included						
Con		h Total. Add lines 1a-1	1 f			2.445.010			
	┵	ii Totai.Add iiies Ta-1		• •	Busines	2,445,010 is Code			1
Service Revenue	2a	l							
34				_					
3		•							
ž		:							
کن ح		•							
gran		- f All other program se	rvice revenue						
Program	۵	J Total. Add lines 2a-2	f		•	0			
		Investment income (i			nterest and other	. 7			
		similar amounts) .			interest, and other	>	0		
	4	Income from investm	ent of tax-exe	empt bo	ond proceeds	<u> </u>	0		
	5	Royalties				>	0		
	_	Con an area to	(ı) Rea	l	(II) Personal	_			
	6	a Gross rents							
		b Less rental expenses							
		c Rental income or				_			
	·	(loss)							
		d Net rental income o	or (loss)			7	0		
			(ı) Securit	ties	(II) Other				
	7:	a Gross amount from sales of							
		assets other than inventory							
		b Less cost or				\dashv			
		other basis and sales expenses							
		C Gain or (loss)				7			
		d Net gain or (loss) .		•	•		0		
	8	Gross income from f	_	_					
ıπe		(not including \$ contributions reporte		of					
₹ .		See Part IV, line 18		a	•				
æ	l	b Less direct expense		b					
Other Revenue		c Net income or (loss)			ents 🕨	_	0		
Ö	9	Gross income from o See Part IV, line 19		ies					
				а					
	ı	b Less direct expense		b					
		c Net income or (loss)		activit	es		0		
	10	aGross sales of invent returns and allowand	tory, less ces						
				а	l				
		b Less cost of goods s	sold	b					
		C Net income or (loss)		invent	ory >		0		
	_	Miscellaneous	Revenue		Business Code				
	1:	1a							
		ь							
		с							
		d All other revenue .							
	'	e Total. Add lines 11a	a−11d		•		0		
	1:	2 Total revenue. See	Instructions			2,445,01	0		
						2,443,01			Form 990 (2016)

Form 99	90 (2016)				Page 10
	Statement of Functional Expenses 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	inizations must comp	olete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX			🔽
	include amounts reported on lines 6b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
	ants and other assistance to domestic organizations and mestic governments See Part IV, line 21	0	CNP	general expenses	
	ants and other assistance to domestic individuals. See Part line 22	0			
gov	ants and other assistance to foreign organizations, foreign vernments, and foreign individuals. See Part IV, line 15 d 16	0			
4 Ber	nefits paid to or for members	0			
	mpensation of current officers, directors, trustees, and / employees	133,402	66,701	66,701	
def	mpensation not included above, to disqualified persons (as includer section $4958(f)(1)$) and persons described in the third section $4958(c)(3)(B)$	0			
7 Oth	ner salaries and wages	283,232	221,891	61,341	
	nsion plan accruals and contributions (include section 401 and 403(b) employer contributions)	0			
9 Oth	ner employee benefits	40,869	36,782	4,087	
10 Pay	yroll taxes	32,461	23,185	9,276	
11 Fee	es for services (non-employees)				
	nagement	0			
b Led	gal	21,318	10,659	10,659	
_	counting	15,367	·	15,367	
	bying	106,271	106,271	,	
	ofessional fundraising services See Part IV, line 17	0			
	restment management fees	0			
g Oth	ner (If line 11g amount exceeds 10% of line 25, column amount, list line 11g expenses on Schedule O)	121,704	99,543	13,283	8,878
	vertising and promotion	12,192	8,750	3,442	
	ice expenses	25,693	10,084	15,609	
	ormation technology	0		,	
	yalties	0			
	cupancy	51,581		51,581	
	· · ·	24,079	17,070	3,824	3,185
18 Pay	ments of travel or entertainment expenses for any leral, state, or local public officials	0	17,070	3,024	
	nferences, conventions, and meetings	3,300		3,300	
	erest	0			
	ments to affiliates	0			
•	preciation, depletion, and amortization	0			
	surance	818		818	
24 Oth	ner expenses Itemize expenses not covered above (List scellaneous expenses in line 24e If line 24e amount sceeds 10% of line 25, column (A) amount, list line 24e penses on Schedule O)				
a Is	ssue Advocacy	890,292	890,292		
b P	olitical Issue Advocacy	270,821	270,821		
c D	oor to Door Canvasing	18,789	18,789		
d G	ieneral and Admin Expneses	17,869	4,467	13,402	
e A	II other expenses	20,574	5,856	14,596	122
25 To	tal functional expenses. Add lines 1 through 24e	2,090,632	1,791,161	287,286	12,185
rep	int costs. Complete this line only if the organization ported in column (B) joint costs from a combined ucational campaign and fundraising solicitation				

