NASHFILMFES 06/04/2010 1:01 PM

Department of the Treasury Internal Revenue Service

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)

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047
2009
Open to Rublic Linspection

A	For the 2009 ca	lendar year, or tax year beginning , and ending			
	Check if applicable: Address change	Please C Name of organization use IRS NASHVILLE FILM FESTIVAL		D Emplo	yer identification number
\equiv	-	label or District As	•	23-	7258049
=	Name change	type. Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	 	one number .
\sqcup	initial return	See PO BOX 24330			-742-2500
	Termination .	Specific City or town, state or country, and ZIP + 4		G Gross rece	
\square	Amended return	tions. NASHVILLE TN 37202-4330			•
Ħ.	Application pending	F Name and address of principal officer:		H(a) Is this	a group return for
<u>۔۔۔</u>	· · · · · · · · · · · · · · · · · · ·	·	•	affiliati H(b) Are all	es? Yes X No
				includ	affiliates Yes No
				if No,	' attach a list. (see instructions)
1.	Tax-exempt statu			1	
		WWW.NASHVILLEFILMFESTIVAL.ORG	T. v	H(c) Group	exemption number
		: X Corporation Trust Association Other ►	L Year of formation:		M State of legal domicile:
		ummary			,
:	1 Briefly d	escribe the organization's mission or most significant activities: PROMOTE OR SHOWCASE INDEPENDENT AND STUDENT FILM	/C 2017	• • • • • • • • • • •	•••••
9	20 1	A DESCRIPTION OF THE PARTY OF T			•
Activities & Governance		Principle Little Cit and Alterdade Land and Alterdate	*****************		······
Ver	2 Check ti	his box if the organization discontinued its operations or disposed of more	than 25% of its net as	sets.	
9		of voting members of the governing body (Part VI, line 1a)			27
න්		of independent voting members of the governing body (Part VI, line 1b)			27
ığ.		mber of employees (Part V, line 2a)			4
ş	6 Total nu	mber of volunteers (estimate If necessary)		6	450
•	7a Total gr	oss unrelated business revenue from Part VIII, column (C), line 12		7a	
		elated business taxable income from Form 990-T, line 34		7b	0
			Prior Y		Current Year
9	8 · Contribu	utions and grants (Part VIII, line 1h)	26	0,655	
Revenue	9 Progran	service revenue (Part VIII, line 29)		39,73 <u>2</u>	193,447
Şe	10 Investm	ent income (Part VIII, column (A), lines 3, 4, and 7d)	···· . 	5	
_	11 Other re	evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		50,392	445,352
		venue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,392	447,732
		and similar amounts paid (Part IX, column (A), lines 1–3) s paid to or for members (Part IX, column (A), line 4)	••••		
_	40 0-1-1-			70,500	154,174
Expenses	15 Salaties	s, other compensation, employee benefits (Part IX, column (A), lines 5–10) ional fundraising fees (Part IX, column (A), line 11e) ndraising expenses (Part IX, column (D), line 25) 40,418			
jen	b Total fit	ndraising expenses (Part IX column (D) line 25) 40.418			
笠	17 Other e	xpenses (Part IX, column (A), lines 11a–11d, 11f–24f)	29	8,758	343,608
	18 Total ex	openses. Add lines 13–17 (must equal Part IX, column (A), line 25)		59,258	
	19 Revenu	ie less expenses. Subtract line 18 from line 12		18,866	-52,430
let Assets or	883		Beginning of C		End of Year
ssets	릚 20 Total as	ssets (Part X, line 16)		<u>65,685</u>	57,827
et Ag	B 21 Total lia	abilities (Part X, line 26)		3,207	
	己 22 Net ass	sets or fund balances. Subtract line 21 from line 20	<u> </u>	62,478	10,048
		Signature Block			
	l U	inder penalties of perjury, I declare that I have examined this return, including accompanying s nd bellef, it is true, correct, and complete. Declaration of preparer (other than officer) is based	chedules and statements on all information of whic	s, and to the b h preparer ha	est of my knowledge s anv knowledge.
_		ite solici, it is that, solitosi, this complete solitination of property (since their since) is a soliting	on an amenica	1	
	ign		,		
17	ere ?	Signature of officer		Dat	3
		Type or print name and title			
_			Date Chê	ale if	Preparer's identifying number
P		reparers	self-	. г	(see instructions) P00156471
	ranararia			loyed - L	00 0451007
	se Only	-im's name (or yours)	=TA ETITO	EIN	
		f self-employed), 12 Cadillac Dr Ste 210 address, and ZIP+4 Brentwood, TN 37027		Phone	• ▶ 615-916-3100
<u> </u>		cuss this return with the preparer shown above? (see instructions)] по.	
		and Paperwork Reduction Act Notice, see the separate instructions.		• • • • • • • • • • • • • • • • • • • •	Yes No Form 990 (2009)
	AA	and rapernoin reduction not notice, see the separate manuscript.			Fulli 330 (2009)

