## Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2006

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements.

4	For th	ne 2006 calend	lar year, o	r tax year beginning	, 2006, and	d ending	<del></del>	<u>,</u>	· *	
3	Check i	f applicable:	Please use	C ST. LUKE'S COMMUNITY			D Empl	oyer Identific	ation Number	
	□ Ad	dress change	-04841	83						
	$\vdash$	me change	hone numbe	r						
	Ini	tial return	See specific	NASHVILLE, TN 37209			61	5-350-	7893	
	HFir	nal return	instruc- tions.		•			unting od:		Accrual
	$\vdash$	nended return						ou. Other (specify		) / loc. du.
	$\vdash$	plication pending	Section	on 501(c)(3) organizations and 49	47(a¥1) nonexempt	H and	I are not applicable to se			
	ш. т	, p	charit	able trusts must attach a comple	ted Schedule A	i i	Is this a group return fo	-		X No
			•	990 or 990-EZ).		Н (ь)	) If Yes, enter number of a	ffiliates . 🟲	_	_
<u>G</u>	Web:	site: ► WWW.	STLUKE	SCOMMUNITYHOUSE.ORG		H (c)	Are all affiliates include			No
J	Orgai	nization type		হয় -			(If 'No,' attach a list. Se		s.)	
		k only one).				7H (d)	) Is this a separate return		. —	(T)
K				ization is not a 509(a)(3) support		<u> </u>	organization covered by		<del>-                                      </del>	X No
	gross	s receipts are nization choos	normally r es to file :	not more than \$25,000. A return is a return is a return, be sure to file a comple	is not required, but if the te return.	<u> </u>	Group Exemption			<del></del>
						M	Check ► if the			
L 2000				8b, 9b, and 10b to line 12 ► 2,		1	to attach Schedule B (			-). 
i Ka				nses, and Changes in Net		nance:	s (See the instr	uctions.		
	1			ants, and similar amounts receive	1	. 1				
	l .			advised funds	· · · · · · · · · · · · · · · · · · ·	1a	1 155 440			
				not included on line 1a)		1b	1,155,440.			
				(not included on line 1a)			403,265.			
	d	Government Total (add lines	contributio	ons (grants) (not included on line	ıa)	ıd	66,751.		1 605	45.0
	آ ۾ ا	la through 1d) (c	ash Ş	1,625,456. noncash \$		)		1 e	1,625	
	2			ue including government fees an				2	241	382.
	3	and the second s		assessments				3	1.0	401
	4			d temporary cash investments						421.
	5			from securities	1	1	• • • • • • • • • • • • • • • • • • • •	5	38	658.
	L			•••••	_	6a	<del></del>			
					<u> </u>	6b				
	1 _		-	oss). Subtract line 6b from line 6	a	• • • • • •		6c		
R	7			me (describe	(A) Securities	<del></del>	(B) Other	7		<del></del>
REVENU	8a			les of assets other		0-	(D) Outer			
Ñ	1 .		-	*** d		8a				
Ē				sis and sales expenses		8b				
	1			ile)STATEMENT1		8c	<del></del>		1	010
				nbine line 8c, columns (A) and (E tivities (attach schedule). If any a				8d	12	,912.
				cluding \$ 45,59	_	HECK HE				
	"			20,00		9 a	26,320.			
	b	•	•	other than fundraising expenses		9b	24,496.			
				om special events. Subtract line			.STATEMENT. 2	9 c	1	,824.
					30 11 Olli 111 10 34,			361		