Form **990** (2016)

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

1 Cash-non-interest-bearing	473,041	1	827,419
2 Savings and temporary cash investments		2	0
3 Pledges and grants receivable, net		3	0
4 Accounts receivable, net		4	0
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	0

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) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L

0 Assets Notes and loans receivable, net 0 0 Inventories for sale or use 8 0 9 Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other

10a basis Complete Part VI of Schedule D 0 10b 10c **b** Less accumulated depreciation 0 11 11 Investments—publicly traded securities . 12 0 12 Investments—other securities See Part IV, line 11 . 0 13 13 Investments-program-related See Part IV, line 11 0 14 Intangible assets 14 0 15 Other assets See Part IV, line 11 15

Total assets. Add lines 1 through 15 (must equal line 34) . .

Organizations that follow SFAS 117 (ASC 958), check here lacktriangle and

Accounts payable and accrued expenses

Grants payable . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Total liabilities. Add lines 17 through 25 .

complete lines 27 through 29, and lines 33 and 34.

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

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

16

17

18

26

27 28

29

30

31

32

33

34

Fund Balances

Assets or

Net

473.041

16 17

18

0

26

27

28

29

30

31

32

33

34

473,041

473,041

473.041

827.419

0

827,419

827,419

827.419

Form **990** (2016)

19 Deferred revenue . . . 19 20 Tax-exempt bond liabilities . . . 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, 25 and other liabilities not included on lines 17-24)

3а

3b

Nο

Form 990 (2016)

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

Additional Data

Software ID: 16000303

Software Version: 2016v3.0

Name: Tennesseans For Student Success Inc.

EIN: 47-2541950

Form 990 (2016)

Form 990, Part III, Line 4a: To support student-centered education policies that serve as the foundation of Tennessees efforts to improve student achievement, we support higher academic standards. an effective and aligned assessment, an expansion of public school choice for parents, strong mechanisms for accountability, and better more effective tools for teachers

Political Campaign and Lobbying Activities

DLN: 93493286005157

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE C (Form 990 or 990-

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

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

S S S f the S S f the Prox	ection 501(c)(3) organizations Cor Section 501(c) (other than section 5 Section 527 organizations Complet corganization answered "Yes" or Section 501(c)(3) organizations that Section 501(c)(3) organizations that corganization answered "Yes" or axy Tax) (see separate instruction	n Form 990, Part IV, Line 4, or Form 99 t have filed Form 5768 (election under s t have NOT filed Form 5768 (election un n Form 990, Part IV, Line 5 (Proxy Tax s), then	Part I-C I-A and C below 90-EZ, Part VI, Iir ection 501(h)) Co der section 501(h	Do not con e 47 (Lobb mplete Par)) Complet	nplete Part I- bying Activit t II-A Do not e Part II-B D	B :i es), :com	then plete Part II-E t complete Pa	3 art II-A
• 5	Section 501(c)(4), (5), or (6) organiz	zations Complete Part III						
	ne of the organization				Employer id	lentii	fication nun	ıber
ren	nesseans For Student Success Inc				47-2541950			
Par	t I-A Complete if the orga	nization is exempt under sectio	n 501(c) or is			niza	tion.	
1 2 3	Provide a description of the organ Political expenditures Volunteer hours	nization's direct and indirect political cam	npaign activities in	Part IV	•	\$.		276,321
		nization is exempt under sectio	n 501(c)(3).					
1		ax incurred by the organization under se				ф.		
2	· ·	ax incurred by organization under se				₽.		
	•	, ,				⇒.		
3	If the organization incurred a sect	tion 4955 tax, did it file Form 4720 for t	nis year?				☐ Yes	☐ No
4a	Was a correction made?						☐ Yes	☐ No
b								
Par		nization is exempt under sectio		-		3).		
1	Enter the amount directly expend	ed by the filing organization for section	527 exempt funct	ion activitie	s 🕨	\$.		
2	Enter the amount of the filing org function activities	anızatıon's funds contributed to other or	rganızatıons for se	ection 527 e	xempt	\$.		
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and or	Form 1120-POL,	lıne 17b	>	\$		
4	Did the filing organization fileFor	m 1120-POL for this year?					☐ Yes	✓ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere ee (PAC) If additional space is needed,	ount paid from the ed to a separate p	filing orgar olitical orga	nization's fun nization, suc	ds A	lso enter the	
	(a) Name	(b) Address	(c) EIN	filing or	unt paid fron ganization's f none, enter -0-		(e) Amount contributions and promp directly deliv separate porganization enter	received otly and vered to a political If none,
2								
3								
4								
5								
6								
		<u> </u>	1					

