163097 West TN Public Television Council, 62-1177950 ph:731-881-7561 Platform Version: 22.3.4 Federal Version: 22.3.4

Federal Diagnostics

Prepared by: David W. Hart, CPA 11/03/2023 04:28 PM dhart

Critical Messages
None
Electronic Filing
None
Informational Messages
 □ Force field entered with data "1,299,081" on Screen PSA □ Force field entered with data "1,152,160" on Screen Bal-2 □ Force field entered with data "WEST" on Screen ELF □ Historical Report (990 Return) does not display 2023 column if Tax Projection has not been selected. □ Option to suppress all contributor information (Schedule B) is selected on this return □ Preparer 'David W. Hart, CPA'
Missing Data
Prior Year Data
Income, Analysis of Activities, Additional Information
☑ Other revenue 1,896
Overrides
Overridden field with data "146,729" on Form / Schedule 990 Overridden field with data "234,383" on Form / Schedule 990

Forms 990 / 990-EZ Return Summary

For calendar year 2022, or tax year beginning 07/01/22, and ending 06/30/23

62-1177950

West TN Public Television Council,

Net Asset / Fund Balance at Begin	g 0 00.			
Revenue				
Contributions		1,654,757		
Program service revenue	_	128,376		
Investment income	_	40,403		
Capital gain / loss	_			
Fundraising / Gaming:	_			
Gross revenue				
Direct expenses				
Net income				
Other income	_	0		
Total revenue	_		1,823,536	
Expenses				
Program services		1,299,081		
Management and general	_	670,300		
Fundraising	_	96,547		
Total expenses	_	•	2,065,928	
Excess / (deficit)				-242,392
, ,				
Changes				-3
not nood, it and I	Balance at End of Ye	sai		1,872,172
Reconciliation of			Reconciliation of	of Expenses
	Revenue		Reconciliation of expenses per financial statem	of Expenses
Reconciliation of lotal revenue per financial statements	Revenue			of Expenses
Reconciliation of lotal revenue per financial statements ess: Unrealized gains	Revenue	Total e Less: Do	expenses per financial statement	of Expenses
Reconciliation of lotal revenue per financial statements ess: Unrealized gains Donated services	Revenue	Total e Less: Do	expenses per financial statem	of Expenses
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Reconciliation of tal revenue per financial statements ss: Unrealized gains Donated services Recoveries Other us: Investment expenses	Revenue	Total e Less: Do Pri Lo: Ott Plus:	expenses per financial statemented services or year adjustments esses her	of Expenses nents
Reconciliation of stal revenue per financial statements ss: Unrealized gains Donated services Recoveries Other Us: Investment expenses Other	Revenue	Total e Less: Do Pri Lo: Ott Plus:	expenses per financial statemented services or year adjustments asses her estment expenses her Total expenses per return	of Expenses nents
Reconciliation of stal revenue per financial statements as: Unrealized gains Donated services Recoveries Other us: Investment expenses Other	Revenue	Total e Less: Do Pri Lo: Ott Plus: Inv Ott	expenses per financial statemented services or year adjustments asses her estment expenses her Total expenses per return	2,065,92
Reconciliation of stal revenue per financial statements ass: Unrealized gains Donated services Recoveries Other us: Investment expenses Other	1,823,5 Beginning 2,874,6	Total e Less: Do Pri Lo: Ott Plus: Inv Ott Balance She Ending 03 2,703,	nated services or year adjustments sses ner estment expenses ner Total expenses per return	2,065,92
Reconciliation of stal revenue per financial statements ass: Unrealized gains Donated services Recoveries Other US: Investment expenses Other Total revenue per return	Beginning 2,874,6	Total e Less: Do Pri Los: Ott Plus: Inv Ott 36 Balance She Ending 2,703, 36 831,	nated services or year adjustments sses ner restment expenses ner Total expenses per return eet Difference: 445 273	2,065,92
Reconciliation of stal revenue per financial statements ss: Unrealized gains Donated services Recoveries Other Us: Investment expenses Other Total revenue per return Assets	1,823,5 Beginning 2,874,6	Total e Less: Do Pri Los Ott Plus: Inv Ott 36 Balance She Ending 2,703, 36 831,	nated services or year adjustments sses ner restment expenses ner Total expenses per return eet Difference: 445 273	2,065,92
Reconciliation of stal revenue per financial statements as: Unrealized gains Donated services Recoveries Other Us: Investment expenses Other Total revenue per return Assets Liabilities	Beginning 2,874,6	Total e Less: Do Pri Los: Ott Plus: Inv Ott 36 Balance She Ending 2,703, 36 831,	nated services or year adjustments sses ner restment expenses ner Total expenses per return eet Difference: 445	2,065,92
Reconciliation of stal revenue per financial statements ass: Unrealized gains Donated services Recoveries Other us: Investment expenses Other Total revenue per return Assets Liabilities	Beginning 2,874,6 760,0 2,114,5	Total e Less: Do Pri Los: Ott Plus: Inv Ott 36 Balance She Ending 2,703, 36 831,	nated services or year adjustments sses ner restment expenses ner Total expenses per return eet Difference: 445	2,065,92
Reconciliation of stal revenue per financial statements ess: Unrealized gains Donated services Recoveries Other US: Investment expenses Other Total revenue per return Assets Liabilities	Beginning 2,874,6 760,0 2,114,5	Total e Less: Do Pri Los Ott Plus: Inv Ott 36 Balance She Ending 2,703, 36, 41,872, aneous Information	nated services or year adjustments sses ner restment expenses ner Total expenses per return ret 245 273 172 -242,	2,065,92

Alexander Thompson Arnold, PLLC 304 North Lindell Martin, TN 38237 731-587-5145

November 3, 2023

CONFIDENTIAL

West TN Public Television Council, P O Box 966 Martin, TN 38237

Dear Katrina:

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Alexander Thompson Arnold, PLLC

Alexander Thompson Arnold, PLLC 304 North Lindell Martin, TN 38237 731-587-5145

November 3, 2023

163097

CONFIDENTIAL

West TN Public Television Council, P O Box 966 Martin, TN 38237

For professional services rendered in connection with the preparation of the following tax forms for year ending 6/30/23.

Amount due \$ 0.00

Filing Instructions

West TN Public Television Council,

Exempt Organization Tax Return

Taxable Year Ended June 30, 2023

Date Due: November 15, 2023

Remittance: None is required. Your Form 990 for the tax year ended 6/30/23 shows no

balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return

electronically. Form 8879-TE, IRS e-file Signature Authorization for an Exempt

Organization should be signed and dated by an authorized officer of the

organization and returned to:

Alexander Thompson Arnold, PLLC

304 North Lindell Martin, TN 38237

Important: Your return will not be filed with the IRS until the signed Form

8879-TE has been received by this office.

Other: Your return is being filed electronically with the IRS and is not required to be

mailed. If you Mail a paper copy of your return to the IRS it will delay the

processing of your return.

Form **8879-TE**

IRS *e-file* Signature Authorization for a Tax Exempt Entity

For calendar year 2022, or fiscal year beginning 7/01, 2022, and ending 6/30, 20 23

2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879TE for the latest information.

EIN or SSN Name of filer West TN Public Television Council, 62-1177950 Name and title of officer or person subject to tax Peter Noll Gen. Manager Part I Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b 1,823,536 1a Form 990 check here 2a Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9) 2b 3a Form 1120-POL check here b Total tax (Form 1120-POL, line 22) ______ 3b 4a Form 990-PF check here 5a Form 8868 check here b Balance due (Form 8868, line 3c) 5b 6a Form 990-T check here **b** Total tax (Form 990-T, Part III, line 4) _______ 6b 7a Form 4720 check here 8a Form 5227 check here b FMV of assets at end of tax year (Form 5227, Item D) 8b 9a Form 5330 check here **b Tax due** (Form 5330, Part II, line 19) **9b** 10a Form 8038-CP check here **b** Amount of credit payment requested (Form 8038-CP, Part III, line 22) .. 10b Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that X I am an officer of the above entity or I am a person subject to tax with respect to (name and that I have examined a copy of the , (EIN) 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only X Lauthorize Alexander Thompson Arnold, PLLC to enter my PIN as my signature ERO firm name Enter five numbers, but do not enter all zeros on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. 11/06/23 Signature of officer or person subject to tax **Certification and Authentication** ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 71626938237 Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. David W. Hart, CPA 11/06/23 ERO's signature Date

> ERO Must Retain This Form — See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

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 foundations)

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

Go to www.irs.gov/Form990, for instructions and the latest information.

2022
Open to Public

Department of the Treasury Internal Revenue Service

		due Service Go to www.irs.gov/Formy90 for instructions				inspection							
<u>A</u>	For the		g 06/30/2										
В	Check if a	pplicable: C Name of organization		D	Employer	identification number							
\Box	Address cl	West TN Public Television Council,											
=		Doing business as 62-1177950											
Ш	Name cha	Number and street (or P.O. box if mail is not delivered to street address)	·										
	Initial retur	m P O Box 966		'	731-8	881-7561							
	Final return												
닏'	terminated	Martin TN 38237		6	Gross rec	eipts							
	Amended				01033 160								
	Application	n pending Bodnor Frond		H(a) Is this a group	return for s	ubordinates? Yes X No							
ш	, ipplication	Rodney Freed				uded? Yes No							
				H(b) Are all subord									
		<u>_</u>		If "No," att	tach a list.	See instructions							
1	Tax-exem	npt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527										
J	Website:	www.wljt.org	_	H(c) Group exempt	tion numbe	er							
<u>к</u>	Form of o	organization: X Corporation Trust Association Other	I Ye	ear of formation:		M State of legal domicile:							
	art I	Summary	1	sar or rormation		iii cate or regar acriticitor							
_													
	1 5	Briefly describe the organization's mission or most significant activities:											
မွ		To provide Public Broadcasting Services to al	.1 of West										
ВП		Tennessee.											
err													
Governance	2 (Check this box if the organization discontinued its operations or disposed of	of more than 25%	of its net assets.									
∞		Number of voting members of the governing body (Part VI, line 1a)			3	16							
	4 1	Number of independent voting members of the governing body (Part VI, line 1b)			4	16							
Activities	T	Fotal number of individuals ampleyed in colonder year 2022 (Port V. line 20)	·		-	39							
(≨:		Total number of individuals employed in calendar year 2022 (Part V, line 2a)											
Ą		Total number of volunteers (estimate if necessary)			6	0							
	7 a ⊺	Fotal unrelated business revenue from Part VIII, column (C), line 12			7a	0							
	b١	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		7b	0							
			_	Prior Year		Current Year							
Φ	8 (Contributions and grants (Part VIII, line 1h)		1,786,		1,654,757							
Ž		Program service revenue (Part VIII, line 2g)	139,	,114	128,376								
Revenue	10 li	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		5,	,870	40,403							
8		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			,896	(
	1	Fotal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 1.		1,933,		1,823,536							
				±//35/	, 3, 5, 5	1/025/550							
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1–3)				0							
		Benefits paid to or for members (Part IX, column (A), line 4)				0							
S	15 8	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-	10)	709,	,537	669,412							
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e) Fotal fundraising expenses (Part IX, column (D), line 25)				0							
ĝ	b T	Fotal fundraising expenses (Part IX, column (D), line 25) 96	, 547										
ш	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,316,	733	1,396,516							
	18 T	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		2,026,		2,065,928							
	1	Revenue less expenses. Subtract line 18 from line 12	·····	-92,		-242,392							
JC SS	, 13 F	TOTALIA 1000 OAPONOOO. GUDUGUU IIIO 10 IIOIII IIIO 12		Beginning of Curren		End of Year							
Net Assets or Fund Balances	20 T	Total assets (Part X, line 16)		2,874,		2,703,445							
Ass(Ba	21 T	Fatal liabilities (Part V. line 20)		760,		831,273							
ng'	21 '	Net assets or fund balances. Subtract line 21 from line 20		2,114,		1,872,172							
	•			2,111,	, 50 /	1,0/2,1/2							
	art II	Signature Block											
		nalties of perjury, I declare that I have examined this return, including accompanying sche		,	of my kn	owledge and belief, it is							
tru	ue, corre	ect, and complete. Declaration of preparer (other than officer) is based on all information	oi wnich preparer h	as any knowledge.									
Sig	n	Signature of officer			Date								
He		Peter Noll Ge	n. Manage	er									
		Type or print name and title		_ =									
		Print/Type preparer's name Preparer's signature		Date	Charl	if PTIN							
Paid	Н				Check	□ "							
		David W. Hart, CPA David W. Hart, CPA		11/03/2	self-em								
	parer		PLLC	Firm'	's EIN	62-1110839							
USE	Only	304 North Lindell											
		Firm's address Martin, TN 38237		Phor	ne no.	731-587-5145							
May	the IR	S discuss this return with the preparer shown above? See instructions				X Yes No							