	10 a	Gross sales	of invento	ry, less returns and allowances.	1	1	.DIMINITE . Z	30		
	)			ry, less returns and allowances.		1		30		
	1	Less: cost o	f goods so	oid		10 a 10 b		10 c		
	1	Less: cost of Gross profit or (	f goods so loss) from s	old	act line 10b from line 10a	10 a 10 b			127	,083.
	l c	Less: cost of Gross profit or ( Other revenue	f goods so loss) from s ue (from F	old	act line 10b from line 10a	10 a 10 b		10 c		,083. ,736.
	11 12	Less: cost of Gross profit or ( Other revenu Total revenu	f goods so loss) from s ue (from F e. Add lin	old	act line 10b from line 10a	10 a		10 c	2,072	,736.
 <u>E</u> X	11 12	D Less: cost of Gross profit or ( Other revenue Total revenue Program ser	f goods so loss) from s ue (from F e. Add lin vices (fro	old	act line 10b from line 10a	10 a		10 c 11 12	2,072 1,408	,736. ,057.
EXPE	11 12	D Less: cost of Gross profit or ( Other revenu Total revenu Program ser Managemen	f goods so loss) from s ue (from F ee. Add lin vices (from t and gen	old	act line 10b from line 10a	10 a		10 c 11 12 13	2,072 1,408 285	,736. ,057. ,815.
EXPENS	11 12	D Less: cost or Gross profit or ( Other revenu Total revenu Program ser Managemen Fundraising	f goods so loss) from s ue (from F le. Add lin vices (fro t and gen (from line	old	act line 10b from line 10a	10 a		10 c 11 12 13 14 15	2,072 1,408 285	,736. ,057.
- EXPENSES	11 12 13 14 15 16	D Less: cost or Gross profit or ( Other revenu Total revenu Program ser Management Fundraising Payments to	f goods so loss) from s ue (from F ue. Add lin vices (from t and gen (from line affiliates	old	act line 10b from line 10a	10 a		10 c 11 12 13 14 15 16	2,072 1,408 285 10	,736. ,057. ,815. ,732.
	11 12 13 14 15 16 17	Chess: cost of Gross profit or (Other revenution Total revenution Program ser Management Fundraising Payments to Total expens	f goods so loss) from s ue (from F le. Add lin vices (from t and gen (from line affiliates ses. Add I	old	act line 10b from line 10a	10 a		10 c 11 12 13 14 15 16 17	2,072 1,408 285 10	,736. ,057. ,815. ,732.
_	11 12 13 14 15 16 17	D Less: cost of Gross profit or (Other revenut Total revenut Program ser Management Fundraising Payments to Total expensions of Cost Cost Cost Cost Cost Cost Cost Cost	f goods so loss) from s ue (from F ne. Add lin vices (from t and gen (from line affiliates ses. Add l leficit) for	old	act line 10b from line 10a	10a 10b		10 c 11 12 13 14 15 16 17	2,072 1,408 285 10 1,704 368	,736. ,057. ,815. ,732. ,604.
EXPENSES	11 12 13 14 15 16 17	D Less: cost of Gross profit or (Other revenut Total revenut Program ser Management Fundraising Payments to Total expensions of Country Revenut Revenu	f goods so loss) from s ue (from F ne. Add lin vices (from t and gen (from line a affiliates ses. Add I leficit) for ir fund bal	old	act line 10b from line 10a	10 a		10 c 11 12 13 14 15 16 17	2,072 1,408 285 10 1,704 368 4,977	,736. ,057. ,815. ,732. ,604.

