Department of the Treasury Internal Revenue Service

Short Form

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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other org- anizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

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

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

OMB No 1545-1150

2008



А	FO	r the 2008 calendar year, or tax year beginning , 2008, and ending	
В	Che	ck ii applicable	imployer identification number
	Add	ress change Please TENNESSEE ALLIANCE FOR PROGRESS	03-0475220
	Nan	ne change label or DO BOY 60338	elephone number
F	₹ .	ol roturn Nin Civit I F TN 27206	·
F	7	,	615-226-8070
F	₹	Specific	Provin Evernation
⊨	₹ .	tions.	Group Exemption Iumber
—	App		
		• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts G Accounting meth	
_		must attach a completed Schedule A (Form 990 or 990-EZ). Other (specify)	
		H Check ► X ı	f the organization is not
- 1	We	bsite: NWW.TENNESSEEALLIANCEFORPROGRESS.ORG required to attact	ch Schedule B (Form 990,
J	Ora	anization type (check only one) — X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527 990-EZ, or 990-	PF)
K		eck If the organization is not a section 509(a)(3) supporting organization and its gross receipts are no	ormally not more than
•		5,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete retu	
_			
L	Add	d lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 tead of Form 990-EZ	► \$ 55,093.
FD.			
P	<u>ārtî</u>		
	1		1 54,418.
	2	Program service revenue including government fees and contracts	2
	3	Membership dues and assessments	3 675.
	4	Investment income	4
	1	a Gross amount from sale of assets other than inventory	7. 7
	`		18 €3
_	ļ		
E		c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a) (att sch)	5c
REVENU	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here	100 mg
Ñ	1	a Gross revenue (not including \$ of contributions	[]
Ę		reported on line 1) 6a	- 4
		b Less: direct expenses other than fundraising expenses 6b	7.1.
3		c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) .	6c
5007	١,		
7	′		
≠		<u> </u>	-
2		c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c
L	8	Other revenue (describe ►).	8
7	9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	- 9 55,093.
_	10		10
Ì		Benefits and to as for members	11
E	11	121	
P	12	Salaries, other compensation, and employee benefits.	
E	13	Professional fees and other payments to independent contractors	13 12,189.
EXPENSE	14	Occupancy, rent, utilities, and maintenance	14 260.
) E S	15	Printing, publications, postage, and shipping	15 2,593.
٠	16	OGDEN, UT OGDEN, UT OGDEN, UT	16 9,949.
	17		17 54,991.
_	18		. 18 102.
			20.5 (2)
N S	19		20 664
N E E	1	figure reported on prior year's return)	19 28,664.
']	20		20
_ `	21	Net assets or fund balances at end of year Combine lines 18 through 20 .	21 28,766.
P	îrt l	Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 inst	lead of Form 990-EZ
<u> </u>		(See the instructions for Part II) (A) Beginning of your service of the control	
2	• ^	ash, savings, and investments	
			23
23	_	and and buildings	
24		ther assets (describe >)	24
2		otal assets	
26	T		0. 26 0.
27	7 N	et assets or fund balances (line 27 of column (B) must agree with line 21) . 28, 664	28,766.

Form	990-EZ (2008) TENNESSEE ALLIA	ANCE FOR PROGRESS		03	<u>-04</u>	<u>75220 </u>	Page 2
Par	Statement of Program Se	ervice Accomplishments	s (See the instruction	ons.)		Expenses	
	s the organization's primary exempt purpose? El				(Red	uired for 501(c)	(3)
Desc	The what was achieved in carrying out t	he organization's evernt nurr	oses. In a clear and co	ncise manner.	and	(4) organizations	s and
desc	ribe what was achieved in carrying out to	of persons benefited, or other	relevant information for	each	l 4947	(a)(1) trusts, on	tional
prog	am title				for o	thérs.)	
28							
							
				 -		Į.	
	7		,,,				
	(Grants \$) If t	his amount includes foreign gi	rants, check here		28 a		
29							
	7				-	J	
	(Grants \$) If t	his amount includes foreign gi	rants, check here		29 a		
30							
							