Check if Schedule O contains a response or note to any line in this Part III Britity describe the organization imission: To provide Public Broadcasting Services to all of West Tennessee.	Form	990 (2022) West TN Public Television Council, 62-1177950	Page 2
1 Seelly discribe the organization's mission: To provide Public Broadcasting Services to all of West Tennessee. 2 Did the organization undertake any significant program services during the year which were not listed on the provide provided these new services on Schedule O. 3 Did the organization cases conducting, or make significant changes in how it conducts, any program services consciously. If Yes, 10 describe these changes on Schedule O. 4 Describe the organization's program services accomplishments for each of its three largest program services, as measured by expenses. Seaton 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program services exported. 4a (Code:) (Expenses S 1,299,081 including grants of S) (Revenue \$ 128,376) Tennessee. 4b (Code:) (Expenses S including grants of S) (Revenue \$) N/A 4c (Code:) (Expenses S including grants of S) (Revenue \$) N/A 4d (Code:) (Expenses S including grants of S) (Revenue \$) N/A 4d (Code:) (Expenses S including grants of S) (Revenue \$) N/A 4d (Code:) (Expenses S including grants of S) (Revenue \$) (Revenue \$) N/A 4d (Code:) (Expenses S including grants of S) (Revenue \$) (Revenue \$) N/A 4d (Code:) (Expenses S including grants of S) (Revenue \$) (Revenue \$) N/A	Pa	The state of the s	
To provide Public Broadcasting Services to all of West Tennesses. 2 Did the organization undertake any significant program services during the year which were not fisted on the prior Form 950 or 990-EZ? 3 Did the organization ocase conducting, or make significant changes in how it conducts, any program services. If Yes, describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to expert the amount of grants and allocations to others, the total opposes, and revenue, if any, for each program service specture, the total opposes, and revenue, if any, for each program service specture, and the total opposes, and revenue, if any, for each program service specture, and the total opposes, and revenue, and the program service specture. 4a (Code:) (Expenses \$ 1,299,081 including grants of \$) (Revenue \$ 128,376) To provide Public Broadcasting Services to all of West Tennessee. 4b (Code:) (Expenses \$ including grants of \$) (Revenue \$) N/A (Code:) (Expenses \$ including grants of \$) (Revenue \$) According to the program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)			<u></u>
Temnessee. 2 Dot the organization undertake any significant program services during the year which were not listed on the prior Form 800 or 90-05-27. If "Yes," describe these new services on Schoolule O. 3 Dot the organization cases conducting, or make significant changes in how it conducts, any program services schoolule O. 4 Describe the organization spongarm service accomplishments for each of its three largest program services, as measured by expenses. Section 901(c)(a) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service seported. 4a (Code:			
2. Did the organization undertake any significant program services during the year which were not listed on the prior Form 980 or 980-E2? If "Yes," describe these new services on Schedule O. 3. Did the organization cases conducting, or make significant changes in how it conducts, any program survices accomplishments for each of its three largest program services accomplishments for each of its three largest program services accomplishments for each of its three largest program services. as measured by expenses. Section 501(0)(3) and 501(0)(4) organizations are required to report the amount of grants and allocations to others, the total opposes, and revenue, it any, for each program service perpended. 4a (Code:) (Expenses \$ 1,299,081 including grants of \$) (Revenue \$ 128,376) To provide Public Broadcasting Services to all of West Tennessee. 4b (Code:) (Expenses \$ including grants of \$) (Revenue \$) N/A 4c (Code:) (Expenses \$ including grants of \$) (Revenue \$) N/A 4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)			
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3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Sciolen 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code: Stepenses \$ 1,299,081 including grants of \$) (Revenue \$ 128,375) To provide Public Broadcasting Services to all of West Tennessee. 4b (Code: Stepenses \$ including grants of \$) (Revenue \$) N/A Stepenses \$ including grants of \$) (Revenue \$) N/A Stepenses \$ including grants of \$) (Revenue \$) (R		'	[165 21 NO
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(Expenses \$ including grants of \$) (Revenue \$)	<i>1</i> ~ 1	Other program conject (Describe on Schedule C.)	
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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			l
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			l
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	1 _		3,
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			3,
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			x
•	complete Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10		"		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		122
• •	VII, VIII, IX, or X, as applicable.			
а	Did			
-	complete Calcadida D. David VIII	11a	x	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more			
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d				
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			l
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			l
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
4.0	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	4.0		v
20-	If "Yes," complete Schedule G, Part III	19	-	X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		<u> </u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		-
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	24		x
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21	L	\triangle

Form 990 (2022) West TN Public Television Council, 62-1177950 Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III X 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 X 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a 24a **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 during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 25b Х Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II X 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III X 27 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Х 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 or IV, and Part V, line 1 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(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 related organization? If "Yes," complete Schedule R, Part V, line 2 X Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and X 19? Note: All Form 990 filers are required to complete Schedule O. 38 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 0 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable **b** Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and

reportable gaming (gambling) winnings to prize winners?

Pa	art V Statements Regarding Other IRS Filings and Tax Compliance (continu	ued)			Yes	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	2a	39			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authori	ty over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial	accou	ınt)?	4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accour	ts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	е				
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	joods				
	and services provided to the payor?			7a		
b				7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa					
	required to file Form 8282?			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 or		?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file For			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	-				
•				8		
9	Sponsoring organizations maintaining donor advised funds.			00		
a	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9a 9b		
10	Section 501(c)(7) organizations. Enter:			90		
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		_		
11	Section 501(c)(12) organizations. Enter:	100				
a	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources	u				
-	analysis are sounds along an analysis of forms them.	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	le the appropriation linewood to increase wealthed books plane in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
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	13b				
С	Enter the amount of reserves on hand	13c				
14a	Did the exemplation receive any property for independence of which the toy year?			14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					
	excess parachute payment(s) during the year?			15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incom	e?	16		Х
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activ	ities				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

Form 990 (2022) West TN Public Television Council, 62-1177950 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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 16 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 on Schedule O. Enter the number of voting members included on line 1a, above, who are independent 16 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? X 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 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: X The governing body? Each committee with authority to act on behalf of the governing body? X 8b 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 on Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes 10a Did the organization have local chapters, branches, or affiliates? 10a 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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Describe on Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 14 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 15a Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on 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? 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed **None** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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. Describe on 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 20

Monica Reese

Martin

Clement Hall

731-881-7561

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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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

△ Check this box if neither the org	anization nor an	y rela	ated	orga	aniza	ition co	om	pensated any current office	er, director, or trustee.	
(A) Name and title	(B) Average hours per week	offi	k, unle	Pos check ess pe nd a o	erson i directo	than ones both an	n)	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	(list any hours for related organizations below		Officer	(ey employee	Highest compensated employee	ormer	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) Lynn Alexander	0.00									
Board Member	0.00	X						0	0	0
(2) Steve Bowers	0.00									
Board Member	0.00	X						0	0	0
(3) Angela Demaris										
	0.00									
Board Member	0.00	X						0	0	0
(4)Cindy Emerson										
	0.00									
Board Member	0.00	Х						0	0	0
(5) Mike McWherter	0.00									
Doord Nombon	0.00	x						0	0	0
Board Member (6) Bob Moore	0.00	^		_		\vdash		U	U	<u> </u>
(6) BOD MOOLE	0.00									
Board Member	0.00	x						0	0	0
(7) Crystal Ozier	0.00	^						U	0	0
(/)CIYSCAI OZIEI	0.00									
Board Member	0.00	x						0	0	0
(8) Johnny Shaw	0.00	<u> </u>						0	0	
(8) Commiy Snaw	0.00									
Board Member	0.00	x						0	0	0
(9) Jeremy Tubbs	0.00						-	0	0	0
(a) detemy tubbs	0.00									
Board Member	0.00	x						0	0	0
(10) Amanda Walker	0.00								<u> </u>	
(10) Amarida Warker	0.00									
Board Member	0.00	x						0	0	0
(11) LaShonda William		<u> </u>				$\vdash \vdash$	-		<u> </u>	<u> </u>
(II) Lasiiona Militai	0.00									
Board Member	0.00	x						0	0	0
DOGE G. FIGHIDGE	0.00			I	l			U	<u> </u>	

163097 11/03/2023 4:29 PM Form 990 (2022) West TN Public Television Council, 62-1177950

Part VII Section A. Officers	s, Directors, Tru	ıstee	s, K	ey E	mpl	oyee	s, a	and Highest Compensated	I Employees (continued)				
(A) Name and title	(B) Average hours per week	bo	x, unle	Pos check ess pe nd a	rson i	than o s both or/trust	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) imated a of othe	er	
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	org	from th ganization ed organ	ie n and	S
(12) Kim Foster Treasurer	0.00			х				0	0				0
(13) Rodney Freed	0.00												
President (14) John Fry	0.00			X				0	0				0
(15) Julie Allen	0.00 Ward 0.00			Х				0	0				0
Secretary	0.00			x				0	0				0
1b Subtotal	ets to Part VII,	Secti	ion /	٩									
Total number of individuals (ir reportable compensation from			d to	thos	e lis	ted a	bove	e) who received more than	\$100,000 of			Yes	No
 3 Did the organization list any feemployee on line 1a? If "Yes, 4 For any individual listed on line organization and related organization. 	" complete Schedus 1a, is the sum	dule of r	<i>J foi</i> epor	<i>suc</i> table	h ind	dividi npen:	<i>ial</i> satio	on and other compensation	from the		3		х
individual 5 Did any person listed on line for services rendered to the control of the control	1a receive or ac	crue	com	 pens	 atior	fror	n ar	ny unrelated organization or	· individual		5		x
Section B. Independent Contractor	ors												
Complete this table for your f compensation from the organ	ization. Report co							lar year ending with or with	in the organization's tax ye	ear.			
Name and	(A) d business address							Descript	(B) ion of services		Con	(C) npensatio	on
2 Total number of independent								se listed above) who	0				

Pa	rt V			f Revenue	ains a	resnor	ose or note	to any line in thi	s Part VIII		
		Official II	Och	sadie o com		СТСЭРО	isc of floto	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	2a b c d	Ines 1a-1f Total. Add lines Membership TN Channel Special Eve	es ations ontribution gifts, graph included included Dues Inccept	ns) Ints, d above in magnitude in magnitud		\$	Business Code	1,654,757 94,543 33,333 500	94,543 33,333 500		
		All other program Total. Add lines					•	128,376			
	4	Investment incorrother similar am Income from inv	ounts) estme	nt of tax-exemp	t bond	proceed	 S	40,403	40,403		
	5 6a b	6a Gross rents 6a (i) Real (ii)				Personal					
	c Rental inc. or (loss) 6c d Net rental income or (loss)					i) Other					
Revenue		other than inventory Less: cost or other basis and sales exps.	7a 7b								
er		Gain or (loss) Net gain or (loss)	7c s)		. <u></u>						
Othe		Gross income from (not including \$ of contributions rep 1c). See Part IV, lir Less: direct expe	orted one 18	on line	8a 8b						
		Net income or (I Gross income fr activities. See Pa	om ga art IV,	iming line 19	9a 9b						
	b Less: direct expenses 9b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a										
		Less: cost of go Net income or (I			10b entory						
Miscellaneous Revenue	11a b c						Business Code				
Mis	d	All other revenue	е								
		Total. Add lines Total revenue.						1,823,536	168,779	0	0

	on 501(c)(3) and 501(c)(4) organizations must con		er organizations must com	olete column (Δ)	
Occu	Check if Schedule O contains a respor				X
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			3	
-	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	586,932	438,413	98,049	50,470
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	40 655	20.040	E 01 E	2 600
9	Other employee benefits	40,657	30,042	7,015	3,600 3,510
10	Payroll taxes	41,823	30,920	7,393	3,510
11	Fees for services (nonemployees):				
a	Management	40 517		40 517	
b	Legal	40,517 8,000		40,517 8,000	
C	Accounting	8,000		8,000	
d	Lobbying Professional fundraising services. See Part IV, line 17				
e f	Investment management fees				
g g	Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	39,617	39,617		
17	Travel	20,877	3,794	10,979	6,104
18	Payments of travel or entertainment expenses				_
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	5,006	624	3,063	1,319
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	381,112	234,383	146,729	
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	204 250	204 250		
a	Programming Expense	304,359	304,359	E2 764	7 257
b	Insurance - Business	126,647 124,891	66,526 527	52,764 124,364	7,357
q	Advertising/Promotions Dues & Subscriptions	110,854	300	107,145	3,409
d	*	234,636	149,576	64,282	20,778
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	2,065,928	1,299,081	670,300	96,547
25 26		2,003,920	1,2,7,7,001	070,300	70,31
-	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
DAA					- 000