orm	990 (2009) NASHVILLE FILM FESTIV	AL 23-7258049	Page 2
-111 W. N. A.	art III Statement of Program Service Acc		
1	Briefly describe the organization's mission:		
Ί	TO PROMOTE OR SHOWCASE INDEPE	INDENT AND STUDENT FILMS AND	
F	FILM MAKERS THROUGH AN ANNUAL	J FILM FESTIVAL.	
			No.
2	Did the organization undertake any significant program s		
	the prior Form 990 or 990-EZ?		Yes X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make signification	ant changes in how it conducts, any program	□ ∵
			Yes 🔀 No
	If "Yes," describe these changes on Schedule O.		
4		the organization's three largest program services by expense	
		on 4947(a)(1) trusts are required to report the amount of gran	nts and
	allocations to others, the total expenses, and revenue, if	any, for each program service reported.	
	222 64	2 :	102 //7
ŧа	(Code:)(Expenses \$ 333,64	including grants of \$ (Rev	enue \$ 193,44/
.1	To provide a snowcase for ima	3 including grants of \$) (Revaginative students and and to stimulate teaching of	
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Ι	film and film study		
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	/C-d	including groups of C	ronuo ¢
aŧ	(Code:) (Expenses \$	including grants of \$	
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_	(Code: \/Expenses \$	including grants of \$) (Rev	vonue ¢
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_	1.04		
	d Other program services. (Describe in Schedule O.)		
4 0	(Expenses \$ including grain	nts of \$) (Revenue \$	`

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	·	ĺ	
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	'		
	Schedule C, Part II	4		<u> </u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI.			
•	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.			
•	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.			
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		4	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
, •	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		3	
	Schedule D, Parts XI, XII, and XIII.	12	X	100000
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.			77
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, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			₩.
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	40		•
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	 	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	17	.	x
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	11	 	-
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	18		x
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10		- 22
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	19		x
20	If "Yes," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
<u>20</u>	Did the diganization operate one of more hospitals? It is tes, complete schedule in	, 20		- 43

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

Pa	it V Statements Regarding Other IRS Filings and Tax Compliance					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of					
	U.S. Information Returns. Enter -0- if not applicable	1a	28		32	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b				
C	Did the organization comply with backup withholding rules for reportable payments to vendors and rep	ortab	le	and the second		
	gaming (gambling) winnings to prize winners?	,	q	1c	X	
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	4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		<u>2b</u>	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see					
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d by				
	this return?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authori	ity			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin	ancial				
	account)?			4a	ossiafilio es kettiao	X
b	If "Yes," enter the name of the foreign country: ▶					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank				
	and Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regard	arding				
	Prohibited Tax Shelter Transaction?			<u>5c</u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
	organization solicit any contributions that were not tax deductible?			<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				
	gifts were not tax deductible?			6b	2800.40	10000000
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	goods			77	
	and services provided to the payor?			7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	IS				
	required to file Form 8282?		т	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	erson	aı	7-		
£	benefit contract?					<u> </u>
T	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri-			7		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		-
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C			7h	ĺ	
8	required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		• • • • • • • • • • • • • • • • • • • •	····· '''	100	
Ü	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring					
	organization, have excess business holdings at any time during the year?			8	Mark Control	
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a	>654 2 065566	
b	Did the organization make a distribution to a donor, donor advisor, or related person?					
10	Section 501(c)(7) organizations. Enter:	• • • • •				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	1			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1			
11	Section 501(c)(12) organizations. Enter:		_1			
 а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
~	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		- Company
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1			

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

<u>Sec</u>	tion A. Governing Body and Management					
				[Bykgiiysko	Yes	No
1a	Enter the number of voting members of the governing body	1a	27	—— {i		
b	Enter the number of voting members that are independent	1b	27			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			A STANKE STANKE		
	any other officer, director, trustee, or key employee?			2	ļ	X
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors or trustees, or key employees to a management company or other person?			3	ļ	X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was	filed?		4	_	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?			5	 	X
6	Does the organization have members or stockholders?			6	ļ	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members					
	of the governing body?			7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?			7b	A SUMBON SECURIS	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during					
	the year by the following:					
а	The governing body?			8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			•		
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		<u></u>	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the I	ntern	al			
Rev	enue Code.)				·	
					Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a	<u> </u>	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with those of the organization?			10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the					
	form?					X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give					
	rise to conflicts?			12b	X	<u></u>
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this is done			12c	X	<u> </u>
13	Does the organization have a written whistleblower policy?			13	X	
14	Does the organization have a written document retention and destruction policy?			14	X	
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?					
а	The organization's CEO, Executive Director, or top management official			15a		
b	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
	with a taxable entity during the year?			16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate					Y. Carlot
-	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard					
	the organization's exempt status with respect to such arrangements?			16b	ia (4.1.280 ************************************	n marriagna
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed None					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)	s only)				
. •	available for public inspection. Indicate how you make these available. Check all that apply.					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest of the conflict	erest				
19	policy, and financial statements available to the public.	.01001				
20	State the name, physical address, and telephone number of the person who possesses the books and records of	f tha				
20	organization: NASHVILLE FILM FESTIVAL 161 RAINES AVENUE					
NT.	ASHVILLE TN 372			615-74	12-2	500
747	IN 5/2	, ,		<u> </u>	<u></u>	