	(Grants \$) If the	his amount includes foreign gi	rants check here	- -	30 a		
21	Other program services (attach schedul		rants, check here				
31		•					
		his amount includes foreign gi	rants, cneck nere		31 a		
	Total program service expenses (add I		<u> </u>	_	32		
Par	IV List of Officers, Directors	s, Trustees, and Key Em	i ployees. (List each o	ne even if not cor	npens	sated. See the in	istrs.)
		(b) Title and average hours	(c) Compensation (If	(d) Contributions	to	(e) Expense ac	count
	(a) Name and address	per week devoted	not paid, enter -0)	l employee benefit plan	ns and	and other allow	ances
	-	to position		deférred compensa			
NEL	L LEVIN	CEO/COORDINATOR	30,000.		0.		0.
161	1 FORREST AVE	40.00					
	HVILLE, TN 37206	1					
III	INTELL, IN 37200						
	·	_					
		<u> </u>	}	ł		}	
				i			
	·	+					
		4				-	
		İ	}	İ			
		1		1			
		1		1			
	-			 			
				1			
	~ 	7		Ì			
	-			·			·. ·
	~	-					
		4					
		7					
		1					
		<u> </u>	······································				
	~	4					
		_ i					
	-	1					
	~	- 					
_		-					
				<u> </u>			
	~]					
		†					
		 					
		. I					
		<u> </u>			ļ		
]					
		 - - - - - - 		-			
		-{					
		1 1		}	i		
					ı		

Form 990-EZ (2008) TENNESSEE ALLIANCE FOR PROGRESS

03-0475220

			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of	33		>
34	each activity Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes	34		X
35		A STATE		1
	a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35 a		Х
	b If 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b		-
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N	36		х
37	a Enter amount of political expenditures, direct or indirect, as described in the instructions . ► 37a 0.		7	
	b Did the organization file Form 1120-POL for this year?.	37b		X
38	a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38 a	* 419, "	X
	b If 'Yes,' complete Schedule L, Part II and enter the total amount involved . 38b N/A	3		40.7
39	501(c)(7) organizations Enter	100		
	a Initiation fees and capital contributions included on line 9		1	3
	b Gross receipts, included on line 9, for public use of club facilities . 39b N/A		F 5 7 7	1
40	a 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► 0.; section 4912 ► 0.; section 4955 ► 0.			9
	b 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the	1		لنجنا
,	year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' complete Schedule L, Part I	40 ь		X
	c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.			\$ 3 14
1	d Enter amount of tax on line 40c reimbursed by the organization		, 3 ³	ا د در
+	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e	772	X
41	List the states with which a copy of this return is filed NONE			
42	a The books are in care of ► NELL LEVIN/LEANN WOOD Telephone no. ► (615)	226	-807	0
	Located at ► PO BOX 60338 NASHVILLE TN ZIP + 4 ► 37206			
١	b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a	42 h	Yes	No X
	If 'Yes,' enter the name of the foreign country Securities account, or other financial accounts		75.7	3.73
		, sc 3	1	
		\$ 100 m	, j. j.	· 2\.
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.	2	1	
(c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42 c		X
	If 'Yes,' enter the name of the foreign country' . ►			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year	1		N/A
	and enter the amount of tax-exempt interest received or accrued during the tax year			N/A
			Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44		<u>x</u>
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.	45		
300		m 990	-F7 (

5' TANGE	DOD DDOCDECC		02.047	F 2 2 0	_
Form 990-EZ (2008) TENNESSEE ALLIANCE Part VI Section 501(c)(3) organization and complete the tables for lin	s only. All section	501(c)(3) organiz			
 Did the organization engage in direct or indirect for public office? If 'Yes,' complete Schedule's Did the organization engage in lobbying activities the organization operating a school as descent description. Big the organization make any transfers to an big 'Yes,' was the related organization(s) a section. 	C, Part I ties? If 'Yes,' complete cribed in section 170(b)i exempt non-charitable	Schedule C, Part II (1)(A)(II)? If 'Yes,' co	 mplete Schedule E	es . 46 47 48 . 49a 49b	Yes No X X X X
50 Complete this table for the five highest compereceived more than \$100,000 of compensation	nsated employees (oth	er than officers, directify there is none, ent	er 'None '		
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp accoun other allo	t and
Total number of other employees paid over \$100,000 . ► 51 Complete this table for the five highest compe from the organization. If there is none, enter 'I		ntractors who each re	eceived more than \$100,000) of comper	nsation
(a) Name and address of each independent contr	actor paid more than \$100,000		(b) Type of service	(c) Compe	ensation
NONE Total number of other independent contractors received.	ving over \$100.000				
Under penalties of perjury, I declare that I have exam true, correct, and complete Declaration of preparer (c	ined this return, including acco	mpanying schedules and sta	atements, and to the best of my knowledge	wiedge and beli	ef, it is