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or ne	ote to any	line in this Part X			
					(A)		(B)
					Beginning of year		End of year
					1,875,519	1	424,377
:	2	Savings and temporary cash investments				2	1,423,769
;	3	Pledges and grants receivable, net				3	
1		Accounts receivable, net			59,019	4	39,814
!		Loans and other receivables from any current or for		· · · · · · · · · · · · · · · · · · ·			
		trustee, key employee, creator or founder, substantia					
		controlled entity or family member of any of these pe				5	
- 1 '		Loans and other receivables from other disqualified					
ssets		under section 4958(f)(1)), and persons described in				6	
. ISS	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			10.004	8	0 153
		Prepaid expenses and deferred charges		,	12,204	9	9,153
1	0a	Land, buildings, and equipment: cost or other		7 247 007			
	. !	basis. Complete Part VI of Schedule D Less: accumulated depreciation	10a	7,247,997	007 061		607 007
	b I	Less: accumulated depreciation	10b	6,550,110	927,861	10c	697,887
	1 1	Investments—publicly traded securities				11	
	2	Investments—other securities. See Part IV, line 11				12	
		Investments—program-related. See Part IV, line 11				13	22 125
		Intangible assets		14	22,125 86,320		
		Other assets. See Part IV, line 11			2,874,603	15	2,703,445
-		Total assets. Add lines 1 through 15 (must equal lin	11,652	16 17	29,252		
		7 Accounts payable and accrued expenses B Grants payable			11,052	18	27,232
					684,828	19	663,871
		Deferred revenue			0017020	20	005/071
		Escrow or custodial account liability. Complete Part		D		21	
۔ ا		Loans and other payables to any current or former of					
Liabilities		trustee, key employee, creator or founder, substantia					
<u>i</u>		controlled entity or family member of any of these pe				22	
ر ٿ		Secured mortgages and notes payable to unrelated				23	
	24	Unsecured notes and loans payable to unrelated thir	rd parties	~		24	7,051
ı		Other liabilities (including federal income tax, payable					, , ,
		parties, and other liabilities not included on lines 17-					
		of Schedule D	, ,		63,556	25	131,099
2	26	Total liabilities. Add lines 17 through 25			760,036	26	831,273
		Organizations that follow FASB ASC 958, check					
Se	;	and complete lines 27, 28, 32, and 33.	<u> </u>				
<u>u</u> 2	27	Net assets without donor restrictions			1,186,707	27	1,152,160
8 2	28	Net assets with donor restrictions			927,860	28	720,012
밀	(Organizations that do not follow FASB ASC 958,					
딘		and complete lines 29 through 33.					
<u>ة</u> 2		Capital stock or trust principal, or current funds				29	
Set Set		Paid-in or capital surplus, or land, building, or equipr				30	
S 3	31	Retained earnings, endowment, accumulated income	e, or other	funds		31	
Net Assets or Fund Balances					2,114,567	32	1,872,172
_ 3	3	Total liabilities and net assets/fund balances			2,874,603	33	2,703,445

Form **990** (2022)

orm	1990 (2022) West TN Public Television Council, 62-1177950			Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,82	23,5	536
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,065,92		
3	Revenue less expenses. Subtract line 2 from line 1	3	 -24	42,3	392
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	 2,1	14,	567
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			-3
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	1,8	72,3	L72
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		 		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	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?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
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 on Schedule O and describe any steps taken to undergo such audits	<u>.</u>	 3b		

Form **990** (2022)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

West TN Public Television Council, 62-1177950

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

		-1	a material and the state of	- 11 1 /F 11	-bd		\					
_	orga		·	e it is: (For lines 1 through 12, o	-							
1	Н	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).										
2	Н	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)										
3	Ц	-		ce organization described in se			· -					
4	Ш			I in conjunction with a hospital	described in	sectio	on 170(b)(1)(A)(iii). Enter the h	ospital's name,				
_		city, and state		·····								
5	Ш	-		of a college or university owned	or operated t	by a g	overnmental unit described in					
6	section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7	x	•		substantial part of its support from	•	,,,,	· ·					
•	<u>==</u>	Ū	section 170(b)(1)(A)(vi). (C		om a governin	nomai	unit of from the general public	,				
8	Ш			170(b)(1)(A)(vi). (Complete Part								
9	Ш	-	_	cribed in section 170(b)(1)(A)(i			_	ge				
			or a non-land-grant college o	of agriculture (see instructions).	Enter the nar	me, cit	y, and state of the college or					
10	П	university:	on that normally receives (1)	more than 33 1/3% of its supp	ort from cont	tributio	one membership fees and are					
10	ш			pt functions, subject to certain				33				
				d unrelated business taxable in	-							
		acquired by t	he organization after June 3	0, 1975. See section 509(a)(2)	. (Complete F	Part III	.)					
11	Ш	An organizati	on organized and operated	exclusively to test for public safe	ety. See sect	tion 50	09(a)(4).					
12	Ш	-		exclusively for the benefit of, to								
				ons described in section 509(a scribes the type of supporting or				Check				
	а		<u>-</u>	erated, supervised, or controlled	•		•	na				
	_			ver to regularly appoint or elect				9				
		supportin	g organization. You must c	omplete Part IV, Sections A a	nd B.							
	b	Type II.	A supporting organization su	pervised or controlled in connec	ction with its	suppo	rted organization(s), by having					
				ting organization vested in the	same persons	s that	control or manage the support	ed				
	С		ion(s). You must complete functionally integrated. A s	Part IV, Sections A and C. upporting organization operated	d in connectio	n with	, and functionally integrated w	ith,				
		its suppo	rted organization(s) (see ins	structions). You must complete	Part IV, Sec	tions	A, D, and E.					
	d			I. A supporting organization ope								
				e organization generally must sa nust complete Part IV, Section	-		-	ess				
	е	_ ·	,	eived a written determination from								
				n-functionally integrated suppor	ting organizat	tion.						
	f		mber of supported organizati									
	g		ollowing information about the									
(i)		e of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–10	(iv) Is the organisted in your go	nization verning	(v) Amount of monetary support (see	(vi) Amount of other support (see				
		,		above (see instructions))	document?		instructions)	instructions)				
					Yes	No						
(A)												
(B)												
(C)												
(D)												
(E)												
Total												

Schedule A (Form 990) 2022 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 **(e)** 2022 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 1,607,204 1,814,426 2,185,813 1,786,719 1,654,757 9,048,919 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 3 1,814,426 1,607,204 2,185,813 1,786,719 1,654,757 9,048,919 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 9,048,919 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total Amounts from line 4 1,814,426 1,607,204 2,185,813 1,786,719 1,654,757 9,048,919 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or 10

	loss from the sale of capital assets							
	(Explain in Part VI.)							
11	Total support. Add lines 7 through 10							9,048,919
12	Gross receipts from related activities, etc. (see instructions)							883,951
13	First 5 years. If the Form 990 is for the or	ganization's first, s	second, third, fourt	h, or fifth tax year	as a section 501(c)(3)		

organization, check this box and stop here Section C. Computation of Public Support Percentage

Public support percentage for 2022 (line 6, column (f) divided by line 11, column (f))

5	Public support percentage from 2021 Schedule A, Part II, line 14	15	100	0.00%
6a	33 1/3% support test—2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this			
	box and stop here. The organization qualifies as a publicly supported organization			X
b	33 1/3% support test—2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check			
	this box and stop here. The organization qualifies as a publicly supported organization			🔲
7a	10%-facts-and-circumstances test—2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is			
	10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in			
	Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			
b	10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line			
	15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain			
	in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported			
	organization			🔲
R	Private foundation of the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see			_

Schedule A (Form 990) 2022

14

100.00%

1

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

	If the organization fails to	qualify under the	he tests listed b	pelow, please c	omplete Part I	l.)	
	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,					<u> </u>	·
	and 12.)		1				
14	First 5 years. If the Form 990 is for the o organization, check this box and stop her	•		•	•	c)(3)	
Sec	tion C. Computation of Public S	upport Percen					
15	Public support percentage for 2022 (line 8	, column (f), divide	ed by line 13, colur	nn (f))		15	%
16	Public support percentage from 2021 Scho						%
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2022 (I			3, column (f))		17	%
18	Investment income percentage from 2021		II line 17			40	%
19a	33 1/3% support tests—2022. If the orga	nization did not ch					
	17 is not more than 33 1/3%, check this b	ox and stop here.	The organization	qualifies as a publi	cly supported org	anization	L
b	33 1/3% support tests—2021. If the orga	nization did not ch	eck a box on line	14 or line 19a, and	line 16 is more th	an 33 1/3%, and	_
	line 18 is not more than 33 1/3%, check the	is box and stop h	ere. The organizat	ion qualifies as a p	publicly supported	organization	<u>L</u>
20	Private foundation If the organization did	d not chack a hov	on line 1/1 10a or	10h chack this ho	v and see instruc	tione	

Schedule A (Form 990) 2022

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
4		
1		
2		
3a		
Ja		
3b		
3с		
-		
4a		
4b		
4c		
5a		
5b 5c		
6		
0		
7		
8		
9a		
Ja		
9b		
0-		
9с		
10a		
10b		
10.0		

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on 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	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instru	uctions,).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	<u>janizat</u>	tions					
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See							
	instructions. All other Type III non-functionally integrated supporting organizations must	st compl	lete Sections A through E					
Sect	ion A – Adjusted Net Income		(A) Prior Year	(B) Current Year				
	The state of the s		(A) Thor Tear	(optional)				
1	Net short-term capital gain	1						
2	Recoveries of prior-year distributions	2						
3	Other gross income (see instructions)	3						
4	Add lines 1 through 3.	4						
5	Depreciation and depletion	5						
6	Portion of operating expenses paid or incurred for production or collection							
	of gross income or for management, conservation, or maintenance of							
	property held for production of income (see instructions)	6						
7	Other expenses (see instructions)	7						
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8						
Sect	ion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)				
1	Aggregate fair market value of all non-exempt-use assets (see							
	instructions for short tax year or assets held for part of year):							
a	Average monthly value of securities	1a						
b	Average monthly cash balances	1b						
С	Fair market value of other non-exempt-use assets	1c						
d	Total (add lines 1a, 1b, and 1c)	1d						
е	Discount claimed for blockage or other factors							
	(explain in detail in Part VI):							
2	Acquisition indebtedness applicable to non-exempt-use assets	2						
3	Subtract line 2 from line 1d.	3						
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,							
	see instructions).	4						
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6	Multiply line 5 by 0.035.	6						
7	Recoveries of prior-year distributions	7						
8	Minimum Asset Amount (add line 7 to line 6)	8						
Sect	ion C – Distributable Amount			Current Year				
1	Adjusted net income for prior year (from Section A, line 8, column A)	1						
2	Enter 0.85 of line 1.	2						
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3						
4	Enter greater of line 2 or line 3.	4						
5	Income tax imposed in prior year	5						
6	Distributable Amount. Subtract line 5 from line 4, unless subject to							
	emergency temporary reduction (see instructions).	6						
7	Check here if the current year is the organization's first as a non-functionally integrated	Type III	supporting organization					

Schedule A (Form 990) 2022

(see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Sect	ion D – Distributions				Current Year			
1_	Amounts paid to supported organizations to accomplish exempt purport	ses		1				
2	Amounts paid to perform activity that directly furthers exempt purposes	s of supported						
	organizations, in excess of income from activity			2				
3	Administrative expenses paid to accomplish exempt purposes of supposes	orted organizations		3				
4	Amounts paid to acquire exempt-use assets			4				
5	Qualified set-aside amounts (prior IRS approval required—provide deta	ails in Part VI)		5				
6_	Other distributions (describe in Part VI). See instructions.			6				
7	Total annual distributions. Add lines 1 through 6.			7				
8	Distributions to attentive supported organizations to which the organization	ation is responsive		8				
	(provide details in Part VI). See instructions.							
9	Distributable amount for 2022 from Section C, line 6			9				
10	Line 8 amount divided by line 9 amount	ı	Т	10				
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions	s	(iii) Distributable			
			Pre-2022		Amount for 2022			
1	Distributable amount for 2022 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2022							
	(reasonable cause required-explain in Part VI). See							
	instructions.							
3	Excess distributions carryover, if any, to 2022							
	From 2017							
	From 2018							
	From 2019							
	From 2020							
	From 2021							
	Total of lines 3a through 3e							
	Applied to underdistributions of prior years							
	Applied to 2022 distributable amount							
<u>i</u>	Carryover from 2017 not applied (see instructions)							
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.							
4	Distributions for 2022 from							
	Section D, line 7: \$							
	Applied to underdistributions of prior years							
	Applied to 2022 distributable amount							
	Remainder. Subtract lines 4a and 4b from line 4.							
5	Remaining underdistributions for years prior to 2022, if							
	any. Subtract lines 3g and 4a from line 2. For result							
	greater than zero, explain in Part VI. See instructions.							
6	Remaining underdistributions for 2022. Subtract lines 3h							
	and 4b from line 1. For result greater than zero, explain in							
	Part VI. See instructions.							
7	Excess distributions carryover to 2023. Add lines 3j							
	and 4c.							
8	Breakdown of line 7:							
	Excess from 2018							
-	Excess from 2019							
	Excess from 2020							
	Excess from 2021							
е	Excess from 2022							

Schedule A (For	
Part VI	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.)
	illes 2, 3, and 6. Also complete this part for any additional information. (See instructions.)
•	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