Form 990 (2009) NASHVILLE FILM FESTIVAL

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100.000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)		,	(0				(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Pormer	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
DAVID BENNETT BOARD MEMBER		x						0	0	
CAREY NELSON BURC	H	x						0	0	
YURI CUNZA BOARD MEMBER		x							0	
CLARKE GALLIVAN BOARD MEMBER		X						0	0	
ANDY VAN ROON									_	
BOARD MEMBER BRET WOLCOTT		X						0	0	
BOARD MEMBER SUSAN CLARK		X					-	0	0	
BOARD MEMBER KAY CLARY		X		ļ	<u> </u>			0	0	
BOARD MEMBER PERRY GIBSON		X						, 0	0	
BOARD MEMBER KERRY HANSEN		X						0	0	
BOARD MEMBER TOM LORD		X						0	0	
BOARD MEMBER CURT HAHN		X		-				0	0	
BOARD MEMBER DAVID HALEY		X						0	0	
BOARD MEMBER TYLER MIDDLETON		X						0	0	
BOARD MEMBER JENNA VON OY		Х	<u> </u>				-	0	0	
BOARD MEMBER SHARICA SMALLWOOD	<u>,</u>	X						0	0	
BOARD MEMBER BRANDYN PAYNE		X	_					0	0	
BOARD MEMBER		x						0	0	Form 990 (20

Part VII Section A. Officers,	, Directors, Trus	stees	s, Ke	y Er	nplo	yees	, an	d Highest Compensated	Employees (continued)	
(A)	(B)		,		C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director		Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
			•			ated				
CAROLYN MCDONALD BOARD MEMBER		x						0	0	0
KATE PEARSON BOARD MEMBER		x						o	o	0
ANA SCHWAGER			<u> </u>		,					
BOARD MEMBER TRACI THOMAS		X						0	0	0
BOARD MEMBER		X						0	0	0
SANDRA WESTERMAN BOARD MEMBER		x						0	0	0
SALLIE MAYNE								·		
MANAGING DIR DAVID M BOYER	40.00			X		ļ		48,850	0	0
TREASURER				x				0	0	0
JULIE BOOS VICE PRES				x				o	o	0
TODD CASSETTY										
PRESIDENT STACY WIDELITZ				X				0	0	0
PAST PRES				X				0	0	0
CINDY TYLER SECRETARY				x				0	0	0
									_	
1b Total								48,850		
2 Total number of individuals (in	-		_	thos	e lis	ted a	bov	e) who received more than	\$100,000 in	
reportable compensation from	trie organization	1	<u> </u>							Yes No
3 Did the organization list any for employee on line 1a? If "Yes,"										3 X
4 For any individual listed on line the organization and related o	e 1a, is the sum	of re	port	able	com	pens	atio	n and other compensation	from	
individual					. 					4 X
5 Did any person listed on line 1 services rendered to the organ										5 X
Section B. Independent Contractor			41						45 @400 000 of	
Complete this table for your five compensation from the organical compensation.	zation.	ensa	itea	inae	pend	ient (mont			(0)
Name and	(A) business address						-	Descrip	(B) tion of services	(C) Compensation
							\vdash			
2 Total number of independent	-		-			ed to	tho	se listed above) who receive	ved	0
more than \$100,000 in compe	aisauon iiom the	org	arılZi	auon					· · · · · · · · · · · · · · · · · · ·	Form 990 (2009)