Form <b>990</b> (20	06) ST.	LUKE'S	COMMUNITY	HOUSE,	INC
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62-0484183

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Form 990 (2006)

Statement of Program Service Accomplishments
Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular
organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶ SOCIAL SERVICES Program Service Expenses (Required for 501/(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.) All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) a SEE STATEMENT 1,408,057. (Grants and allocations ) If this amount includes foreign grants, check here (Grants and allocations If this amount includes foreign grants, check here (Grants and allocations ) If this amount includes foreign grants, check here ) If this amount includes foreign grants, check here (Grants and allocations e Other program services...... ) If this amount includes foreign grants, check here (Grants and allocations 1,408,057. f Total of Program Service Expenses (should equal line 44, column (B), Program services) . . .

TEEA0103L 01/18/07

	Reconciliation of Reven	ue per Audited Financia	al Statements with	62-048 Revenue per Retu	14183 Page 5
	instructions.)	•	- 15 m		(000 1/10
	T-4-1	,	Services .		<i>y</i>
a	Total revenue, gains, and other support	per audited financial statemer	nts	a	2,126,896.
þ	Amounts included on line a but not on F		1 1		1. 34
	1 Net unrealized gains on investments			27,842.	', "',
	2Donated services and use of facilities			1,822.	
	3Recoveries of prior year grants				
	SEE STM 10		1	04.406	
			b4	24,496.	=
С	Add lines b1 through b4  Subtract line b from line a	••••••••••••	• • • • • • • • • • • • • • • • • • • •	b	54,160.
d	Amounts included on Part I, line 12, but	not on line at		c	2,072,736.
_	1 Investment expenses not included on P		أديا		
	000		<del></del>		
			11		
	Add lines d1 and d2				
e	Total revenue (Part I, line 12). Add lines	s <b>c</b> and <b>d</b>		<b>▶</b> e	2,072,736.
	Reconciliation of Expen	ses per Audited Financi	al Statements wit	h Expenses per Re	turn
а	Total expenses and losses per audited			a	1,730,922.
b	Amounts included on line a but not on F				
	1 Donated services and use of facilities			1,822.	
	2Prior year adjustments reported on Part		11		
	<b>3</b> Losses reported on Part I, line 20		b3		
	4Other (specify):				
	SEE STMT 11		b4	24,496.	
	Add lines b1 through b4				26,318.
C	Subtract line <b>b</b> from line <b>a</b>		• • • • • • • • • • • • • • • • • • • •	c	1,704,604.
d	Amounts included on Part I, line 17, but	*	ا با		
	1 Investment expenses not included on P		<del></del>		
			أمدا		
•	Add lines d1 and d2  Total expenses (Part I, line 17). Add lin				1,704,604.
*****	Current Officers, Directors or key employee at any time du	uring the year even if they were	e not compensated.) (S	See the instructions.)	ilicer, director, trustee,
		(B) Title and average hours	(C) Compensation	(D) Contributions to	(E) Expense
	(A) Name and address	per week devoted to position	(if not paid, enter -0-)	employee benefit plans and deferred	account and other allowances
		to poolitori	J	compensation plans	
		_			
SE	E STATEMENT 12		179,883.	28,537.	0.
		_			
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			·		·
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		-			
		<del> </del>			
_		-			
		4			
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		4		1	
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-		1			

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Financial Accounts.

Form 990 (2006)

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and

	Information Regarding Transfers To organization is a controlling organization	and From Controlled E tion as defined in sectio	ntities. Complete only if t in 512(b)(13).	tne
		e service de la constant de la const		Yes No
106	Did the reporting organization make any transfers to 'Yes,' complete the schedule below for each controll	a controlled entity as defined ed entity	in section 512(b)(13) of the Coc	
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
а		_		
b				
С		_		
	Totals			
107	Did the reporting organization receive any transfers 'Yes,' complete the schedule below for each controll	from a controlled entity as de	fined in section 512(b)(13) of the	Yes No Yes Code? If
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a		_		
b		_		
С		_	·	
	Totals			
108	Did the organization have a binding written contract annuities described in question 107 above?	in effect on August 17, 2006,	covering the interest, rents, roy	alties, and X
Plea Sig Her	Signature of officer	return, including accompanying schedul n officer) is based on all information of v	Date 5	113607
Pai Pre	- signature	Dat	e Check if self- employed ► X	Preparer's SSN or PTIN (See General Instruction W) N/A
par Use Onl	yours if self- employed), > 3310 WEST END AVENUE		EIN ► N/A	i15) 383-6592
RAA				Form 990 (2006)