Open to Public Inspection

Name	of the organization		Employer identification number
W	est TN Public Television Council,		62-1177950
Pa	rt I Organizations Maintaining Donor Advised For Complete if the organization answered "Yes" on	unds or Other Similar Funds or Form 990, Part IV, line 6.	Accounts.
	·	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing the		
	funds are the organization's property, subject to the organization's ex		Yes No
6	Did the organization inform all grantees, donors, and donor advisors		
	only for charitable purposes and not for the benefit of the donor or do		\Box v \Box v
Dr	conferring impermissible private benefit? rt II Conservation Easements.		Yes No
ГС	Complete if the organization answered "Yes" on	Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (che	ck all that apply).	
	Preservation of land for public use (for example, recreation or ed	ducation) Preservation of a historically	y important land area
	Protection of natural habitat	Preservation of a certified h	nistoric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified con-	servation contribution in the form of a cons	
	easement on the last day of the tax year.		Held at the End of the Tax Yea
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic structure in		2c
d	Number of conservation easements included in (c) acquired after July		2d
3	historic structure listed in the National Register Number of conservation easements modified, transferred, released, etc.	extinguished or terminated by the organiz	
,	to a second	extinguished, or terminated by the organiza	ation during the
4	Number of states where property subject to conservation easement i	is located	
5	Does the organization have a written policy regarding the periodic m		
	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling		
7	Amount of expenses incurred in monitoring, inspecting, handling of v	violations, and enforcing conservation ease	ements during the year
8	Does each conservation easement reported on line 2(d) above satisf	fy the requirements of section 170(h)(4)(B)	
			_ _
9	In Part XIII, describe how the organization reports conservation ease	·	
	balance sheet, and include, if applicable, the text of the footnote to to organization's accounting for conservation easements.	ne organization's financial statements that	describes the
Pa	rt III Organizations Maintaining Collections of Art	t Historical Treasures or Other	Similar Assets
	Complete if the organization answered "Yes" on		Olimai Addeto.
1a	If the organization elected, as permitted under FASB ASC 958, not to	o report in its revenue statement and balar	nce sheet works
	of art, historical treasures, or other similar assets held for public exhi	ibition, education, or research in furtherand	e of public
	service, provide in Part XIII the text of the footnote to its financial sta	atements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 958, to report the organization elected, as permitted under FASB ASC 958, to report the organization elected, as permitted under FASB ASC 958, to report the organization elected as permitted under FASB ASC 958, to report the organization elected as permitted under FASB ASC 958, to report the organization elected as permitted under FASB ASC 958, to report the organization elected as permitted under FASB ASC 958, to report the organization elected as the organization elected	port in its revenue statement and balance	sheet works of
	art, historical treasures, or other similar assets held for public exhibiti	ion, education, or research in furtherance	of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
_			
2	If the organization received or held works of art, historical treasures,	•	rovide the
_	following amounts required to be reported under FASB ASC 958 rela		¢.
a	Revenue included on Form 990, Part VIII, line 1		\$
<u></u>	Assets included in Form 990, Part X		Φ

d Equipment

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

Part VII	Investments - Other Securities.	-	- 44h Coo Form 000 Port	V lin - 40
	Complete if the organization answered "Yes" on F (a) Description of security or category	b) Book value	(c) Method of value	
	(including name of security)	(b) Book value	Cost or end-of-year ma	
(1) Financial o			Soot of one of your ma	er value
(1) Financial C	lerivatives d equity interests			
(a) O:1				
/Λ\				
(D)				
(C)				
(D)				
/ C \				
/ E \				
(0)				
/⊔\				
	(b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments – Program Related.			
1 4110 1111	Complete if the organization answered "Yes" on F	Form 990. Part IV. lin	e 11c. See Form 990. Part	X. line 13.
	(a) Description of investment	(b) Book value	(c) Method of value	
		, ,	Cost or end-of-year ma	rket value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" on F	orm 990. Part IV. lin	e 11d. See Form 990. Part	X. line 15.
	(a) Description	,		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities. Complete if the organization answered "Yes" on Fline 25.	Form 990, Part IV, lin	ne 11e or 11f. See Form 990	D, Part X,
1.	(a) Description of liability			(b) Book value
· /	ncome taxes			A =
	ting Lease Payable			81,88
	ed Annual Pay			49,21
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25.)			131,09

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2022 West TN Public Television Cou	ncil	, 62-11779	950	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statemer	nts Wit	h Revenue per	Return.	
	Complete if the organization answered "Yes" on Form 990, Pa	rt IV, lir	ne 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments				
	Donated services and use of facilities				
С	Recoveries of prior year grants				
d					
е	Add lines 2a through 2d	2e			
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b		4b			
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme				n.
	Complete if the organization answered "Yes" on Form 990, Pa				
1	Total expenses and losses per audited financial statements			1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
	Donated services and use of facilities	2a			
	Prior year adjustments	2b			
С		2c			
d		2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	[]			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)	4b			
				4c	
С	Add lines 4a and 4b			4c 5	
с 5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information.			5	line
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>) Int XIII Supplemental Information. Ide 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	5	line
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information.	lines 1b	and 2b; Part V, line 4	5	line
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5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>) Int XIII Supplemental Information. Ide 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	5	line
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>) Int XIII Supplemental Information. Ide 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	5	line
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>) Int XIII Supplemental Information. Ide 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	5	line
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>) Int XIII Supplemental Information. Ide 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	5	line
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>) Int XIII Supplemental Information. Ide 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	5	line
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>) Int XIII Supplemental Information. Ide 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	5	line
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>) Int XIII Supplemental Information. Ide 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	5	line
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>) Int XIII Supplemental Information. Ide 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	5	line

Schedule D (Fo	orm 990) 2022	West	TN	Public	Television	Council,	62-1177950	Page 5
Part XIII	Supplement	al Info	rmatic	on (continue	d)			
_								
• • • • • • • • • • • • • • • • • • • •								
								• • • • • • • • • • • • • • • • • • • •

SCHEDULE O (Form 990)

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Employer identification number Name of the organization West TN Public Television Council, 62-1177950 Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 Return is submitted to management for review before submission to IRS. Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing documents are available both by request and/or on the Organization's website. Form 990, Part IX, Line 24e - Other Expenses Description Tot/Prog Service Mqt & General Interconnect 37,804 General Supplies 18,077 5,217 Repairs & Maintenance 19,681 5,046 17,336 Equipment - Operating 15,527 Telephone 7,950 Software Contracts 10,922 125 Parts and Supplies

Schedule O (Form 990) 2022 Name of the organization Page 2 Employer identification number West TN Public Television Council, 62-1177950 324 11,404 Website 9,834 Special Events Legislative lobbying 7,944 Contract Labor 6,495 Vehicle Expenses 6,113 Equipment - Replacement 3,656 2,454 461 3,570 3,926 Printing 2,505 1,140 Credit Card Charges 3,333 Premiums 2,620 Human Resources 1,500 Page 1 of

Schedule O (Form 990) 2022 Employer identification number Name of the organization West TN Public Television Council, 62-1177950 Costume Rental/Actors 988 Shipping 149,576 \$ 64,282 20,778 Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation In-Kind Contributions In-Kind Contributions Book / Tax Depreciation Difference Total

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

chment uence No. 179

Department of the Treasury
Internal Revenue Service
Name(s) shown on return

West TN Public Television Council,

Identifying number 62-1177950

Busin	ess or activity to which this form relate	S						
I	<u>ndirect Depreciat</u>							
Pa	art I Election To Expe	nse Certain Prop	erty Under Section	n 179				
	Note: If you have	any listed property	y, complete Part V b	efore you c	complete Part	l.		
1	Maximum amount (see instructio		1	1,080,000				
2	Total cost of section 179 property		2					
3	Threshold cost of section 179 pro		3	2,700,000				
4	Reduction in limitation. Subtract li						4	
5	Dollar limitation for tax year. Subtract li	ne 4 from line 1. If zero	or less, enter -0 If married	filing separately,	see instructions		5	
6	(a) Description	n of property	(b) (Cost (business use	only) (c)	Elected cost		
7	Listed property. Enter the amoun	t from line 29			7		Ι.	
8	Total elected cost of section 179						8	
9	Tentative deduction. Enter the sr						9	
10	Carryover of disallowed deduction	from line 13 of your	2021 Form 4562				10	
11	Business income limitation. Enter					ns	11	
12	Section 179 expense deduction.				13		12	
13 Note	Carryover of disallowed deduction: Don't use Part II or Part III below				13			
			nd Other Deprecia	tion (Don't	include lister	d proper	hy Sc	o instructions)
14	Special depreciation allowance for			•		и ріореі	ly. Oc	e instructions.
14	during the tax year. See instruction			•			14	
15							15	
16	Property subject to section 168(f) Other depreciation (including AC	RS)					16	380,737
			le listed property. S					3007131
	iii iii iiii iiii iii iii ii ii ii ii i	tion (Don't morac	Section A	oo mondone	5110. j			
17	MACRS deductions for assets pla	aced in service in tax	vears beginning before 2	2022			17	0
18	If you are electing to group any assets place							-
			rvice During 2022 Tax				ystem	l
	() () () () ()	(b) Month and year	(c) Basis for depreciation (d) Recovery					() 5
	(a) Classification of property	placed in service	(business/investment use only–see instructions)	period	(e) Convention	(f) Meti	noa	(g) Depreciation deduction
19a	3-year property							
b	5-year property							
С	7-year property							
d	10-year property							
е	15-year property							
f	20-year property							
g	25-year property			25 yrs.		S/L		
h	Residential rental			27.5 yrs.	MM	S/L		
	property			27.5 yrs.	MM	S/L		
i	Nonresidential real			39 yrs.	MM	S/L		
	property				MM	S/L		
		ssets Placed in Serv	ice During 2022 Tax Yo	ear Using the	Alternative Dep		_	m ·
	Class life					S/L		
	12-year			12 yrs.		S/L		
	30-year			30 yrs.	MM	S/L		
	40-year	-1		40 yrs.	MM	S/L		
	art IV Summary (See in							
21	Listed property. Enter amount fro				04 Fotos		21	
22	Total. Add amounts from line 12, here and on the appropriate lines						22	380,737
		•						
23	For assets shown above and place	Lea III Service cicinica i	HE CUITEIL VEAL EILE III					

	est 1	N Public	Televis	ion Co	unci	1,	62-1	1779	50							Page 2
	art V	·	erty (Include	automobil	es cer	ain of	her vel	nicles	certain	aircra	ft and	prope	rtv use	d for		raye 2
•	41 C V	entertainmen	t, recreation,	or amuse	ement.)								•			
		Note: For any v	vehicle for which a) through (c) of S	you are usin	ng the sta	andard	mileage	rate or c	deducting	lease e	expense	, comple	te only	24a,		
			N—Depreciation												\	
24a	Do you ho	ve evidence to support				T	Yes	No	_						Yes	No
<u> 24a</u>		l	(d				INO		b If "Yes," is the evidence written					1	i)	
Туре	Type of property Date placed Business/					(e) (f) Basis for depreciation Recovery			y r	(g) (h) Method/ Depreciation					ection 179	
(list	ehicles first)	in service	percentage	0031 01 01	iner basis	(bu				onvention	ntion deduction			C	ost	
25	Special	depreciation allow	ance for qualified	d listed prop	erty plac	ed in s		,	1							
		year and used mo	•		, ,			J			2	5				
26	Property	used more than	50% in a qualifie	d business	use:											
			%													
			%													
27	Property	used 50% or less	s in a qualified b	usiness use:												
			%							S/I						
			%							S/l						
28		ounts in column (h										8		1		
<u>29</u>	Add am	ounts in column (i)), line 26. Enter h											. 29		
C		aaatiaa faa wabiala			tion B—							16		واونواور او	_	
		section for vehicle yees, first answer													es	
io ye	our emplo	yees, mst answer	the questions in	Section C to	(a			<u>ерион и</u> b)		c)	1	(d)	1	(e)	Ι ((f)
30	Total bu	ısiness/investment	miles driven du	rina	Vehi			icle 2	1	icle 3		nicle 4		nicle 5		icle 6
30		· (don't include co		•												
31		mmuting miles dri														
32		her personal (non-		· · · · · · · · · · · · · · · · · · ·												
	miles dr	d														
33		les driven during t														
34	Was the	vehicle available			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use duri	ing off-duty hours?	?													
35	Was the	vehicle used prin	narily by a more													
	than 5%	owner or related	person?													
36	Is anoth	er vehicle availabl	e for personal us	se?												
			Section C—Que							-						
		questions to deter			on to cor	npleting	Section	B for ve	ehicles u	sed by e	employe	es who	aren't			
		owners or related	•												T	1
37	•	maintain a written	policy statement	t that prohib	its all pe	rsonal u	use of ve	hicles, ir	ncluding	commut	ting, by				Yes	No
	-	nployees?														
38	•	maintain a written			•				•	•						
39		ees? See the instru treat all use of veh														
40	-	provide more than		-					r.							
40	-	he vehicles, and re						-								
41		meet the requiren							 e instru							
٠.		your answer to 37														
P	art VI	Amortization				٠ ٥،٥٠٥ (50.5100							
			-	(b))			(a)		,.	, [(e)	. 1		/£\	
		(a) Description of costs		Date amo	ortization		Amortiza	(c) able amou	nt	Code s		Amortiza period		Amortiza	(f) ation for thi	s year
				beg	ins							percent				
42	Amortiza	ation of costs that	begins during yo	our 2022 tax	year (se	e instru	uctions):									
T	heme	Song - It	t's All a													
				06/2	9/23			22	,500	197		5	.0			375

Amortization of costs that began before your 2022 tax year

Total. Add amounts in column (f). See the instructions for where to report.