Pa	rt V	III Stater	nent of Reve	nue						
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated car		1a						
gra	b	Membership d		1b						
fts, an	С	Fundraising ev		1c						
igi	d		izations	1d		101 701				
sin	е		(contributions)	1e		101,731				
heti	f	All other contribution and similar amounts		4.		150 174	100			
itri of				1f		150,174				
Contributions, gifts, grants and other similar amounts	g		ns included in lines 1a- es 1a–1f				251,905		90.0	
		Total. Add line	33 Ia-11			Busn. Code	Control Mark States and Control of Control o			
'en	2 a	FESTIVA	L FEES				171,717	171,717	0 1 1 2 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	
Re	b	MEMBERS					21,730		,	
vice	С									
Ser	d									
am	е									
Program Service Revenue	f		am service reve							
П	g		es 2a-2f				193,447			
	3		come (including				•			
		other similar a								
	4		nvestment of tax							
	5	Royallies	(i) Real	· · · · · · · ·		ersonal				
	6a	Gross Rents	(1) 7 (02)			0,00,101				
	b	Less: rental exps.								
	c	Rental inc. or (loss)								
	d	Net rental inco	ome or (loss)			🕨		***************************************	Topic months of the second	
	7a	Gross amount from sales of assets	(i) Securities	3	(ii)	Other				
		other than inventory								
	b	Less: cost or other								
		basis & sales exps.								
	C	Gain or (loss)				<u> </u>				
	a	• ,	ess)om fundraising eve	•	· · · · · · · · · ·	<u> </u>				
ine	oa									
ven			reported on line 1c)							
æ			18							
Other Reven	b		xpenses							
0			(loss) from func	• • •	events .)				
	9a		om gaming activitie							
			19							
			xpenses							
			(loss) from gam	ing ac	tivities	>				
	10a		f inventory, less							
	١.		lowances				-			
	ı		goods sold (loss) from sale		ventor					
	٠		ellaneous Revenue		veritory .	Busn. Code				15.00
	11a									
	b									
	c									
	d	All other rever	nue							
	е	Total. Add line	es 11a–11d			>			1.00	
_	12		e. See instructio				445,352	193,447	0	0

Form 990 (2009) NASHVILLE FILM FESTIVAL

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must o				
	not include amounts reported on lines 6b, 8b, 9b, 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 governments and		7		
•	organizations in the U.S. See Part IV, line 21	·			
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
J	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
J		88,850	53,519	14,612	20,719
_	trustees, and key employees Compensation not included above, to disqualified	00,000	33,313	14,012	20,113
6	•				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	12 667	7 502	36 004	
7	Other salaries and wages	43,667	7,583	36,084	
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)	0.460	4 000	2 402	1 410
9	Other employee benefits	9,462	4,920	3,123	1,419 1,829
10	Payroll taxes	12,195	6,342	4,024	1,829
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other				
12	Advertising and promotion	22,777	6,100		
13	Office expenses	8,922	6,541	1,905	476
14	Information technology				
15	Royalties				
16	Occupancy	12,888		10,310	
17	Travel	93,228	84,515	8,713	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest		·		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,922		1,922	
23	Insurance	8,594	3,926	4,668	and things the age and the second sec
24	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
а	FESTIVAL EXPENSES	48,300	48,300	•	
b	CONTRACT SERVICES	43,972	43,032	940	
С	EQUIPMENT RENTAL	22,150	22,150		
d	PRINTING & PROMOTIONS	16,852	15,794		
e	MISCELLANEOUS	14,450	6,124	3,331	
f	All other expenses	49,553	24,797		
25	Total functional expenses. Add lines 1 through 24f		333,643		
26	Joint costs. Check here if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
DAA					Form 990 (2009)

Form 990 (2009) NASHVILLE FILM FESTIVAL

Pa	art X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			58,539	1	54,271
	2	Savings and temporary cash investments				2	
l	3	Pledges and grants receivable, net		· · · · · · · · · · · · · · · · · · ·		3	
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directed	ors, trustees, key				
		employees, and highest compensated employees. C	-	- IX			
- 1		Schedule L			100 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5	
	6	Receivables from other disqualified persons (as defi	ned under section	n			
		4958(f)(1)) and persons described in section 4958(c					
		Part II of Schedule L				6	2000 to 100 to 1
sts	7	Notes and loans receivable, net			1,668	7	
ssets	8	Inventories for sale or use				8	
۲	9	Prepaid expenses and deferred charges	• • • • • • • • • • • • • • • • • • •		1,000	9	1,000
	_	Land, buildings, and equipment: cost or		· · · · · · · · · · · · · · · · · · ·	,		
		other basis. Complete Part VI of Schedule D	10a	26,931			
	h	Less: accumulated depreciation	10b	24,375	4,478	10c	2,556
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11	• • • • • • • • • • • • • • • • •		· · · · · · · · · · · · · · · · · · ·	12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equal lin	65,685		57,827		
\dashv	17				1,581		32,779
	18	Grants payable				18	
	19	Deferred revenue			1,626		15,000
	20	Tax-exempt bond liabilities				20	
g	21	Escrow or custodial account liability. Complete Part	IV of Schedule D			21	
Liabilities	22	Payables to current and former officers, directors, tr				7.0	
Ē		employees, highest compensated employees, and c					
ia		persons. Complete Part II of Schedule L		3		22	
_	23	Secured mortgages and notes payable to unrelated	third parties			23	
	24	Unsecured notes and loans payable to unrelated thi				24	
	25	Other liabilities. Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			3,207		47,779
ŝ		Organizations that follow SFAS 117, check here			-		
Fund Balances		complete lines 27 through 29, and lines 33 and 34					
ā	27	Unrestricted net assets			62,478	27	10,048
Ba	28	Temporarily restricted net assets				28	
اع	29	Permanently restricted net assets				29	
ן קַ		Permanently restricted net assets Organizations that do not follow SFAS 117, check	k here 🕨 🗍				
		and complete lines 30 through 34.					
SC	30	Capital stock or trust principal, or current funds		ľ		30	
set	31	Paid-in or capital surplus, or land, building, or equip	ment fund	• • • • • • • • • • • • • • • • • • • •		31	•
Net Assets or	32	Retained earnings, endowment, accumulated incom				32	
¥/	33	Total net assets or fund balances			62,478	33	10,048
ž	34	Total liabilities and net assets/fund balances			65,685		57,827

