Part	management and Discussiff For Agen "Voo" reenenge 1- 1'			Page 6					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Check if Schedule O contains a response or note to any line in this But A.V.	, and	for a	"No"					
	Check if Schedule O contains a response or note to any line in this Part VI	See in:	struct	ions.					
Sect	tion A. Governing Body and Management	<u>· · · · · · · · · · · · · · · · · · · </u>							
1a	The first the tay year		Yes	No					
	it there are material differences in voting rights among mombars of the								
	" " governing body delegated proad alithority to an executive committee								
	Sommittee, explain in schedule o.								
b	Enter the number of voting members included in line 1a, above, who are independent . 1b								
2	any other officer, director, trustee, or key employee have a family relationship or a business relationship with								
3	Did the organization delegate control over management duties sustained	2	×						
4	The state of the s	3		×					
5	and organization make any significant changes to its governing documents since the prior formation	4		×					
6	and organization become aware during the year of a significant diversion of the organization's assets	5		×					
7a	and digamization have members of stockholders?			X					
14	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?								
b	mere members of the governing body?	7a		X					
_	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing backet								
8	stockholders, or persons other than the governing body?	7b		X					
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
a	The governing body?								
b	Each committee with authority to act on behalf of the governing body?	8a	X						
9	Is there any officer, director, trustee, or key employed listed in Ded VIII Co	8b	×						
				×					
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Rever	9							
		iue Co	Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a	168	No					
b	If "Yes," did the organization have written policies and procedures assume the second procedures as a second procedure as a se	104							
11a	and branchios to disale tiell operations are consistent with the organizations	10b							
b	The die diguilization provided a complete copy of this form 990 to all members of its governing had a before till at								
12a	or controlled the process, if any, used by the organization to review this Form 000			X					
b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	×						
C	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"								
13	describe in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written desument whistleblower policy?	12c	X						
14	and destruction have a written document retention and destruction policy?	13	X						
15	Did the process for determining compensation of the following paragraphic	14	×						
а									
b	The organization of the Director of the management official	15a		×					
	and officers of key employees of the organization	15b	_						
16a	to mile too of too, describe the process in Schedule () (see instructions)			^					
IVa	Did the organization invest in, contribute with a taxable entity during the year?								
b	" TOO, GIG LIE OLUGIIVALION DOLLOV ON BURGES IN THE STATE OF THE STATE	16a		×					
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements.								
Conti		16b							
		TOD							
17	List the states with which a copy of this Form 990 is required to be filed ►N								
18	decitor of 04 requires an organization to make its Forms 1000 (1004)		i	04()					
	Our walk it and it is a state of the search and it is a state of the search at the sea	(Sect	ion 5	U1(C)					
10	Allottie Swedsite								
19	become in deflection (and it so how) the organization	erect -	olle	0					
20	financial statements available to the public during the tax year.	siest p	olicy,	and					
20	State the name, address, and telephone number of the person who	cords							
	BANGING BALLOIN, 522 ROSEBALE AVE, NASHULLE TH 37211 615. 482. 2433								

Form	gan	(2018)
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Dort VIII	Commonwell	Page I
Lait All	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Em	ployees and
	Independent Contractors	projecto, arre

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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.

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

(A) Name and Title	(B) Average hours per week (list any	(do n box, i	ot ch unles	Pos eck s pe	ition more rson irecte	than o is both or/trust	ne an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) BANNING BOULDIN ARTISTIC DIRECTOR	40	X			,			27 500	-	-
ADMINISTABINE DIRECTED	40	X						27 500	-	~
(3) MICHAEL HARTLEY TREASURER	1	X						0		
(4) HEATHER HEROD COLE	\	×						0		
(5) BETH ZEITLIN	1	¥						٥		
(6) ERIN ASA DIRECTOR	(×						0		
17) HUNTER ARMISTERS	Q	×						0		
(8) GRACE FRENCH DIRECTOR	0	×						0		
DIRECTOR	0	X						0		9
B) ATKLEY MUSHAMBA	0	×						0		
(11) AYNORA LAFAYETTE DIRECTOR	0	X			-			0		
DIRECTOR	0	×						0		
(13) JULIE STADLER DIRECTOR	0	×						0		
114) ANDREW KRICHELS DIRECTOR	Q	×						0		