43

43

163097 West TN Public Television Council,

-*7950 Federal Asset Report Form 990, Page 1

FYE: 6/30/2023

Asset	Description	Date In Service	Cost	Bus Sec % 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Other	Depreciation:							
5	ANTENNA	10/28/03	20,425				20,425	0
6								$\begin{array}{c} 0 \\ 0 \end{array}$
8								0
		10/28/03	8,580		8,580	10 MO S/L	8,580	ŏ
								0
								$\begin{array}{c} 0 \\ 0 \end{array}$
								0
14	DTV TRANSMISSION TEST EQUIP	10/28/03	25,276				25,276	0
								0
			9.384					$\begin{array}{c} 0 \\ 0 \end{array}$
		10/31/04	24,141		24,141	7 MO S/L	24,141	ő
		6/30/05	862,200				862,200	0
						7 MO S/L		$\begin{array}{c} 0 \\ 0 \end{array}$
					,			0
23	COMBO MASTER SYNC GENERATOR	3/17/05	14,239		14,239	7 MO S/L	14,239	0
		3/17/05	22,160		22,160	7 MO S/L		0
								$\begin{array}{c} 0 \\ 0 \end{array}$
		4/11/05	6,885		6,885	5 MO S/L	6,885	ő
		4/01/05	1,115		1,115	5 MO S/L	1,115	0
								$\begin{array}{c} 0 \\ 0 \end{array}$
								0
32	GA LINK INTERFACE CONVERTER	2/14/06	4,410		4,410	7 MO S/L	4,410	ŏ
						10 MO S/L	827,023	0
			26,350 27,669		,			$\begin{array}{c} 0 \\ 0 \end{array}$
		6/30/96						0
39	TOWER - ATWOOD	7/25/96	29,451				29,451	0
								0
								$\begin{array}{c} 0 \\ 0 \end{array}$
	PANASONIC DVD CAMERA	6/30/04	19,206		19,206	7 MO S/L	19,206	0
72								0
					3,902 12,917			$\begin{array}{c} 0 \\ 0 \end{array}$
76	DESK							ő
77	2 R-PANEL DISPLAYS	10/31/95	608		608	10 MO S/L	608	0
								$\begin{array}{c} 0 \\ 0 \end{array}$
								0
		4/30/94	425				425	0
		5/31/07	67,566		67,566	7 MO S/L	67,566	0
			11,200 20,500		20 500		11,200 20,500	$\begin{array}{c} 0 \\ 0 \end{array}$
		5/17/07	212,093		212,093	7 MO S/L	212,093	ő
		12/14/06	17,141		17,141	7 MO S/L	17,141	0
			1,484 4,300					$\begin{array}{c} 0 \\ 0 \end{array}$
								0
101	2 HD Electronic Viewfinders	4/18/07	4,641		4,641	7 MO S/L	4,641	0
								0
						/ MO S/L 7 MO S/L		$\begin{array}{c} 0 \\ 0 \end{array}$
		4/26/07	21,600		21,600	7 MO S/L	21,600	ő
106	Multi Format Switcher Processor	4/26/07	88,493		88,493	7 MO S/L	88,493	0
		4/27/07 4/27/07	15,732 47 637					$\begin{array}{c} 0 \\ 0 \end{array}$
108		5/01/07			66,732	7 MO S/L 7 MO S/L	66,732	0
110	4 Lens Control Kit	4/27/07	11,676		11,676	7 MO S/L	11,676	0
			7,280					$\begin{array}{c} 0 \\ 0 \end{array}$
Description			0					
Description							ő	