Form **990** (2009)

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

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

Form **990** (2009)

3b

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

NASHVILLE FILM FESTIVAL

Employer identification number 23-7258049

Pa	art I	Rease	on for Public Charity	Status (All organizations	must c	omplet	e this	oart.) S	See in	struct	ions.			
he o	orga	nization is not	a private foundation becau	se it is: (For lines 1-through 11, c	check only	one box	.)							
1	\Box	A church, cor	nvention of churches, or as	sociation of churches described i	in section	170(b)(1)(A)(i).							
2	П	A school des	cribed in section 170(b)(1)	(A)(ii). (Attach Schedule E.)										
3				rice organization described in sec	ction 170(b)(1)(A)(i	iii).							
4	Ħ	•		ed in conjunction with a hospital o				(1)(A)(ii	i). Ente	r the ho	spital's	name.		
•		city, and state	=	,			` ,		•		•	·		
5		•		of a college or university owned	or operate	ed by a g	overnme	ntal unit	descri	ned in				
•	Ш	-	b)(1)(A)(iv). (Complete Par		ог орогах	od by a g	, , , , , , , , , , , , , , , , , , ,	man ann	400011	500 III				
^		-		governmental unit described in s	antian 17	0/b\/4\(A	164							
6	X							irom the	aanara	مناطييما				
7	A	-		substantial part of its support fro	om a gove	mnentai	unit or i	ioiii uie	genera	ii public				
_			section 170(b)(1)(A)(vi). (C		11. \									
8	_	-		170(b)(1)(A)(vi). (Complete Part										
9		-		(1) more than 33 1/3 % of its sup							oss			
		•		mpt functions—subject to certain	-									
		• •	•	and unrelated business taxable in	-) trom b	usiness	ses				
			•	30, 1975. See section 509(a)(2).			•							
10	H	-	•	exclusively to test for public safe	-									
11		-		exclusively for the benefit of, to										
				rted organizations described in se						section	l			
				the type of supporting organizati			1	_						
		a Type	··	c Type III–Function	-		d		e III–Ot					
e	Ш			ganization is not controlled direct	-									
				s and other than one or more put	oliciy supp	orted org	janizatio:	ns aesc	ribea in	section	1			
_		. , , ,	section 509(a)(2).		. ~	·	.		41					
f		-		termination from the IRS that it is	a Type I,	Type II,	or Type	III suppo	orting					
		-	check this box					<i></i>						
g		_	=	ation accepted any gift or contrib	ution from	any of the	ne							
		following per										ļ		T
		• • • •		controls, either alone or together									Yes	No
				of the supported organization?								11g(i)		
			member of a person descr	***************************************								11g(ii)		-
				• •								11g(iii)		
<u>h</u>				the supported organization(s).	1		· · · · · · · · · · · · · · · · · · ·		T					
(i)		e of supported	(ii) EIN	(iii) Type of organization (described on lines 1–9	(iv) Is the o	organization sted in your		ou notify ization in	(vi) organizat	s the	. (vii) Amo supp		
	Uig	anization		above or IRC section	1 ''	document?	col. (i)	of your	(i) organi	zed in the		aupp	011	
			·	(see instructions))	1	1		oort?	1	S.?				
					Yes	No	Yes	No	Yes	No				
					 	ļ	<u> </u>							
					-	-								
					+	-								
					+									
							100							
_	_			17.20										

258049 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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not 318,766 294,707 262,343 304,945 251,905 1,432,666 include any "unusual grants.") 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 1,432,666 294,707 262,343 318,766 304,945 251,905 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) 39,301 Public support. Subtract line 5 from line 4 . . 1,393,365 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (d) 2008 (a) 2005 (b) 2006 (c) 2007 (e) 2009 (f) Total Amounts from line 4 294,707 262,343 318,766 304.945 251,905 1,432,666 7 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 1,668 857 264 2,794 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 IV.) Total support. Add lines 7 through 10 1,435,460 11 Gross receipts from related activities, etc. (see instructions) 758,479 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 97.07% 14 Public support percentage from 2008 Schedule A, Part II, line 14 93.92% 15 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box 16a and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test-2008. 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 17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