	Statements About Activities (See instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid			
	or incurred in connection with the lobbying activities ► \$ N/A  (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	, ,	li.	
	(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1	$\frac{1}{2}y$	X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.)			
a	Sale, exchange, or leasing of property?	2a		X
j.	Lending of money or other extension of credit?	2b	,	Х
į.	conding of money of other extension of dedit:	20		
_	Firmishing of goods, continue on facilities 2	_		v
C	Furnishing of goods, services, or facilities?	2c		X
	SEE FORM 990, PART V		v	
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X	
				ν,
е	Transfer of any part of its income or assets?	2e		X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a		<u>x</u>
				.,,
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' attach a detailed statement	3c		Х
c	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		<u>x</u>
4 2	Did the organization maintain any donor advised funds? If 'Yes,' complete lines 4b through 4g. If 'No,' complete lines 4f and 4g	4a		х
ŀ	Did the organization make any taxable distributions under section 4966?	4b		X
(				
•	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		X
(	d Enter the total number of donor advised funds owned at the end of the tax year ▶			· <del></del>
(	e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶			
1	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	0	)	
	g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ►	C	<u> </u>	

Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. Calendar year (or fiscal year (e) beginning in)..... Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.). 15 19, 2,043,229. 2,322,458 2,073,655 1,415,708. 7,855,050. 16 Membership fees received.... Gross receipts from admissions merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose . . . . . . . . 292,353. 257,942 301.577. 282,066. 1,133,938. Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organ-30,970. ization after June 30, 1975 . . . . . . . . 36,989. 31,769. 28,455. 128,183. Net income from unrelated business activities not included in line 18... 0. Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf....... 0. The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge . . . . 0. Other income, Attach a schedule. Do not include gain or (loss) from sale of capital assets SEE . STMT . 14 3,510. 20,070. 3,242. 9,103 4,215 729,739 9,137,241. 2,375,813. 2,620,473. 2,411,216. Total of lines 15 through 22 . . . . 2,109,639. 1,447,673 8,003,303. 2,083,460 2,362,531 Line 23 minus line 17..... 17,297. 26,205. Enter 1% of line 23..... 23,758. 24,112. 26 a 160,066. Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24..... b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your 26 b 417,823. return. Enter the total of all these excess amounts c Total support for section 509(a)(1) test: Enter line 24, column (e)..... 8,003,303 26 c 18 128,183. 19 d Add: Amounts from column (e) for lines: 26b 26 d 566,076. 437,227. 26 e e Public support (line 26c minus line 26d total)..... 92.93 % 26 f Organizations described on line 12: N/A a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year: (2005) \_ \_ \_ \_ (2004) \_ \_ \_ (2004) \_ \_ \_ (2003) \_ \_ \_ \_ (2002) \_ \_ \_ \_ bFor any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return.

After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2005) \_\_\_\_ (2004) \_ \_ \_ (2003) \_ \_ \_ c Add: Amounts from column (e) for lines: 15 20 27 c and line 27b total.... 27 d d Add: Line 27a total..... e Public support (line 27c total minus line 27d total)..... f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) . . . . ▶ 27f g Public support percentage (line 27e (numerator) divided by line 27f (denominator))..... 욷 ક્ર h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) . . . . . . . .

Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

	Lobbying Ex (To be complete		cting Public Chari organization that filed F				02 0	1011	N/A		
Chec	k ► a  if the organiz	ation belongs to an affil	iated group. Check	<b>b</b> if you	checke	ed 'a' and 'lir	nited o	ontro	l' provisions apply.		
		mits on Lobbying				(a) Affiliated tota	group		(b) To be completed for all electing		
		'expenditures' means a							organizations		
36	Total lobbying expenditu	•			36			- ‡			
37	Total lobbying expenditu				37			‡			
38	Total lobbying expenditu				38						
39	Other exempt purpose e	•			39						
40	Total exempt purpose ex	•	•		40						
41	Lobbying nontaxable am										
	If the amount on line 40		obbying nontaxable an								
	Not over \$500,000 Over \$500,000 but not over \$1,0			1							
	Over \$1,000,000 but not over \$		· ·	ľ	41						
	Over \$1,500,000 but not over \$				41						
	Over \$17,000,000										
42	Grassroots nontaxable a				42		*********	*******			
43	Subtract line 42 from lin	•	•		43						
44	Subtract line 41 from lin				44			_			
	Caution: If there is an a										
					n Eni	/h)					
	4 -Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50.)										
			Lobbying Expen	ditures During 4	-Year	Averaging P	eriod				
	Calendar year (or fiscal year beginning in) ►	<b>(a)</b> 2006	<b>(b)</b> 2005	<b>(c)</b> 2004		<b>(c</b> 20			(e) Total		
45	Lobbying nontaxable amount										
46	Lobbying ceiling amount (150% of line 45(e))										
47	Total lobbying expenditures										
48	Grassroots non- taxable amount										
49	Grassroots ceiling amount (150% of line 48(e))										
50	expenditures					٠.			· · · · · · · · · · · · · · · · · · ·		
	Lobbying A (For reporting of						r	——т	N/A		
atte	ng the year, did the orga mpt to influence public op	pinion on a legislative m	atter or referendum, th	rough the use of	:		Yes	No	Amount		
	a Volunteers										
	b Paid staff or manageme										
	c Media advertisements.										
	d Mailings to members, le						<del>  </del>				
	e Publications, or publish										
	f Grants to other organiz g Direct contact with legis										
	g Direct contact with legis h Rallies, demonstrations						$\vdash$				
	i Total lobbying expendit		• •								
		ove, also attach a state						,.c.c			

2006	FEDERAL STATEMENTS		PAGE 2
	ST. LUKE'S COMMUNITY HOUSE, INC.		62-0484183
FORM	EMENT 5 I 990, PART III, LINE A EMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	<i>1</i>	in the
	DESCRIPTION	GRANTS AND ALLOCATIONS	PROGRAM SERVICE EXPENSES
PRESC	HOOL CHILDCARE - AVERAGE ENROLLMENT OF 73 CHILDREN. INCLUDES FOREIGN GRANTS: NO		807,151.
ENROL	L AGE CHILDCARE - BEFORE & AFTER CARE AVERAGE LMENT OF 62 YOUTHS; SUMMER CARE PROGRAM AVERAGE LMENT OF 62 YOUTHS. INCLUDES FOREIGN GRANTS: NO		229,090.
SENIC DELIV PROGF	OR SERVICES - 98 SENIORS IN CASE LOAD, 583 COMMODITIES VERED, 23,138 MEALS SERVED THROUGH THE MOBILE MEALS LAM.  INCLUDES FOREIGN GRANTS: NO		119,408.
16 SE PARTI PROGE PROGE	UNITY SERVICES - 3,043 FOOD BOXES DELIVERED, 518 SELING SESSIONS SERVING 53 FAMILIES, 253 INDIVIDUALS AND ENIORS, 25 HOMES REPAIRED, COMMUNITY EVENTS WITH 1,100 CCIPANTS, 734 CHILDREN SERVED THROUGH THE TOY STORE RAM, 359 FAMILIES SERVED THROUGH THE ADOPT-A-FAMILY RAM, 412 INDIVIDUALS RECEIVED FINANCIAL ASSISTANCE, AND RETURNS PREPARED FOR 232 FAMILIES. INCLUDES FOREIGN GRANTS: NO		165,299.
VOLUM	NTEERS - ORGANIZATION AND COORDINATION OF OVER 1,734 NTEERS SERVING THROUGHOUT THE PROGRAMS AND SERVICES IDED BY THE ORGANIZATION. INCLUDES FOREIGN GRANTS: NO		35,082.
FAMII PROGI	LY RESOURCE CENTER - ORGANIZES AND ADMINISTERS EXPANDED RAMS AND SERVICES BASED ON COMMUNITY INPUT AND NEEDS.  INCLUDES FOREIGN GRANTS: NO		52,027.
		\$ 0.	\$1,408,057.
FORM	EMENT 6 1990, PART IV, LINE 56 STMENTS - OTHER		
_	DESCRIPTION OF INVESTMENT METHO		BOOK VALUE
EPIS	COPAL ENDOWMENT CORP COMMON TRUST FD MARKET VALUE	TOTAL \$	907,961. 907,961.