163097 West TN Public Television Council,

-*7950 Federal Asset Report

Form 990, Page 1

FYE: 6/30/2023

Asset			Date		Bus Sec	Basis			
116 4 VINTLIN 2-Stage Tripods 571-07 602-40 602-40 7 MO S.L. 74,550 0		· · · · · · · · · · · · · · · · · · ·			<u>%</u> 179 Bonus				
117 DOREMI Video ServerStorage Unit 504-07 74,550 74,650 7 Mo S.L. 74,550 0	115	HD 60P Integrated Triax Portable Camera							
118 Inscriber G3 HLS DI Inve to air graphics syst 504407 20,160 20,160 7 MO S1. 29,160 0									
121 Seaffolding	118	Inscriber G3 HD.SD live to air graphics syst	5/04/07	29,160			7 MO S/L	29,160	
124 Optiplex 755 Minitover									
25 SENN Supercut RF Audio Equip 12-0607 2,073 2,073 7,00 S.L 2,073 0 0 12-070 34,101 0 0 0 14,00 0 12-070 12-070 14,00 0 14,00 0 12-070 14,00 0 14,0									
127 Battery Charger 12/13/07 1,097 1,097 7 MO S.L 1,097 0	125	SENN Supercrd RF Audio Equip							
128 Avid Dual Boot Link System 1025/07 127,994 127,994 10 MO St. 127,994 0 0 0 0 0 0 0 0 0									
130 Open Gear 2RU Cooling Fam									
131 2 HD Monitors and Accessories						23,986			
133 HD Electrotrack 71607 3,619 3,619 7 MO S.L. 3,619 0 134 12 Electrotrack 71207 7,576 7,412 7,41									
134 2 Multi-Channel Monitoring System 717/07 7.576 7.576 7 MO S.L. 7.576 0			7/16/07			,		3,619	
135									
136 Sony XD Cam SOGb deck									
138 Thin Profile coax Brown 1203/08 130 130 7 MO St. 130 0 37 Thin Profile coax Violet 1203/08 130 130 7 MO St. 130 0 410 Thin Profile coax Violet 1203/08 130 130 7 MO St. 130 0 411 Thin Profile coax Green 1203/08 130 130 7 MO St. 130 0 412 Thin Profile coax Black 1203/08 130 130 7 MO St. 130 0 413 Single Patchfield 1203/08 993 993 7 MO St. 130 0 414 Triple Patchfield 1203/08 993 993 7 MO St. 130 0 415 Test Equipment 618/09 3.789 3.789 7 MO St. 3.035 0 416 Analog Video Distributor Amplifier 1/06/09 198 198 7 MO St. 198 0 417 Analog Video Distributor Amplifier 1/06/09 198 198 7 MO St. 198 0 418 Analog Video Distributor Amplifier 1/06/09 198 198 7 MO St. 198 0 419 Up Converter 1/06/09 198 198 7 MO St. 198 0 410 Up Converter 1/06/09 437 437 7 MO St. 8.883 0 410 Up Converter 1/06/09 437 437 7 MO St. 8.883 0 411 HDIMI Converter 1/06/09 437 447 7 MO St. 8.883 0 412 HDIMI Converter 1/06/09 437 447 7 MO St. 5.480 0 413 HDIMI Converter 1/14/08 5.480 5.480 7 MO St. 5.480 0 415 HDIMI Converter 1/14/08 5.480 5.480 7 MO St. 5.480 0 415 HDIMI Converter 1/14/08 5.480 5.480 7 MO St. 5.480 0 415 HDIMI Converter 1/14/08 5.480 5.480 7 MO St. 5.480 0 416 Dolby Eccoder 1/14/08 5.480 5.480 7 MO St. 5.480 0 417 Dolby Decoder 1/14/08 4.475 4.475 7 MO St. 5.480 0 418 HDIMI Converter 1/14/08 5.490 5.480 7 MO St. 5.490 0 419 Dolby Decoder 1/14/08 4.475 4.475 7 MO St. 5.490 0 419 Dolby Decoder 1/14/08 4.475 4.475 7 MO St. 5.490 0 419 Dolby Decoder 1/14/08 4.475 4.475 7 MO St. 5.490 0 419 Dolby Decoder 1/14/08 4.475 4.475 7 MO St. 5.490 0 410 Dolby Decoder 1/				12,522		12,522		12,522	
Thin Profile coax Red									
140 Thin Profile coax Folce 120308 130 130 7 MO S/L 130 0 141 Thin Profile coax Green 120308 130 130 7 MO S/L 130 0 142 Thin Profile coax Black 120308 130 130 7 MO S/L 130 0 143 Single Patchfield 120308 993 993 7 MO S/L 993 0 144 Triple Patchfield 120308 3035 3035 7 MO S/L 3035 0 145 Test Equipment 6/18/99 3,789 3,789 7 MO S/L 3,789 0 146 Analog Video Distributor Amplifier 1/06/09 198 198 7 MO S/L 198 0 147 Analog Video Distributor Amplifier 1/06/09 198 198 7 MO S/L 198 0 148 Analog Video Distributor Amplifier 1/06/09 198 198 7 MO S/L 198 0 149 Up Converter 1/06/09 3815 3815 7 MO S/L 3815 0 150 Audío Monitor 12/15/08 8,888 8,888 7 MO S/L 3,815 0 151 HD-HDMI Converter 1/05/09 437 437 7 MO S/L 437 0 152 ADIPUM Converter 1/05/09 437 437 7 MO S/L 437 0 153 Dolby E accoder 1/14/08 5,489 3,480 7 MO S/L 5,480 0 151 Dolby E accoder 1/14/08 5,489 3,480 7 MO S/L 3,490 0 152 ADIPUM Converter 1/14/08 4,475 4,475 7 MO S/L 4,475 0 153 HD-HDMI Converter 1/14/08 4,475 4,475 7 MO S/L 4,475 0 154 HD-BDMI Converter 1/14/08 4,485 4,475 7 MO S/L 4,475 0 155 Dolby E accoder 1/14/08 4,475 4,475 7 MO S/L 4,475 0 156 ADIPUM Converter 1/14/08 4,475 4,475 7 MO S/L 3,490 0 157 Dolby Decoder 1/14/08 4,475 4,475 7 MO S/L 3,490 0 156 BD-SD Modelin Port 1/14/08 4,475 4,475 7 MO S/L 4,475 0 157 Dolby Decoder 1/14/08 4,475 4,475 7 MO S/L 4,545 0 157 Dolby Decoder 1/14/08 4,475 4,475 7 MO S/L 4,545 0 158 BD-SD Modelin Port 1/14/08 4,475 4,475 7 MO S/L 4,545 0 157 Dolby Decoder 1/14/08 4,475 4,475 7 MO S/L 4,545 0 158 BD-SD Modelin Port 1/14/08 4,475 4,475 7 MO S/L 4,545									
142 Thin Profile coax Black 120308 130 130 7 MO S.L 130 0 413 Single Patchfield 120308 993 3035 7 MO S.L 993 0 414 Triple Patchfield 120308 3035 3035 7 MO S.L 3035 0 426 Analog Video Distributor Ampifier 10609 198 198 7 MO S.L 198 0 427 Analog Video Distributor Ampifier 10609 198 198 7 MO S.L 198 0 428 Analog Video Distributor Ampifier 10609 198 198 7 MO S.L 198 0 429 Up Converter 10609 198 198 7 MO S.L 198 0 431 Analog Video Distributor Ampifier 10609 198 198 7 MO S.L 198 0 442 Up Converter 10609 198 198 7 MO S.L 198 0 443 Up Converter 10609 198 198 7 MO S.L 198 0 444 Distributor Ampifier 10609 198 198 7 MO S.L 198 0 445 Up Converter 10609 437 437 7 MO S.L 437 0 445 HD-HDMI Converter 10509 437 437 7 MO S.L 437 0 454 HD-HDMI Converter 10509 437 437 7 MO S.L 437 0 455 Dolby E Encoder 11/4408 5480 5480 7 MO S.L 5480 0 456 Dolby E Encoder 11/4408 5480 5480 7 MO S.L 5480 0 457 Dolby Decoder 11/4408 5480 5480 7 MO S.L 5480 0 458 HD-SDI Media Port 2/1009 33300 33300 3300 30 40 S.L 33900 0 458 HD-SDI Media Port 2/1009 33300 33900 7 MO S.L 33900 0 459 Dolby Decoder 11/408 4475 4475 7 MO S.L 4475 0 450 Dolby Decoder 11/408 5480 5480 7 MO S.L 5480 0 451 Dolby Decoder 11/408 5480 5480 7 MO S.L 5480 0 452 Dolby Decoder 11/408 5480 5480 7 MO S.L 5480 0 453 LCD Monitor 11/1808 253 253 7 MO S.L 253 0 454 Sliding Shelf 10609 1380 1390 1390 1300 1		Thin Profile coax Violet	12/03/08	130		130	7 MO S/L		0
143 Single Patchfield 1203/08 3035 3035 7 MO SL 3035 0 445 Triple Patchfield 1203/08 3035 3035 7 MO SL 3035 0 446 Analog Video Distributor Amplifier 106/09 198 198 7 MO SL 198 0 447 Analog Video Distributor Amplifier 106/09 198 198 7 MO SL 198 0 448 Analog Video Distributor Amplifier 106/09 198 198 7 MO SL 198 0 449 Up Converter 106/09 3,815 3,815 7 MO SL 198 0 449 Up Converter 106/09 3,815 3,815 7 MO SL 3,815 0 50 Audio Monitor 12/15/08 8,888 8,888 7 MO SL 8,888 0 513 HD-HDMI Converter 10/5/09 437 437 7 MO SL 437 0 514 HD-HDMI Converter 10/5/09 437 437 7 MO SL 437 0 515 Dolby E Encoder 11/14/08 5,480 5,480 7 MO SL 5,480 0 516 Dolby E Dencoder 11/14/08 5,480 5,480 7 MO SL 5,480 0 517 Dolby Decoder 11/14/08 4,475 4,475 7 MO SL 4,475 0 518 HD-SDI Media Port 2/10/09 24,343 24,343 7 MO SL 24,343 0 510 Dolby Decoder 11/14/08 4,475 4,475 7 MO SL 24,343 0 511 Dolby Decoder 11/14/08 233 233 7 MO SL 24,343 0 512 Dolby Decoder 11/14/08 233 233 7 MO SL 24,343 0 513 DOLD 2/10/09 33,900 33,900 7 MO SL 24,343 0 514 DOLD 2/10/09 3,900 3,900 7 MO SL 2,500 0 515 DOLD 2/10/09 3,900 3,900 7 MO SL 2,500 0 516 DOLD Sync Generator 17/10/08 3,68 3,68 7 MO SL 2,53 0 516 HDSD Sync Generator 7/17/08 3,68 3,68 7 MO SL 3,407 0 517 Dunico Flat Server 3/26/09 1,700 1,700 7 MO SL 1,700 0 517 Dunico Flat Server 3/26/09 1,700 1,700 7 MO SL 1,700 0 518 DOLD 10/10/09 13,407 1,700 1,700 7 MO SL 1,700 0 519 Dunico Flat Server 3/26/09 1,700 1,700 7 MO SL 1,700 0 510 Dolby Old Flat Server 3/26/09 1,700 1,700 7 MO SL 1,700 0 510 Dolby Old Flat Server 3/26/09 1									
144 Triple Patchfield						993			
146 Analog Video Distributor Amplifier 1/06/09 198 198 7 MO S/L 198 0 148 Analog Video Distributor Amplifier 1/06/09 198 198 7 MO S/L 198 0 148 Analog Video Distributor Amplifier 1/06/09 198 198 7 MO S/L 198 0 148 Analog Video Distributor Amplifier 1/06/09 198 198 7 MO S/L 198 0 149 Up Converter 1/06/09 148 149 Up Converter 1/05/09 143 143 7 MO S/L 8.888 0 145 141 1	144	Triple Patchfield	12/03/08	3,035		3,035	7 MO S/L	3,035	0
147 Analog Video Distributor Amplifier 1/06/09 198 198 7 MO S/L 198 0 148 Analog Video Distributor Amplifier 1/06/09 3.815 3.815 7 MO S/L 3.815 0 149 Up Converter 1/05/09 3.815 3.815 7 MO S/L 3.815 0 150 Audio Monitor 12/15/08 8.888 8.888 7 MO S/L 8.888 0 151 HD-HDMI Converter 1/05/09 437 437 7 MO S/L 437 0 151 HD-HDMI Converter 1/05/09 437 437 7 MO S/L 437 0 155 Dolby E Encoder 11/14/08 5.480 5.480 7 MO S/L 5.480 0 157 Dolby E Encoder 11/14/08 5.480 5.480 7 MO S/L 5.480 0 157 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.475 0 158 HD-SDI Media Port 2/10/09 33.900 33.900 33.900 0 159 300 Gh HDD 2/10/09 33.900 33.900 33.900 0 150 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.475 0 150 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.475 0 150 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.475 0 150 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.475 0 150 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.475 0 150 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.475 0 150 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.475 0 150 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 3.3900 0 151 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.575 0 151 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.575 0 151 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.575 0 151 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.575 0 152 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.575 0 152 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.575 0 153 Dolby Decoder 11/14/08 4.475 4.475 7 MO S/L 4.575 0 154 Shiding Shelf 1.16/09 3.185 3.685 3.685 7 MO S/L 3.685 0 153 Dolby Decoder 11/									
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154 HD-HDMI Converter									
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157 Dolby Decoder									
158 HD-SDI Media Port 2/10/09 24,343 24,343 7 MO S/L 24,343 0 159 30 Gb HDD 2/10/09 33,900 33,900 7 MO S/L 33,900 0 161 Dolby Decoder 11/14/08 4,475 4,475 7 MO S/L 4,475 0 163 LCD Monitor 11/18/08 253 253 7 MO S/L 253 0 164 Sliding Shelf 1/16/09 159 159 7 MO S/L 159 0 165 NV5128 Multi-Format Router 12/03/08 58,995 58,995 7 MO S/L 58,995 0 166 HD/SD Sync Generator 7/17/08 368 368 368 7 MO S/L 368 0 168 DCA15 SPX Generator 1/21/09 13,407 13,407 7 MO S/L 13,407 0 170 LCD Monitor 3/18/09 170 170 7 MO S/L 13,407 0 170 Onneon Video File Server 3/26/09 1,700 1,700 7 MO S/L 1,700 0 171 Diamond PA Repair 7/22/08 1,705 1,705 7 MO S/L 1,705 0 172 Quartz Light Kit M31500 5/18/09 495 495 495 7 MO S/L 445 0 173 Quartz Light Kit M31500 5/18/09 467 467 7 MO S/L 467 0 174 Quartz Light Kit M31100 5/18/09 467 467 7 MO S/L 1,359 0 175 Audio-Video Connector 12/03/08 1,359 1,359 7 MO S/L 291 0 176 Analog Video Distributor Amplifier 1/16/09 291 291 7 MO S/L 291 0 177 Auto Equalizing Distribution Amplifier 1/16/09 311 311 7 MO S/L 368 0 180 Multi-Format Receiver RX1290 4/06/09 3,689 3,689 7 MO S/L 3,689 0 181 AAC Audio License Key 4/06/09 3,689 3,689 7 MO S/L 1,607 0 185 Tansport Stream OVideo Server 4/06/09 1,607 1,607 7 MO S/L 1,607 0 186 HD-SDI Modular Receiver Decoder 4/06/09 1,607 1,607 7 MO S/L 1,607 0 187 HD-SDI Modular Receiver Decoder 4/06/09 1,607 1,607 7 MO S/L 1,607 0 188 HVAC System 10/09/09 35,000 35,000 10 MO S/L 3,147 0 190 Sony PDW-F75 Professional Disc Recorer 1/14/08 21,200 29,409 0 190 Danted WARN Equipment Package 4/25/12 29,409 29,409 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.									
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179 Standard Definition Encoder 4/06/09 11,812 11,812 7 MO S/L 11,812 0 180 Multi-Format Receiver RX1290 4/06/09 3,689 3,689 7 MO S/L 3,689 0 181 AAC Audio License Key 4/06/09 614 614 7 MO S/L 614 0 182 Pro-MPEG Input Card 4/06/09 958 958 7 MO S/L 958 0 183 Clarus Noise Reduction 4/06/09 1,607 1,607 7 MO S/L 1,607 0 184 Clarus Input Deblocking Filter 4/06/09 1,607 1,607 7 MO S/L 1,607 0 185 Transport Stream OVideo Server 4/06/09 1,607 1,607 7 MO S/L 1,607 0 186 HD-SDI Modular Receiver Decoder 4/06/09 713 713 7 MO S/L 713 0 187 HD-SDI Modular Receiver Decoder 4/06/09 713 713 7 MO S/L 713 0 188 HVAC System 10/09/09 35,000 35,000 35,000 0 0 <td></td> <td></td> <td></td> <td>311</td> <td></td> <td></td> <td></td> <td></td> <td></td>				311					
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183 Clarus Noise Reduction 4/06/09 1,607 1,607 7 MO S/L 1,607 0 184 Clarus Input Deblocking Filter 4/06/09 1,607 1,607 7 MO S/L 1,607 0 185 Transport Stream OVideo Server 4/06/09 1,607 1,607 7 MO S/L 1,607 0 186 HD-SDI Modular Receiver Decoder 4/06/09 713 713 7 MO S/L 713 0 187 HD-SDI Modular Receiver Decoder 4/06/09 713 713 7 MO S/L 713 0 188 HVAC System 10/09/09 35,000 35,000 10 MO S/L 35,000 0 190 2 Televisions 2/16/10 696 696 7 MO S/L 696 0 191 Sony PDW-F75 Professional Disc Recorer 12/06/10 13,147 13,147 7 MO S/L 13,147 0 193 2008 Nissan Frontier 11/14/08 21,200 21,20									
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186 HD-SDI Modular Receiver Decoder 4/06/09 713 713 7 MO S/L 713 0 187 HD-SDI Modular Receiver Decoder 4/06/09 713 713 7 MO S/L 713 0 188 HVAC System 10/09/09 35,000 35,000 10 MO S/L 35,000 0 190 2 Televisions 2/16/10 696 696 7 MO S/L 696 0 191 Sony PDW-F75 Professional Disc Recorer 12/06/10 13,147 13,147 7 MO S/L 13,147 0 193 2008 Nissan Frontier 11/14/08 21,200 21,200 5 MO S/L 21,200 0 194 Donated WARN Equipment Package 4/25/12 29,409 29,409 10 MO S/L 29,409 0	184	Clarus Input Deblocking Filter	4/06/09	1,607		1,607	7 MO S/L	1,607	0
187 HD-SDI Modular Receiver Decoder 4/06/09 713 713 7 MO S/L 713 0 188 HVAC System 10/09/09 35,000 35,000 10 MO S/L 35,000 0 190 2 Televisions 2/16/10 696 696 7 MO S/L 696 0 191 Sony PDW-F75 Professional Disc Recorer 12/06/10 13,147 13,147 7 MO S/L 13,147 0 193 2008 Nissan Frontier 11/14/08 21,200 21,200 5 MO S/L 21,200 0 194 Donated WARN Equipment Package 4/25/12 29,409 29,409 10 MO S/L 29,409 0									
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191 Sony PDW-F75 Professional Disc Recorer 12/06/10 13,147 13,147 7 MO S/L 13,147 0 193 2008 Nissan Frontier 11/14/08 21,200 21,200 5 MO S/L 21,200 0 194 Donated WARN Equipment Package 4/25/12 29,409 29,409 10 MO S/L 29,409 0	188	HVAC System	10/09/09	35,000		35,000	10 MO S/L	35,000	0
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194 Donated WARN Equipment Package 4/25/12 29,409 29,409 10 MO S/L 29,409 0		2008 Nissan Frontier		21,200			5 MO S/L		
195 kepair on DNWA/5 VIK		Donated WARN Equipment Package	4/25/12	29,409		29,409	10 MO S/L	29,409	
	193	Kepan on DivwA/3 VIK	3/23/12	9,213		9,213	/ MIO S/L	9,213	U