	(Complete only if you che	ecked the box	OIT III B 9 OI F	ait i.j			
	tion A. Public Support	1	T	,	r		
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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	,	<u> </u>				
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support			·		_ · · · · · · · · · · · · · · · · · · ·	
Cal	endar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	-					
l0a	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						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)			1	<u> </u>		
14	First five years. If the Form 990 is for the	-	t, second, third, fo	urth, or fifth tax yea	ar as a section 501	(c)(3)	
	organization, check this box and stop her						▶ ∟
	tion C. Computation of Public S					· · · · · · · · · · · · · · · · · · ·	
15	Public support percentage for 2009 (line 8						<u>%</u>
16	Public support percentage from 2008 Sch				·····	16	<u>%</u>
	tion D. Computation of Investme						
17	Investment income percentage for 2009 (111 11 4 77			امدا	<u>%</u>
18	Investment income percentage from 2008						<u>%</u>
19a	33 1/3 % support tests—2009. If the orga						. □
,	17 is not more than 33 1/3 %, check this I						🟲 🗀
b	33 1/3 % support tests—2008. If the orgaline 18 is not more than 33 1/3 %, check to						▶ □
					DOUBLE V SUDDOFFED	DICIALDZZNOU	

Schedule A (F	orm 990 or 990-EZ) 2009	NASHVILLE	FILM	FESTIVAL	23-7258049 Page
Part IV	Supplemental Info	ormation. Compl	ete this	part to provide	the explanations required by Part II, line 10; ther additional information. See instructions.
-	r are in mile i ra or		,		
					······································
		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		
			• • • • • • • • •		
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					· · · · · · · · · · · · · · · · · · ·

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047 Open to Public

Inspection Employer identification number Name of the organization 23-7258049 NASHVILLE FILM FESTIVAL Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV. line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ __ _ _ _ _ Number of states where property subject to conservation easement is located ▶ _ _ _ _ _ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art. Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 **b** Assets included in Form 990, Part X

Sche	edule D (Form 990) 2009 NASHVILLE	FILM FESTIVA	} L		23-12	<u> 580</u>	49			age Z
Pa	art III Organizations Maintaining (Collections of Art,	Historical Trea	asures, c	or Other	Simi	lar Assets	(contir	nued)
3	Using the organization's acquisition, accession collection items (check all that apply):	, and other records, che	ck any of the follov	ving that are	e a significa	ant use	e of its			
а	Public exhibition	d Loan	or exchange progra	ams						
b	Scholarly research	e Other								
C	Preservation for future generations									
4	Provide a description of the organization's colle Part XIV.	ections and explain how	they further the org	janization's	exempt pu	ırpose	in			
5	During the year, did the organization solicit or reassets to be sold to raise funds rather than to be	eceive donations of art,	historical treasures	s, or other s	imilar				es 「	No No
Dم	art IV Escrow and Custodial Arrar	gements Comple	te if the organi	zation ar	rewered	"Yes	" to Form (agn Pa		140
1.0	IV, line 9, or reported an amo								41 (
10	Is the organization an agent, trustee, custodian									
ıa									es	No
	included on Form 990, Part X?							I	62	_ NO
b	If "Yes," explain the arrangement in Part XIV ar	na complete the following	g table:					Amour		
								Amour	11.	
	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f						.	1f			
2a	Did the organization include an amount on Form	m 990, Part X, line 21?						. 📙 Y	es	_ No
	If "Yes," explain the arrangement in Part XIV.									
Pa	art V Endowment Funds. Comple	te if organization a	nswered "Yes'	' to Form	990, Pa	rt IV,	line 10.			
		(a) Current year	(b) Prior year		years back		ree years back	(e) Fot	ır year	s back
1a	Beginning of year balance									1000
	Contributions									
	Net investment earnings, gains,							100000		
C										
	and losses								200	
	Grants or scholarships									
е	Other expenditures for facilities									
	and programs							-		
	Administrative expenses							1	<i>9</i> /2011	
g	End of year balance									
2	Provide the estimated percentage of the year e	end balance held as:								
а	Board designated or quasi-endowment	%								
b	Permanent endowment ▶ %									
	Term endowment ▶ %									
3a	Are there endowment funds not in the possess	ion of the organization t	nat are held and ad	dministered	for the					
	organization by:	-							Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations			• • • • • • • • • • • •		•••••		3a(ii)		
h	If "Yes" to 3a(ii), are the related organizations li	isted as required on Sch	edule R?	• • • • • • • • • •				3b		
				• • • • • • • • • •					·	
4 D-	Describe in Part XIV the intended uses of the cart VI Investments—Land, Buildin			an Part	X line 1	n				
3815×C		(a) Cost or other basis	(b) Cost or			o. cumulat	bed l	(d) Boo	k vole	
	Description of investment	(investment)	basis (oth	i	, ,	eciation	I	(4) 500	N Value	-
		(misesonem)	Dasis (0(II	S	uepi	SoldiiOl	<u>'</u>			
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment									
	Other		2	6,931		24	,375		2	, 556
	I. Add lines 1a through 1e. (Column (d) must equ	ual Form 990, Part X. co	olumn (B), line 10(c	:),)						556