6-23-09 Coordinator Preparer's Identifying Number (See instructions)
P00285790 Date /22/09 Check if self employed Preparer's signature Firm's name (or yours if self-employed), address, and ZIP + 4 BELLENFANT CPAS parer's Use 136 WILSON PIKE CIRCLE ► 62-1298458 EIN (615) 370-8700 ►X Yes No Form 990-EZ (2008) BRENTWOOD, TN 37027 Phone no May the IRS discuss this return with the preparer shown above? See instructions

Sign Here

Paid Pre-

Only

BAA

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047 2008

Open to Public Inspection 1

Employer identification number

					CE F																	<u>7522</u>				
Par		Re	ason	for F	Public	: <u>C</u> h	arity	Stat	us (All	orga	nıza	atio	ns	must	cor	nple	te thi	s part	.) (se	e ir	<u>ıstru</u>	ctions	<u>s) </u>		
The c	rga	nızatı	on is	not a	orivate	four	ndatio	n beca	ause	ıt ıs:	(Ple	ase o	chec	k or	ily on	e org	janiza	ation)								
1		A ch	urch,	conve	ntion d	of chi	urches	or as	socia	ation	of cl	hurch	nes d	desc	ribed	n se	ction	170(b	χΑχτχ	i).						
2	П	A sc	hool o	lescrib	ed in s	secti	on 17	0(b)(1)	χΑχί	i). (A	Attac	h Scl	hedu	ıle E	(
3	П	A ho	spital	or co	perati	ve h	ospita	l servi	ce or	ganı	zatio	n de	scrib	ed i	n sec	tion	170(b)(1)(A	(iii). (A	ttach S	Sch	edule l	H.)			
4	Н		•		•					-									ction 1					ne hos	spital'	s
	ш			, and		•		•			•				•							•				
5		An o	rgani	zation		ed fo	or the Part	benefi	it of a	a coll	lege	or ur	niver	sity	owne	d or	opera	ated by	a gove	rnmen	tal i	init de	scribe	d in s	section	on
6 7	X	An o	rgani	zation	that no	orma	lly red	eives	a sul	bstar									I)(A)(v) ental un		om	the ge	neral	public	desc	rıbed
8	\Box			_	X1)(A) st desc			-			νδν	vi) (Com	nlet	e Part	11.5										
9	H																n con	tribution	s, mem	harchin	foc	e and	arnes	receir	nte	
3		from inves June	activi stmen 30, 1	ies rela t incor 975. S	ated to ne and see se	its e I unr ctior	xempt elated 509 (function busin a)(2). (ons – ness t Com	· subj taxat plete	ject to ole in Par	o cert ncom t III.)	taın e e (le	exce ess s	ptions section	, and 1 511	(2) r tax)	o more from b	than 33 ousines:	8-1/3 % ses acc	of I	ts supped by	oort fro the org	m gro ganıza	SS	after
10		An o	rgani	zation	organi	zed a	and o	perate	d exc	dusiv	ely t	o tes	st for	' pul	blic sa	fety	See	sectio	n 509(a) (4) . (see	ınstru	ctions)		
11	_	more	ldua e	ıclv su	organi pporte se of s	d or	ganız	ations	desc	ribed	d in s	section mple	on 50 ete li	09(a nes	1)(1) o 11e tl	r sec	tion ! gh 11	509(a)(h.	nctions 2). See	of, or c section	on 5	out t 09(a)((3). Ch	neck t	he bo	x that
			Турє					Type I			-		٠.				-	ıntegra				d	, ,	e III-		
е		than	heckıı found a)(2)	ng this lation	box, I manag	cert ers	ify tha and of	it the d ther th	organ an or	nzatione or	on is	not re pu	cont blicly	trolle y su	ed dire	ctly ed or	or inc	directly ations	by one describ	or mo ed in s	re o sect	lisqua ion 50	lified 9(a)(1	perso) or se	ns otl ectior	ner
f		If the	orga k this	nızatıc box .	n rece	ived	a wrı	tten de	eterm	ınatı	on fr	om t	he If	RS t	hat is	а Ту	γpe I,	Type I	l or Typ	e III sı	qqı	orting	organı	zatıor	٦,	
g		Sinc	e Aug	ust 17	, 2006	, has	the c	rganız	ation	n acc	epte	d any	y gıfl	t or	contr	buti	on fro	m any	of the	followir	ng p	erson	s?			
																							,		Yes	No
		(i)	a pe belo	rson w w, the	ho dire govern	ectly ning	or ind body	directly of the	con supp	trois, ortec	, eith d org	er al anıza	one ation	or to?	ogethe	er wi	th pe	rsons c	lescribe	d in (ii) ar	id (III)	. 11	g (i)		
		(ii)		•	ember		•																	g (ii)		ļ
		(iii)	a 35	% con	trolled	entit	ty of a	perso	n de	scrib	ed ir	1 (I) (or (II) ab	ove?							•	11	g (iii)		
h		Prov	ıde th	e follo	ving ir	nform	nation	about	the o	orgar	nızat	ions	the o	orga	nızatı	on s	uppoi	rts.		- y						
	(i)	Name Org	of Sup panization	ported on			(ii) EIN			abov	ribed or I	organi on line RC se uction	es 1-9 ction	ו	(iv) Is the organization in co (i) listed in your governing document?			(v) Did you notify the organization in col (i) of your support?		n I organi	(vi) Is the organization in col (i) organized in the US?			(vii) Amount of Support		
														_	Yes		No	Yes	No	Yes	<u>.</u> T	No				
			-																		T					
					l											\perp										
																			<u> </u>				<u> </u>			
						-																				
					_				+												1					
														I		- 1			1	1						
	_				100		23 SE		1 47E				N.E	5,745 -1(8)		新班			THE STATE OF							