163097 West TN Public Television Council,

-*7950 Federal Asset Report Form 990, Page 1

FYE: 6/30/2023

		Det-		Due Ce-	Dosi-			
Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
	7 Computers	12/18/13	4,574		4,574	5 MO S/L	4,574	0
197	Antenna & Related Hardware - RUS Grant	12/01/13	333,675		333,675	15 MO S/L	190,936	22,245
	Transmission Line and Hardware - RUS Gra		79,850				45,692	5,323
		12/01/13	106,044		106,044		60,681	7,069
200	LED Tower Light System - RUS Grant Equipment, Tuning , Guy Wire Install - RUS	12/01/13	16,456 196,575			15 MO S/L 15 MO S/L	9,417 112,485	1,097 13,105
201		12/01/13	25,800			15 MO S/L 15 MO S/L	14,763	1,720
203		12/01/13	15,000				12,875	1,500
	2015 Dodge Journey Hatchback	3/23/15	19,595		19,595	5 MO S/L	19,595	0
205	PowerEdge T420 Server	9/12/14	3,223		3,223	7 MO S/L	3,223	0
		10/18/14	5,750		5,750	7 MO S/L	5,750	0
207		10/24/14	36,858		36,858	7 MO S/L	36,858	$\begin{array}{c} 0 \\ 0 \end{array}$
	Promise Pegasus2 Thunderbolt 2 RAIN Syst Mac Pro Server	5/05/15	4,139 9,523		4,139 9,523	7 MO S/L 7 MO S/L	4,139 9,523	0
	PSIP Generator	5/11/15	8,577		8,577	7 MO S/L 7 MO S/L	8,577	0
	Device Server Computer & HDD	5/23/15	13,943		13,943	5 MO S/L	13,943	ő
212	Automation Software	6/01/15	6,800		6,800	5 MO S/L	6,800	0
213	24" High Grade 3D LCD Monitor	6/03/15	6,841		6,841	7 MO S/L	6,841	0
	PowerEdge T430 Server	6/12/15	3,762		3,762	7 MO S/L	3,762	0
	Selenio Frame, Power Supply Encoder card	6/18/15	6,120		6,120	7 MO S/L 7 MO S/L	6,120 6,660	$\begin{array}{c} 0 \\ 0 \end{array}$
	Encoder card	6/18/15 6/18/15	6,660 6,660		6,660 6,660	7 MO S/L 7 MO S/L	6,660	0
	Encoder card	6/18/15	6,660		6,660	7 MO S/L	6,660	ő
	Encoder Software HD	6/18/15	7,200		7,200	5 MO S/L	7,200	0
	Encoder Software SD	6/18/15	4,320		4,320	5 MO S/L	4,320	0
	Encoder Mux Software	6/18/15	2,880		2,880	5 MO S/L	2,880	0
	Encoder Transport Stream SW	6/18/15	2,880		2,880	7 MO S/L	2,880	0
	Promedia Rhozet Software Transmitter Power Supply Module	6/25/15 4/11/15	5,096 4,598		5,096 4,598	5 MO S/L 7 MO S/L	5,096 4,598	$\begin{array}{c} 0 \\ 0 \end{array}$
	Transmitter Power Supply Module USB 3.0 XDCam Disc Drive	9/06/14	2,712		2,712	7 MO S/L 7 MO S/L	2,712	0
	DELL POWER EDGE T430 SERVER	7/02/15	3,762		3,762	5 MO S/L	3,762	ő
	SURCODE FOR DOLBY E MASTER SUI'		3,495		3,495	5 MO S/L	3,495	0
	SONNET RACK	7/11/15	3,423		3,423	5 MO S/L	3,423	0
	5.1 MULTI CHANNEL MONITORING SY		3,401		3,401	5 MO S/L	3,401	0
	ENCODER & AUTOMATION SYSTEM	8/01/15	13,050		13,050	5 MO S/L	13,050	0
	PART 10F3: MD 5 HARD DRIVE PART 20F3: RX30	2/12/16 2/12/16	9,793 11,539		9,793 11,539	5 MO S/L 5 MO S/L	9,793 11,539	$0 \\ 0$
	PART 30F3: KA30 PART 30F3: MD 12 HARD DRIVE	3/12/16	15,320		15,320	5 MO S/L	15,320	0
	TELEPHONE SYSTEM	12/08/15	6,775		6,775	5 MO S/L	6,775	ő
	TRANSPORT STREAM CONVERTER	3/25/16	5,031		5,031	5 MO S/L	5,031	0
		12/02/16	11,241		11,241	5 MO S/L	11,241	0
		12/21/17	10,293		10,293	5 MO S/L	9,264	1,029
	Macbook Pro Streaming Equipment	9/11/17	3,485		3,485	5 MO S/L	3,369	116
240 241	2019 DODGE CARAVAN TPTC EQUIPMENT	3/23/19 6/03/19	22,425 40,450		22,425 40,450	5 MO S/L 5 MO S/L	14,576 24,944	4,485 8,090
	2019 REPACK	1/01/19	1,063,508		1,063,508	5 MO S/L	744,456	212,701
	2019 SATELLITE	4/01/19	26,637		26,637	5 MO S/L	17,314	5,327
244	2019 MC - CLEMENT	4/01/19	333,352		333,352	5 MO S/L	216,679	66,670
	IMac Pro	2/17/21	8,141		8,141	7 MO S/L	1,551	1,163
	Production Truck Equipment	7/22/21	62,476		62,476	5 MO S/L	11,454	12,495
	Production Truck Equipment	11/24/21	78,168		78,168	5 MO S/L	9,120	15,633
	8 Hard Drives HVAC - Jackson - Mccoy	7/12/21 6/29/23	4,841 8,751		4,841	5 MO S/L 15 MO S/L	968 0	969 0
	Construction in Process - Jackson	6/29/23	142,013		142,013	0 Memo	0	0
250		0/2//23		-		o iviemo		
	Total Other Depreciation		7,247,998	-	7,247,998		6,169,373	380,737
	Total ACRS and Other Deprec	iation	7,247,998		7,247,998		6,169,373	380,737
A == -								
	<u>ization:</u> Theme Song - It's All About Home	6/29/23	22,500		22,500	5 MOAmort	0	375
231	Theme bong - its All About Hollie	0121123		-		5 MOAIIIOIT		
			22,500	=	22,500		0	375

FYE: 6/30/2023

163097 West TN Public Television Council,

-*7950 Federal Asset Report

Form 990, Page 1

Asset	Description	Date n Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
	Grand Totals Less: Dispositions and Transfer Less: Start-up/Org Expense Net Grand Totals	s - =	7,270,498 0 0 7,270,498			7,270,498 0 0 7,270,498		6,169,373 0 0 6,169,373	381,112 0 0 381,112

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163097 West TN Public Television Council, **-***7950 Depreciation Adjustment Report

11	/0.3/	2023	4:29	PΝ
11	/03/	2023	4:29	РΝ

Form Unit Asset Description Tax AMT	AMT Adjustments/ Preferences
There are no assets that meet the criteria of this report	

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163097 West TN Public Television Council, **-***7950 Future Depreciation Report FYE: 6/30/24

Form 990, Page 1 FYE: 6/30/2023

Asset	Description	Date In Service	Cost	Tax	AMT
<u>Other</u>	Depreciation:				
5	ANTENNA	10/28/03	20,425	0	0
6 7	DTV TRANSMITTER SYSTEM DTV ANTENNA	10/28/03 10/28/03	108,058 53,789	$0 \\ 0$	$0 \\ 0$
8	DTV TRANSMITTER LINE	10/28/03	15,038	0	0
9 10	DTV TRANS. SITE MONITORING	10/28/03 10/28/03	8,580	$0 \\ 0$	$0 \\ 0$
10	DTV REMOTE CONTROL EQUIP DTV ENCODING EQUIPMENT	10/28/03	6,117 57,148	0	0
12	DTV STUDIO-TRANS. LINK	10/28/03	124,056	0	0
13 14	DTV SUDIO SITE MON. EQUIP DTV TRANSMISSION TEST EQUIP	10/28/03 10/28/03	8,580 25,276	$0 \\ 0$	$0 \\ 0$
15	DTV TRANSMISSION TEST EQUIP DTV CDEYE FOR WATCHDOG+	10/28/03	7,994	0	0
16	DTV CHECKOUT/FREIGHT	10/28/03	19,512	0	0
17 18	FIBEROPTIC CABLE/WIRING DTV GENERATOR	9/17/03 10/31/04	9,384 24,141	$0 \\ 0$	$0 \\ 0$
19	DTV GENERATOR DTV TRANS & MC UPGRADE	6/30/05	862,200	0	0
20	PRO TRACK SYSTEM	5/05/05	47,015	0	0
21 22	DECODERS AND MODULATORS PWR SUPPLIES DIST AMPS	3/17/05 3/17/05	25,004 10.690	$0 \\ 0$	0
23	COMBO MASTER SYNC GENERATOR	3/17/05	14,239	0	0
24	ROUTER INPUT/OUTPUT CON.	3/17/05	22,160	0	0
25	DTV - SERVER	4/19/05	130,742	0	0
26 27	VTR'S, RACK MOUNTS LCD VIDEO MONITORS	4/18/05 4/11/05	70,815 6,885	$0 \\ 0$	0
28	COMPUTER - ENGINEERING	4/01/05	1,115	ő	ő
29	UPGRADE TO MIP 41010	11/30/05	2,800	0	0
30 31	DOLBY DIGITAL RECORDER DTV LINES FOR JEA SYSTEM	3/13/06 4/01/06	4,635 4,570	$0 \\ 0$	0
32	GA LINK INTERFACE CONVERTER	2/14/06	4,410	ő	ő
33	TRANSMITTER & TOWER	4/01/84	828,071	0	0
34 35	TRANSMITTER BUILDING MICROWAVE ANTENNA	3/02/90 8/15/91	26,350 27,669	$0 \\ 0$	$0 \\ 0$
38	TOWER - ATWOOD	6/30/96	42,002	0	0
39	TOWER - ATWOOD	7/25/96	29,451	0	0
62 64	MICROPHONES RTL PROJECTOR	10/03/00 9/28/01	2,706 3,473	$0 \\ 0$	$0 \\ 0$
68	DELL COMPUTER (DARRELL)	6/30/04	1,413	0	0
69	PANASONIC DVD ČAMERA	6/30/04	19,206	0	0
72 73	SONY BVP TRIAX CAMERAS	11/21/05	10,114	0	0
73 75	BETA SP VTR OFFICE FURNITURE	1/18/06 2/28/94	3,902 12,917	$0 \\ 0$	$0 \\ 0$
76	DESK	10/31/95	1,199	0	0
77 70	2 R-PANEL DISPLAYS	10/31/95	608	0	0
78 85	FILE CABINET TOSHIBA COPIER	10/31/95 6/30/03	1,199 4,684	$0 \\ 0$	$0 \\ 0$
90	LEASEHOLD IMPROVEMENTS	7/01/91	18,560	0	0
91	DESK	4/30/94	425	0	0
93 94	DTV Production Truck 2 DP571 Dolby Encoders	5/31/07 5/21/07	67,566 11,200	$0 \\ 0$	$0 \\ 0$
95	5 DP572 Dolby Encoders	5/21/07	20,500	0	0
96	HD Remote Unit	5/17/07	212,093	0	0
97 98	Microphones HOT SPARES Disk Drive	12/14/06 3/02/07	17,141 1,484	0	$0 \\ 0$
98 99	Inlet Aire Dampers w/exhaust fan	10/18/06	4,300	0	0
100	Color Viewfinder & 6 rack mounts	4/17/07	7,636	0	0
101 102	2 HD Electronic Viewfinders XDCAM HD Deck	4/18/07 4/25/07	4,641 86,547	$0 \\ 0$	$0 \\ 0$
102	HD60P Integrated Triax Portable Camera	4/26/07	45,000	0	0
104	4 HD Camera Control Units	4/26/07	63,840	0	0
105	CCU Side Triax Adapter	4/26/07 4/26/07	21,600	$0 \\ 0$	$0 \\ 0$
106 107	Multi Format Switcher Processor 3 Color Viewfinders	4/27/07	88,493 15,732	0	0
108	2 Fujinon Lens	4/27/07	47,637	0	0
109	2 Fujinon 2/3 Focus Lens	5/01/07	66,732	0	0
110 111	4 Lens Control Kit Master Setup Unit	4/27/07 5/01/07	11,676 7,280	$0 \\ 0$	$0 \\ 0$
112	Netgear FS516 Router	5/07/07	507	0	0
113	10 Meter Fiber Cable	5/08/07	3,749	0	0

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163097 West TN Public Television Council, **-***7950 Future Depreciation Report FYE: 6/30/24

Form 990, Page 1 FYE: 6/30/2023

Asset	Description	Date In Service	Cost	Tax	AMT
114	2HD 60P Integrated Portable Triax Cameras	5/21/07	90,048	0	0
115	HD 60P Integrated Triax Portable Camera	5/29/07	45,000	0	0
116	4 VINTEN 2-Stage Tripods	5/11/07	60,240	0	0
117	DOREMI Video Server/Storage Unit	5/04/07	74,550	0	0
118 119	Inscriber G3 HD.SD live to air graphics syste Dell Laptop - Monica	5/04/07 4/06/07	29,160 1,262	$0 \\ 0$	$0 \\ 0$
121	Scaffolding	10/18/07	1,678	0	0
124	Optiplex 755 Minitower	3/18/08	1,240	Ö	ő
125	SENN Supercrd RF Audio Equip	12/06/07	2,073	0	0
126	XD Cam HD Camcorder	11/06/07	34,101	0	0
127	Battery Charger	12/13/07	1,097	0	0
128 129	Avid Dual Boot Link System Yamaha Audio Production Console	10/25/07 8/23/07	127,994 23,986	$0 \\ 0$	$0 \\ 0$
130	Open Gear 2RU Cooling Fan	11/08/07	2,143	0	0
131	2 HD Monitors and Accessories	8/27/07	15,772	ő	ő
132	Open Transformer Contact Switch	7/16/07	3,619	Õ	0
133	HD Electrotrack	7/23/07	7,412	0	0
134	2 Multi-Channel Monitoring System	7/17/07	7,576	0	0
135	Optiplex 755 Computer	11/18/08	1,458	0	0
136 137	Sony XD Cam 50Gb deck Sony XDCam 50Gb deck	4/08/09 4/16/09	12,522 12,522	$0 \\ 0$	$0 \\ 0$
137	Thin Profile coax Brown	12/03/08	130	0	0
139	Thin Profile coax Red	12/03/08	130	ő	ő
140	Thin Profile coax Violet	12/03/08	130	0	0
141	Thin Profile coax Green	12/03/08	130	0	0
142	Thin Profile coax Black	12/03/08	130	0	0
143	Single Patchfield	12/03/08	993	0	0
144 145	Triple Patchfield Test Equipment	12/03/08 6/18/09	3,035 3,789	$0 \\ 0$	$0 \\ 0$
145	Analog Video Distributor Amplifier	1/06/09	198	0	0
147	Analog Video Distributor Amplifier	1/06/09	198	ŏ	ő
148	Analog Video Distributor Amplifier	1/06/09	198	0	0
149	Up Converter	1/06/09	3,815	0	0
150	Audio Monitor	12/15/08	8,888	0	0
153 154	HD-HDMI Converter HD-HDMI Converter	1/05/09 1/05/09	437 437	$0 \\ 0$	$0 \\ 0$
155	Dolby E Encoder	11/14/08	5,480	0	0
156	Dolby E Encoder	11/14/08	5,480	Ö	ő
157	Dolby Decoder	11/14/08	4,475	0	0
158	HD-ŠDI Media Port	2/10/09	24,343	0	0
159	300 Gb HDD	2/10/09	33,900	0	0
161 163	Dolby Decoder LCD Monitor	11/14/08 11/18/08	4,475 253	$0 \\ 0$	$0 \\ 0$
164	Sliding Shelf	1/16/09	159	0	0
165	NV5128 Multi-Format Router	12/03/08	58,995	ő	ő
166	HD/SD Sync Generator	7/17/08	368	0	0
168	DCA15 SPX Generator	1/21/09	13,407	0	0
169	17" LCD Monitor	3/18/09	170	0	0
170 171	Omneon Video File Server	3/26/09 7/22/08	1,700 1,705	$0 \\ 0$	$0 \\ 0$
171	Diamond PA Repair Quartz Light Kit M31500	5/18/09	495	0	0
173	Ouartz Light Kit M31500	5/18/09	467	ő	ő
174	Quartz Light Kit M31100	5/18/09	674	0	0
175	Audio-Video Connector	12/03/08	1,359	0	0
176	Analog Video Distributor Amplifier	1/16/09	291	0	0
177	Auto Equalizing Distribution Amplifier	1/16/09	311	$0 \\ 0$	0
178 179	Power Supply - 00FR-C frame Standard Definition Encoder	1/16/09 4/06/09	593 11,812	0	$0 \\ 0$
180	Multi-Format Receiver RX1290	4/06/09	3,689	0	0
181	AAC Audio License Key	4/06/09	614	Ö	ŏ
182	Pro-MPEG Input Card	4/06/09	958	0	0
183	Clarus Noise Reduction	4/06/09	1,607	0	0
184	Clarus Input Deblocking Filter	4/06/09	1,607	0	0
185 186	Transport Stream 0Video Server HD-SDI Modular Receiver Decoder	4/06/09 4/06/09	1,607 713	$0 \\ 0$	$0 \\ 0$
187	HD-SDI Modular Receiver Decoder HD-SDI Modular Receiver Decoder	4/06/09	713	0	0
188	HVAC System	10/09/09	35,000	ő	ő
190	2 Televisions	2/16/10	696	Ö	ő
191	Sony PDW-F75 Professional Disc Recorer	12/06/10	13,147	0	0
193	2008 Nissan Frontier	11/14/08	21,200	0	0
194	Donated WARN Equipment Package	4/25/12	29,409	0	0