Schedule D (Form 990) 2009 NASHVILLE FILM FESTIVE	AL	23-7258049	Page 3
Part VII Investments—Other Securities. See Form 990			
(a) Description of security or category	(b) Book value	(c) Method of valuat	
(including name of security)		Cost or end-of-year mark	et value
Financial derivatives			
Closely-held equity interests			
Other			
			*
			-
	· · · · · · · · · · · · · · · · · · ·		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	N D = 4 V E = 40		
Part VIII Investments—Program Related. See Form 990			
(a) Description of investment type	(b) Book value	(c) Method of valuat	
		Cost or end-of-year mark	et value
		•	
:			
Fotal. (Coiumn (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, line 15.		The second secon	
(a) Description			(b) Book value
			<u> </u>

	<u> </u>		
	· · · · · · · · · · · · · · · · · · ·		
Total (Only of the control of the co			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	•		
Part X Other Liabilities. See Form 990, Part X, line 25			
1. (a) Description of liability	(b) Amount		
Federal income taxes			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
The state of the s			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)			
rotal (Column (b) must equal 10m 330, 1 art A, Col. (b) me 23.)		Territoria (2011)	

NASHF	ILMFES 06/04/2010 1:01 PM				
Sche	dule D (Form 990) 2009 NASHVILLE FILM FESTIVAL		23-7258049		Page 4
_Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to				
1	Total revenue (Form 990, Part VIII, column (A), line 12)				,352
2	Total expenses (Form 990, Part IX, column (A), line 25)				,782
3	Excess or (deficit) for the year. Subtract line 2 from line 1				,430
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities		5		
6	Investment expenses				
7	Prior period adjustments		7		
8	Other (Describe in Part XIV.)				
9	Total adjustments (net). Add lines 4 through 8				
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			-52	<u>,430</u>
Pa	rt XII Reconciliation of Revenue per Audited Financial Statemen	nts With	Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements			1,010	<u>,542</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a	- 47.		
b	Donated services and use of facilities	2b	565,190		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d			
е	Add lines 2a through 2d		2e		,190
3	Subtract line 2e from line 1			445	,352
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			
	Other (Describe in Part XIV.)	4b			
	Add lines 4a and 4b		4c		
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			445	,352
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents Wit	h Expenses per Return		
1	Total expenses and losses per audited financial statements		1	1,062	<u>,972</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	565,190		
b	Prior year adjustments	2b			
	Other losses	2c			
	Other (Describe in Part XIV.)	2d			
	Add lines 2a through 2d		2e	565	,190
	Subtract line 2e from line 1			497	,782
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			
b	Other (Describe in Part XIV.)	4b			
	Add lines 4a and 4b		4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			497	,782
Pa	it XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lin	nes 1a and	4; Part IV, lines 1b		
and 2	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lir	nes 2d and	4b. Also complete		
this p	part to provide any additional information.				
-					
	 				
					<u>_</u>

Sch	edu	le D	(Fo	rm 9	90)	200	9	NZ	\SI	IV.	LLI	LΕ	F.	LLI	I I	TE:	ST:	IV	AL							23	-72	258	04	١9						Page	5
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SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization NASHVILLE FILM FESTIVAL	Employer identification number 23-7258049
Form 990, Part VI, Line 11A - Organization's	Process to Review Form 990
No review was or will be conducted.	
Form 990, Part VI, Line 12c - Enforcement of	Conflicts Policy
No compliance issues occurred in 2009.	
Form 990, Part VI, Line 15a - Compensation Pr	ocess for Top Official
The Executive Direcor's salary is approved by	
Form 990, Part VI, Line 15b - Compensation Pr	ocess for Officers
All salaries are approved by the Board of Dir	ectors.
Form 990, Part VI, Line 19 - Governing Docume	nts Disclosure Explanation
No documents available to the public	·
	.,

Form **4562**

Department of the Treasury Internal Revenue Service (99

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

OMB No. 1545-0172 **2009**

achment 67

Name(s) shown on return

► See separate instructions.