Sehedule A (Form 990 or 990-EZ) 2008 TENNESSEE ALLIANCE FOR PROGRESS 03-0475220

Partilli 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.)

Sec	tion A. Public Support	04 (10 201 011					
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')	36,512.	19,406.	31,005.	54,816.	55,093.	196,832.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3	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.
4	Total. Add lines 1-3	36,512.	19,406.	31,005.	54,816.	55,093.	196,832.
5	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)						0.
6	Public support. Subtract line 5 from line 4	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1					196,832.
Sec	tion B. Total Support				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	T
Cale begi	ndar year (or fiscal year nning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	36,512.	19,406.	31,005.	54,816.	55,093.	196,832.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						0.
9	Net income form unrelated business activities, whether or not the business is regularly carried on .						0.
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV.)						0.
11	Total support. Add lines 7 through 10					المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع	196,832.
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	0.
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, c	or fifth tax year as	a section 501(c)	(3)
	tion C. Computation of Pul						100.00
	Public support percentage for 20 Public support percentage for 20			e 11, column (f)	•	14 15	0.0%
15	Public support percentage for 20	U/ Scriedule A, F	art IV-A, line 201				
	33-1/3 support test — 2008. If the and stop here. The organization	•					
b	33-1/3 support test — 2007. If the and stop here. The organization	e organization did qualifies as a pub	not check a box oblicly supported or	on line 13, or 16a ganization	, and line 15 is 33	3-1/3% or more, (check this box
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	ind-circumstances	s' test, check this	box and stop her	'e. Explain in Par	tiv now
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	ind-circumstances test. The organiz	s' test, check this zation qualifies as	box and stop her a publicly suppor	re. Explain in Par rted organization	t IV now the
18	Private foundation. If the organiz	zation did not che	ck a box on line,	13, 108, 100, 1/8			190 or 990-FZ) 2008