	(A) Name and title	(B) Average hours per week (list any	box, u	ot che inless r and	a di	tion more rson rect	than o	an ee)	(D) Reportable compensation from	(E) Reportable compensation fror related		(F) Estimate amount o	
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	0	ompensation the from the organization and related organization	e ion ed
5)							4						
6)											+-		
7)													
8)		ļ											
9)													
20)													
21)											-		
22)								-			-		
23)													
24)								-					
25)													
1b c d	Sub-total	t VII, Section	on A					A A A	55 000				
2	Total number of individuals (including bureportable compensation from the organ	it not limite	d to t	hose	e lis	ted	abov	e) v	vho received m	nore than \$100,	000 of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	officer, dire	ctor,	or t	rust	tee,	key lual	em;	ployee, or hig	hest compens	ated	3	es N
4	For any individual listed on line 1a, is the organization and related organizations individual	e sum of re	porta	ble	cor	mpe	nsati	on a	and other com	pensation from hedule J for s	the	4	>
5	Did any person listed on line 1a receive for services rendered to the organization	or accrue on? If "Yes."	compe	ensa elete	tion	fro hea	 om an lule J	y ui	nrelated organ	ization or indivi	dual	5	
Section	on B. Independent Contractors						4.00		caon percen	· · · · ·	·	3	
1	Complete this table for your five highest compensation from the organization. Reyear.	compensa port comp	ted in ensati	idep ion f	end or t	den the	calend	rac dar	tors that receiv year ending w	red more than sith or within the	100,00 organi	00 of ization	s tax
	(A) Name and business ac	ldress							(B) Description of	services	Con	(C)	on
	NONE												
2	Total number of independent contract	tore (includ	ina h			lles							

Part V	/III	Statement of Revenue					Pag
			ononee eu este t	P 1 11 1			
		Check if Schedule O contains a re-	sponse or note to	any line in this (A) Total revenue	Part VIII (B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
ilar Amounts	1a	Federated campaigns 1a			TOVOITUS		512–514
0	b	Membership dues 1b					
A B	C	Fundraising events 1c					
<u>a</u>	d	Related organizations 1d					REAL PROPERTY.
<u>E</u>	e	Government grants (contributions) 1e	42 200				
and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above	52 807				
9	g	Noncash contributions included in lines 1a-1f: \$					
a	h	Total. Add lines 1a-1f		95 007			
ne			Business Code				
Program Service Revenue	2a	COMMISSIONS		30 225			
8	b	CLASSES		79 554			
N K	C	PRODUCTION ONING MEACH		8 974			
Se	d						
E	е			100			
go	f	All other program service revenue.					
-	9	Total. Add lines 2a-2f		118 753			
	3	Investment income (including divi- and other similar amounts)	dends, interest,				
	4	Income from investment of tax-exempt					
	5	Royalties					
		(i) Real	(ii) Personal				
	6a	Gross rents		The same of the sa			
	b	Less: rental expenses					
	C	Rental income or (loss)					
	d	Net rental income or (loss)		-			
	7a	Gross amount from sales of assets other than inventory	(ii) Other	The second second			STATE OF THE PARTY
	b	Less: cost or other basis and sales expenses .					
	C	Gain or (loss)	+				
1	d						SERVICE OF STREET
e l							
Ven	oa	Gross income from fundraising events (not including \$					
Other Revenue		of contributions reported on line 1c).		Carlotte Control			Total Control
<u>ş</u>	L	See Part IV, line 18		100000000000000000000000000000000000000			
0			b		1		
	02	Net income or (loss) from fundraising	g events . ▶	-			
	Ja	Gross income from gaming activities. See Part IV, line 19					计型设置性
	h						
	5	Less: direct expenses Net income or (loss) from gaming ac	b				
1	10a	Gross sales of inventory, less returns and allowances				STATE OF STATE OF	
	b	Less: cost of goods sold	b				
	С	Net income or (loss) from sales of in	ventory >	~			
-		Miscellaneous Revenue	Business Code	E PERMIS	TOTAL STATE OF THE		
	11a						
	b						
	C						

213 760

e Total. Add lines 11a–11d Total revenue. See instructions

12

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). Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, 7b. (A) (B)

3b, 9b,	and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		охроносс	general expenses	expenses
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				The second second
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	55 Om	27 500	27 500	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages				
9 10 11	Other employee benefits				
a b	Management	1 381		1 381	
d e	Accounting				
f g	Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 13	Advertising and promotion	5 P33	-	5 033	
14 15 16	Information technology				
17 18	Travel				
19 20	Conferences, conventions, and meetings . Interest				
21 22 23	Payments to affiliates				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a b	PERFORMANCE EXPENSES	111 961 31 258	31 258		
d					
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	7 AU / 12	170.714	22 4	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	204 633	170 719	33 914	-
					Form 990 (2019