Schedule C (Form 990 or 990-EZ) 2016

activity

1

Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

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

(b)

Amount

(a)

Yes

No

Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 2a If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

u	If the filling organization incurred a section 4312 tax, the filling form 4720 for this year.					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) (6).						
				Yes	s 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		
	Post TTT P Complete if the experiencian is expert under certical FO1/cV/1) costion FO1/cV/E) or certical FO1/cV/E)					

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is

answered "Yes." 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year h Carryover from last year 2b

С 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4

5 Taxable amount of lobbying and political expenditures (see instructions) Part IV **Supplemental Information**

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference Part I-A, Line 1 - Direct and Indirect Political Campaign Activities

Explanation Our direct political expenditures included issue advocacy mail and online advertisements that supported one of our four policies priorities (higher standards, an aligned assessment, teacher and school accountability,

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 9					93493286005157	
SCHEDUL	E O Sunnlemen	Supplemental Information to Form 990 or 990-EZ		OMB No 1545-0047		
(Form 990 or EZ)	990- Complete to pr	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.		ons on	2016	
Department of the T	reasurv		990 or 990-EZ) and its instru- v/form990.	ctions is at	Open to Public Inspection	
Internal Revenue 6e Name of the org	fication number					
Fennesseans For Student Success Inc 47-2541950						
990 Schedule	e O, Supplemental Information	on				
Return Reference			Explanation			
Form 990, Part VI, Line 11b Form 990 Review Process	The draft 990 is prepared by Tenner g in conjunction with its bookkeepe review and revisions. The Executive Student Success Inc. Tax Lawyer for Directors.	 The draft is provided Director then present 	to the Executive Director for is a draft to the Tennesseans for			

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 18 Explanation of Other Means Forms Available For Public Inspection	No Documents are made available to the Public, except for those required by Law Form 1024 and 990 are made available upon request

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	No Documents are made available to the Public, except for those required by Law Form 1024 and 990 are made available upon request

Return Reference

The Organization has adopted FASB ASC 740-10, Accounting for Uncertainty in Income Taxes

Part XII, Line
1 Change of
Accounting
Method

The standard prescribes a minimum recognition threshold and measurement methodology that a
tax position taken or expected to be taken in a tax return is required to meet before bei
ng recognized in financial statements. It also provides guidance for De-recognition classi
fication, interest and penalties, accounting for interim period disclosure, and transition

990 Schedule O. Supplemental Information

990 Schedule O, Supplemental Information

Return
Reference

Explanation

Form 990,	The oversight policies and selection of an independent accountant by the finance committee has not changed since the prior year
Part XII, Line	
2 Change of	
Oversight or	
Selection	

Process

Return Explanation
Reference

990 Schedule O. Supplemental Information

FORM 990, PART V, USING THE ORGANIZATION'S EIN LINE 2A