Schedule A (Form 990 or 990-EZ) 2008 TENNESSEE ALLIANCE FOR PROGRESS Partilla Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I)

766	tion A. Public Support						
Cale	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')						
2	Gross receipts from		<u> </u>				
2	admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt						
3	purpose. 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						
	Total. Add lines 1-5 Amounts included on lines 1, 2, 3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
C	: Add lines 7a and 7b.						
8	Public support (Subtract line						
	7c from line 6.)			最少を呼んべ	是此為但是是		
Sec	tion B. Total Support				_		
Cale	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received						
	on securities loans, rents, royalties and income form similar sources						
t	royalties and income form						
	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses						
11 12	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 12	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in	The state of the s				The state of the s	
11 12 13 14	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	is for the organiza stop here	ation's first, secor)
11 12 13 14	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990	is for the organiza stop here	ation's first, secor)
11 12 13 14 Sec	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	is for the organiza stop here blic Support P	ation's first, secor ercentage	nd, third, fourth, o	or fifth tax year as)
11 12 13 14 Sec 15 16	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 20	is for the organization here blic Support P 108 (line 8, columna 1007 Schedule A,	ercentage (f) divided by line Part IV-A, line 27	nd, third, fourth, one 13, column (f))	or fifth tax year as	a section 501(c)(3	
11 12 13 14 Sec 15 16 Sec	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 20 Public support percentage from 21 tion D. Computation of Inv	is for the organization here blic Support P 108 (line 8, column 2007 Schedule A, estment Incon	ercentage (f) divided by line Part IV-A, line 27 ne Percentage	nd, third, fourth, one 13, column (f))	or fifth tax year as	a section 501(c)(3	%
11 12 13 14 Sec 15 16 Sec	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 20	is for the organization here blic Support P 108 (line 8, column 2007 Schedule A, estment Incon	ercentage (f) divided by line Part IV-A, line 27 ne Percentage	nd, third, fourth, one 13, column (f))	or fifth tax year as	15 16 17	%
11 12 13 14 Sec 15 16 Sec 17 18	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pullic support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment I	is for the organization here blic Support P 108 (line 8, column 2007 Schedule A, estment Incon or 2008 (line 10c, rom 2007 Schedul	ercentage (f) divided by lin Part IV-A, line 27 ne Percentage column (f) divide le A, Part IV-A, line	te 13, column (f)) general column (f)) de d by line 13, column (f)	or fifth tax year as	15 16 17 18	% % %
11 12 13 14 Sec 15 16 Sec 17 18	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pull Public support percentage for 20 Public support percentage from 3 tion D. Computation of Investment income percentage fill investment income percentage fill 132-1/3 support tests = 2008. If the 6	stop the organization here blic Support P 108 (line 8, column 2007 Schedule A, estment Incon or 2008 (line 10c, rom 2007 Schedul	ercentage n (f) divided by lin Part IV-A, line 27 ne Percentage column (f) divided le A, Part IV-A, line check the box on le	te 13, column (f)) g d by line 13, column 27h	or fifth tax year as	15 16 17 18 2% and line 17 is not	% % %
11 12 13 14 Sec 15 16 Sec 17 18 19a	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pullic support percentage for 20 Public support percentage from 3 tion D. Computation of Investment income percentage from 33-1/3 support tests — 2008. If the comore than 33-1/3%, check this bits 33-1/3 support tests — 2007. If the comore than 33-1/3%, check this bits 33-1/3 support tests — 2007. If the comore than 33-1/3%, check this bits 33-1/3 support tests — 2007. If the comore than 33-1/3%, check this bits 33-1/3 support tests — 2007. If the comore than 33-1/3% support tests — 2007. If the comore than 33-1/3% support tests — 2007. If the comore than 33-1/3% support tests — 2007. If the comore than 33-1/3% support tests — 2007. If the comore than 33-1/3% support tests — 2007. If the comore than 33-1/3% support tests — 2007. If the comore than 33-1/3% support tests — 2007. If the comore than 33-1/3% support tests — 2007. If the comore than 34-1/3 support tests — 2007. If the comore than 34-1/3 support tests — 2007.	stop the organization did not one organization did not organiz	ercentage n (f) divided by lin Part IV-A, line 27 ne Percentage column (f) divide le A, Part IV-A, lin check the box on late on the organization	te 13, column (f)) g d by line 13, column 27h line 14, and line 15 in qualifies as a pu	or fifth tax year as imn (f)) is more than 33-1/3 iblicly supported of a. and line 16 is n	15 16 17 18 19, and line 17 is not organization here than 33-1/3%.	% % % %
11 12 13 14 Sec 15 16 Sec 17 18 19a	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from a public support percentage from a livestment income percentage from 33-1/3 support tests — 2008. If the comore than 33-1/3%, check this box	stop the organization here blic Support P 108 (line 8, column 2007 Schedule A, restment Incon or 2008 (line 10c, rom 2007 Schedul organization did not ox and stop here the organization did this box and stop	ercentage n (f) divided by lin Part IV-A, line 27 ne Percentage column (f) divide le A, Part IV-A, lin check the box on I the organization d not check a box been. The organ	te 13, column (f)) d by line 13, colume 27h. line 14, and line 15 or qualifies as a purious ization qualifies as a	or fifth tax year as imn (f)) is more than 33-1/3 iblicly supported of a, and line 16 is not a publicly supported of a publ	15 16 17 18 19, and line 17 is not organization nore than 33-1/3%, orted organization	% % % %