Identifying number

	NASHV.	ITTE EITTW E.E.	STIVAL			<u> 23-7</u>	<u> 25</u> 8	3049	
	ess or activity to which this form relate				 				
277.75. 1870.00.00	<u>ndirect Deprecia</u>								
Pa		ense Certain Prop				David 1			
		any listed propert						250,	000
1	Maximum amount. See the instr						1	250,	, 000
2	Total cost of section 179 proper	ty piaced in service (see	e instructions)		• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · ·	2	800,	000
3	Threshold cost of section 179 p					I	4	800,	, 000
4	Reduction in limitation. Subtract			lina apparatoly a			5		
5	Dollar limitation for tax year. Subtract	tine 4 from line 1. If zero of		ning separately, s ost (business use		Elected cost	5		
6	(a) Descrip	tion or property	(b) (c)	ost (business use	(C)	Liected Cost			
									
	Listed property. Enter the amou	ent from line 20	<u>_</u>		7				
7	Listed property. Enter the amou Total elected cost of section 179	O proporty Add amount	a in column (a) lines 6				8		
8	Tentative deduction. Enter the s					1	9		
9	Carryover of disallowed deduction				• • • • • • • • • • • • • • • • • • • •	 	10		
10 11	Business income limitation. Ent	or the smaller of busine	se income (not less that				11		
12	Section 179 expense deduction						12		
13	Carryover of disallowed deduction				13	<u></u>	12		
	: Do not use Part II or Part III bel								
OCONDA (CONDIN		ation Allowance a		tion (Do no	t include lis	sted proper	rtv)	(See instr.)	
14	Special depreciation allowance				-	log propor	7.7	(000 11.00.17	
1-7	during the tax year (see instruct			•			14		
15	Property subject to section 168(15		
16	Other depreciation (including A						16	1	,922
Sarrati an aria		ation (Do not inclu				<u></u>			
	m to to Dop. or	dilott (Do trot more	Section A	, (000			•		
17	MACRS deductions for assets p	placed in service in tax v	ears beginning before 2	2009			17		0
18	If you are electing to group any asset	•				······			
		Assets Placed in Ser					tem		
	(a) Classification of property	(b) Month and year	(c) Basis for depreciation (business/investment use		(e) Convention	(f) Metho	,d	(g) Depreciation de	duction
	(a) Classification of property	placed in service	only-see instructions)	period	(e) Convention	(i) Weth		(g) Deprediation de	
<u>19a</u>	3-year property	_				-			
b	5-year property		····						
<u> </u>	7-year property								
<u>d</u>	10-year property								
<u> e </u>	15-year property						_		
<u>f</u>	20-year property	_							
<u>g</u>	25-year property			25 yrs.		S/L	\rightarrow		
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			-
		-Assets Placed in Serv	ice During 2009 Tax Ye	ear Using the	Alternative De	- 1	rstem	l	
<u>20a</u>		_				S/L			
<u>b</u>				12 yrs.		S/L			
200 00000000000000000000000000000000000	40-year			40 yrs.	MM	S/L			
	irt IV Summary (See i								
21	Listed property. Enter amount f			• • • • • • • • • • • • • • • • • • • •			21		
22	Total. Add amounts from line 1			7-			_	a	000
	and on the appropriate lines of	•			s	<u></u>	22	<u> </u>	<u>,922</u>
23	For assets shown above and pl		ne current year, enter th	ie	23				

NASHFILMFES 06/04/2010 1:01	PM						
Forms 990 / 990-PF				oans Receiv			2009
Name	For calendar year 20	009, or tax year begir	nning		, and ending	Employe	er Identification Number
Name						Employe	i identification Number
NASHVILLE FI	LM FESTIVAL					23-7	258049
Form 990, Pa	rt X, Line 7	- Addition	nal	Informatio	n		
	N (1)			·	Dalatia a dia ta di		
(1) Employee r	Name of borrower				Relationship to dis	squalified p	erson
(1) Employee r	ecer vante					-	
(3)		-					
(4)							
(5)							
(6)							
(7)							
(8)							
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(10)							
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Original amour borrowed	nt Date of loan	Maturity date	·	Re	epayment terms		Interest rate
(1)							
(2)							
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(4)							
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(10)	I						
			200000000000000000000000000000000000000	`			
Se	curity provided by borrowe	er			Purpose of	of loan	
(1)							
(2)	<i>}</i>						· · · · · · · · · · · · · · · · · · ·
(3)							
(4)							
<u>(5)</u>							
(6)							
(7)							
(8)						· · ·	
(10)					h - man		
			В	alance due at	Balance due		Fair market value
	ration furnished by lender			eginning of year	end of year		(990-PF only)
(1)			 	1,668			
(2)							`
(3)			1				

	Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year	Fair market value (990-PF only)
1)		1,668		
2)				`
3)				
4)				
5)				
3)				
7)				
3)				
9)		1		
10)			····	
Totals		1,668		