06	FEDERAL STATEMEN	NTS		PAGE 4
	ST. LUKE'S COMMUNITY HOUS	E, INC.		<u>6</u> 2-048418
STATEMENT 11 FORM 990, PART IV-B, LINE B( OTHER AMOUNTS	(4)			e, The state of th
SPECIAL EVENT EXPENSES	4		TOTAL \$	24,496. 24,496.
STATEMENT 12 FORM 990, PART V-A LIST OF OFFICERS, DIRECTOR	RS, TRUSTEES, AND KEY EMPLO	YEES		
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	ACCOUNT/
TIFFANY ISRAEL	ASSOC EXEC DIR	\$ 58,556.	\$ 10,239.	\$ 0
NASHVILLE, TN	40			
DAVID ANDERSON	BOARD MEMBER	0.	0.	C
FRANKLIN, TN	3			
DARA DICKSON	BOARD MEMBER	0.	0.	C
NASHVILLE, TN	3			
TIM DOUGLAS	BOARD MEMBER	0.	0.	(
NASHVILLE, TN	3			
TODD CATO	BOARD MEMBER	0.	0.	(
NASHVILLE, TN	3			
BILL FORRESTER	BOARD MEMBER	0.	0.	(
NASHVILLE, TN	3			
JOE GORDON	BOARD MEMBER	· 0.	0.	(
ASHLAND CITY, TN	2			
DIANNE HERNDON	BOARD MEMBER	0.	0.	(
NASHVILLE, TN	2			
PRESH KILLEBREW	BOARD MEMBER	0.	0.	
NASHVILLE, TN	2			
BRIAN DILLER	EXECUTIVE DIREC	84,250.	14,650.	(
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### FEDERAL STATEMENTS

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ST. LUKE'S COMMUNITY HOUSE, INC.

62-0484183

STATEMENT 12 (CONTINUED) FORM 990, PART V-A

LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
WILLIAM T. DELAY	BOARD MEMBER	\$ 0.	\$ 0.	\$ 0.
NASHVILLE, TN				
WENDE STAMBAUGH	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	2			
	TOTAL	\$ 179,883.	\$ 28,537.	\$ 0.

# STATEMENT 13 FORM 990, PART VIII RELATIONSHIP OF ACTIVITIES TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES

### LINE # EXPLANATION OF ACTIVITIES

- PROGRAM SERVICE REVENUES ALLOW THE ORGANIZATION TO PROVIDE LOW-COST CHILDCARE AND OTHER SERVICES TO HELP LOW INCOME WORKING FAMILIES ACHIEVE THEIR POTENTIAL AND PREVENT PROBLEMS THAT THREATEN THE STABILITY OF FAMILIES AND COMMUNITY.
- MISCELLANEOUS REVENUES HELP TO OFFSET THE MISCELLANEOUS COSTS OF OPERATING THE CHILDCARE FACILITIES.

#### STATEMENT 14 SCHEDULE A, PART IV-A, LINE 22 OTHER INCOME

DESCRIPTION		_(A	2005	_(B)	2004	(C)	2003	_(D)	2002	(E	TOTAL
MISCELLANEOUS REVENUE	TOTAL	\$ \$	3,242. 3,242.	\$ \$	9,103. 9,103.	\$ \$	4,215. 4,215.	\$ \$	3,510. 3,510.	\$ \$	20,070. 20,070.