Schedule A	(Form	990 or	990-EZ	2008	TEN	NESSE	E A	LLIA	NCE	FOR	PROGE	RESS	03-0475220 Pa	age 4
Part IV	Supp	lemen	ital Ini	ormat	ion. (Comple	te th	ns pa	rt to	prov	ide the	expl	lanation required by Part II, line 10; itional information. (see instructions)	<u> </u>
	Part	II, line	17a c	or 17b;	or P	art III,	line	12. P	rovid	e any	y other	addi	itional information. (see instructions)	
•														
		- -									- -			
	. – –					_ _	_ _ _	- 	. _					
							- 							
			- -											
											-			
						- -								
								-						
			-			- -								
- -						- ·		· – – –						
								. -		- -	- -			
										- -		-		
							_ 						· 	
		- -						-					·	
		_ 								_ 				
	- - -													
						 -								
					· – – -		-			-				
_														
					-									
													·	
					. – – <i>–</i>	. – – -				- -				
						- -								
						- -				- 				
		- -												
	_ _													
													•	
		- -	. – – –											

STATEMENT 1 FORM 990-EZ, PART I, LIN OTHER EXPENSES	TENNESSEE ALLIANCE FOR PROGRESS IE 16	03-047522 0
STATEMENT 1 FORM 990-EZ, PART I, LIN	IE 16	09:36AN
EDUCATION EQUIPMENT FEES FOOD INFORMATION TECHNOLOG INSURANCE OFFICE EXPENSES TELEPHONE TRAVEL	ş Total <u>ş</u>	308. 25. 2,926. 1,400. 360. 333. 2,812. 192. 1,593. 9,949.
	ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS ATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR	
INDIRECTLY, TO PAY PR	REMIUMS ON A PERSONAL BENEFIT CONTRACT? ATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR	NO

_

Governance

Board Chair

Mr Dan Joranko

Board Chair Company Affiliation

Cokesbury Books

Board Chair Term

Dec 2007 to Dec 2008

Board Chair Email

jorankod@msu.edu

Board Members

Ms Cynthia Bennett - Deloitte - Voting

Mr. Mark Alan Burnett - Voting

Mr Dale Harris - Community Volunteer - Voting Mr Dan Joranko - Cokesbury Books - Voting

Ms. Tamara Ambar Losel - Voting

Mr. David Lyle - Voting
Ms. Susan McKay - consultant - Voting

Ms RoseMarie Mincey - University of Tennessee,- Voting

Rev Eugene TeSelle - Retired Vanderbilt Professor - Voting Mr. Randall Venson - Voting

Mr. John Zirker - Voting