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163097 West TN Public Television Council, **-***7950 Future Depreciation Report FYE: 6/30/24

Form 990, Page 1 FYE: 6/30/2023

Asset	Description	Date In Service	Cost	Tax	AMT
195	Repair on DNWA75 VTR	3/23/12	9,213	0	0
196	7 Computers	12/18/13	4,574	0	0
197 198	Antenna & Related Hardware - RUS Grant Transmission Line and Hardware - RUS Grant	12/01/13 12/01/13	333,675 79,850	22,245 5,324	$0 \\ 0$
198	Tower Reinforcement - RUS Grant	12/01/13	106,044	7.070	0
200	LED Tower Light System - RUS Grant	12/01/13	16,456	1,097	Ö
201	Equipment, Tuning, Guy Wire Install - RUS Gr	12/01/13	196,575	13,105	0
202	Engineering Study - RUS Grant	12/01/13	25,800	1,720	0
203 204	Tower Painting	12/01/13 3/23/15	15,000 19,595	625 0	$0 \\ 0$
204	2015 Dodge Journey Hatchback PowerEdge T420 Server	9/12/14	3,223	0	0
206	Caption Maker	10/18/14	5,750	ő	ő
207	Inscriber G8 - Dual Channel	10/24/14	36,858	0	0
208	Promise Pegasus2 Thunderbolt 2 RAIN System	5/05/15	4,139	0	0
209	Mac Pro Server	5/05/15	9,523	0	0
210 211	PSIP Generator Device Server Computer & HDD	5/11/15 5/23/15	8,577 13,943	$0 \\ 0$	$0 \\ 0$
212	Automation Software	6/01/15	6,800	ő	ő
213	24" High Grade 3D LCD Monitor	6/03/15	6,841	ő	Ö
214	PowerEdge T430 Server	6/12/15	3,762	0	0
215	Selenio Frame, Power Supply	6/18/15	6,120	0	0
216	Encoder card	6/18/15	6,660	0	0
217 218	Encoder card Encoder card	6/18/15 6/18/15	6,660 6,660	$0 \\ 0$	$0 \\ 0$
219	Encoder Software HD	6/18/15	7,200	ő	ő
220	Encoder Software SD	6/18/15	4,320	Õ	0
221	Encoder Mux Software	6/18/15	2,880	0	0
222	Encoder Transport Stream SW	6/18/15	2,880	0	0
223 224	Promedia Rhozet Software	6/25/15 4/11/15	5,096 4,598	$0 \\ 0$	$0 \\ 0$
225	Transmitter Power Supply Module USB 3.0 XDCam Disc Drive	9/06/14	2,712	0	0
226	DELL POWER EDGE T430 SERVER	7/02/15	3,762	ő	ő
227	SURCODE FOR DOLBY E MASTER SUITE	7/11/15	3,495	0	0
228	SONNET RACK	7/11/15	3,423	0	0
229	5.1 MULTI CHANNEL MONITORING SYSTE		3,401	0	0
230 231	ENCODER & AUTOMATION SYSTEM PART 10F3: MD 5 HARD DRIVE	8/01/15 2/12/16	13,050 9,793	$0 \\ 0$	$0 \\ 0$
232	PART 20F3: RX30	2/12/16	11,539	ő	ő
233	PART 30F3: MD 12 HARD DRIVE	3/12/16	15,320	ő	Ö
234	TELEPHONE SYSTEM	12/08/15	6,775	0	0
235	TRANSPORT STREAM CONVERTER	3/25/16	5,031	0	0
236	MASTER CLOCK SYSTEM	12/02/16	11,241	$0 \\ 0$	0
238 239	Stream Scope Mount MT50 Macbook Pro Streaming Equipment	12/21/17 9/11/17	10,293 3,485	0	$0 \\ 0$
240	2019 DODGE CARAVAN	3/23/19	22,425	3,364	ő
241	TPTC EQUIPMENT	6/03/19	40,450	7,416	0
242	2019 REPACK	1/01/19	1,063,508	106,351	0
243	2019 SATELLITE	4/01/19	26,637	3,996	0
244 245	2019 MC - CLEMENT IMac Pro	4/01/19 2/17/21	333,352 8,141	50,003 1,163	$0 \\ 0$
246	Production Truck Equipment	7/22/21	62,476	12,495	0
247	Production Truck Equipment	11/24/21	78,168	15,634	ő
248	8 Hard Drives	7/12/21	4,841	968	0
249	HVAC - Jackson - Mccoy	6/29/23	8,751	583	0
250	Construction in Process - Jackson Total Other Depreciation	6/29/23	7 247 008	253 150	0
	Total Other Depreciation		7,247,998	253,159	<u> </u>
	Total ACRS and Other Depreciation		7,247,998	253,159	0
<u>Amortiz</u>	ation:				
251	Theme Song - It's All About Home	6/29/23	22,500	4,500	0
	5		22,500	4,500	0
			22,300		

163097 West TN Public Television Council, 11/03/2023 4:29 PM **Future Depreciation Report** FYE: 6/30/24 **-***7950 Form 990, Page 1 FYE: 6/30/2023 Date In Service Description Cost Tax Asset 7,270,498 257,659 **Grand Totals** 0

Form 990 Two Year Comparison Report
For calendar year 2022, or tax year beginning 07/01/22 , ending 06/30/23 2021 & 2022

Name

Taxpayer Identification Number

ivai					el lucitimeation Number
	West TN Public Television Council	,		62-	1177950
			2021	2022	Differences
	1. Contributions, gifts, grants	1.	271,282	191,523	-79,759
	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3.	1,515,437	1,463,234	-52,203
ne	4. Program service revenue	4.	139,114	128,376	-10,738
_	5. Investment income	5.	5,870	40,403	34,533
>	6. Proceeds from tax exempt bonds	6.			
R e	7. Net gain or (loss) from sale of assets other than inventory	7.			
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming				
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue		1,896		-1,896
	12. Total revenue. Add lines 1 through 11	12.	1,933,599	1,823,536	-110,063
	13. Grants and similar amounts paid	13.			
	14. Benefits paid to or for members	14.			
es	15. Compensation of officers, directors, trustees, etc.	15.			
S	16. Salaries, other compensation, and employee benefits	16.	709,537	669,412	-40,125
ē	17. Professional fundraising fees	17.			
×	18. Other professional fees	18.	48,070	48,517	
Ш	19. Occupancy, rent, utilities, and maintenance	19.	36,953	39,617	
	20. Depreciation and Depletion	20.	389,024	381,112	
	21. Other expenses	21.	842,686	927,270	
	22. Total expenses. Add lines 13 through 21	22.	2,026,270	2,065,928	
_	23. Excess or (Deficit). Subtract line 22 from line 12	23.	-92,671	-242,392	
	24. Total exempt revenue	24.	1,933,599	1,823,536	-110,063
_	25. Total unrelated revenue	25.			
Ęį	26. Total excludable revenue	26.	146,880	168,779	
Information	27. Total assets	27.	2,874,603	2,703,445	
ģ	28. Total liabilities	28.	760,036	831,273	
	29. Retained earnings	29.	2,114,567	1,872,172	-242,395
ihe	30. Number of voting members of governing body	30.	16	16	
	31. Number of independent voting members of governing body	31.	16	16	
	32. Number of employees	32.	38	39	
	33. Number of volunteers	33.			

Form 990	Tax Return History		2022
Name	West TN Public Television Council,	Employer Id	entification Number 77950

	2018	2019	2020	2021	2022	2023
-	1,814,426	1,607,204	2,185,813	1,786,719	1,654,757	2023
Contributions, gifts, grants	1,014,420	1,007,204	2,103,013	1,700,713	1,034,737	
Membership dues	193,598	184,445	148,283	139,114	128,376	
Capital gain or loss	_					
Investment income		8,581	3,279	5,870	40,403	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue		3,168	11,494	1,896		
Total revenue		1,803,398	2,348,869	1,933,599	1,823,536	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.						
Other compensation		699,017	732,981	709,537	669,412	
Professional fees	47,303	47,941	55,844	48,070	48,517	
Occupancy costs	36,578	38,579	35,702	36,953	39,617	
Depreciation and depletion	234,605	400,334	380,215	389,024	381,112	
Other expenses	697,772	766,677	769,686	842,686	927,270	
Total expenses	1,743,211	1,952,548	1,974,428	2,026,270	2,065,928	
Excess or (Deficit)	281,007	-149,150	374,441	-92,671	-242,392	
_						
Total exempt revenue	2,024,218	1,803,398	2,348,869	1,933,599	1,823,536	
Total unrelated revenue						
Total excludable revenue	209,792	196,194	163,056	146,880	168,779	
Total Assets	2,680,831	2,656,707	3,091,117	2,874,603	2,703,445	
Total Liabilities	698,877	823,905	883,874	760,036	831,273	
Net Fund Balances	1,981,954	1,832,802	2,207,243	2,114,567	1,872,172	

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Taxable Interest on Investments

Description					
	 Amount	Unrelated Business	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)
Interest Income					
	\$ 40,403				
Total	\$ 40,403				

Federal Statements

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Form 990, Part IX, Line 24e - All Other Expenses

Description	E	Total xpenses		Program Service		nagement & General		Fund Raising
Interconnect	 \$	37,804	\$	37,804	\$		\$	
General Supplies	·	29,526	·	18,077	•	5,217	·	6,232
Repairs & Maintenance		24,727		19,681		5,046		
TPTC		17,336				17,336		
Equipment - Operating		15,915		15,527		388		
Telephone		12,231		7,950				4,281
Software Contracts		12,204		10,922		125		1,157
Parts and Supplies		11,728		11,404		324		
Website		10,007		173		9,834		
Special Events		8,662		3,761		545		4,356
Legislative lobbying		7,944				7,944		
Contract Labor		6,895		6,495				400
Vehicle Expenses		6,451		4,057		1,569		825
Grants		6,113		6,113				
Equipment - Replacement		6,110		3,656		2,454		
Miscellaneous Expenses		4,132		461		3,570		101
Postage		3,928		2		3,926		
Printing		3,895		2,505		1,140		250
Credit Card Charges		3,333				3,333		
Premiums		2,620						2,620
Human Resources		1,500				1,500		
Costume Rental/Actors		988		988				
Shipping		587				31		556
Total	\$	234,636	\$	149,576	\$	64,282	\$	20,778

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Federal Statements

Schedule A, Part II, Line 1(e)

Description	Amount		
Community Service Grant	\$	684,828	
CPB - Interconnect Grant		11,945	
CPB - Stabil Grant			
Universal Service Support Grant		138,936	
State of Tennessee - Direct Appropri		430,793	
Other Grants		124,350	
In Kind		72,382	
Underwriting	_	191,523	
Total	\$	1,654,757	

Schedule A, Part II, Line 12 - Current year

Description	Amount
Education and Community Eng	\$
Production Income	
Special Event Income	500
TN Channel Income	33,333
Membership Dues	94,543
Interest Income	40,403
Miscellaneous Income	
Gain on Sale of Assets	
Total	\$ 168,779