	tment of the al Revenue For the heck if a ddress of ame cha	applicable: change ange rn	Under section 50 The organization endar year, or tax year b C Name of organization Doing Business As Number and street (or P.O. 1900 Belmont Blvd.	1(c), 527, or 494 benef may have to use beginning Arts and Busin box if mail is not de	zation Exempt 47(a)(1) of the Internal it trust or private found a copy of this return to se 7/1/2012 mess Council of Greater elivered to street address)	Revenue Co dation) satisfy state re , and e	de (excep eporting re- nding Inc. D 2 E	t black lung quirements. 6/30)/2013 identifi	ication number	2 olic
H	erminate		City, town or post office, sta	ate, and ZIP code							
	mended		Nashville		TN	37212		Gross rece	-		67,640
	pplicatio	n pending	F Name and address of princ	S.				a group retu			
		1	Connie Valentine 1900					Il affiliates inc		Yes	No
		ot status:	X 501(c)(3) 501(c)	()◀	(insert no.) 4947(a)(1)) or 527		o," attach a lis	t. (see i	instructions)	
JN	ebsite	: • www	w.abcnashville.org				H(c) Grou	exemption n	umber	•	
KF	orm of or	ganization:	X Corporation Tr	ust Associatio	on Other ►	LY	ar of formatic	n: 2005	MS	State of legal domicile:	TN
Pa	art I	Su	mmary	11 I				1			
Activities & Governance	2 3 4 5 6 7a	benefici Check ti Number Number Total nu Total nu	thriving, sustainable created all partnerships between his box ► if the orgot of voting members of the of independent voting member of individuals emperated business revenue related business revenue.	arts and busin ganization disco ne governing bo nembers of the loyed in calend mate if necessa	ess, (cont.on Schedule ontinued its operations ody (Part VI, line 1a) governing body (Part lar year 2012 (Part V) ary).	e O) or disposed VI, line 1b) . ine 2a)		· · · ·	of its r 3 4 5 6 7a	net assets.	32 32 4 275 0
	b		elated business taxable						7b		0
		×		The second s							
							F	Prior Year		Current Year	
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A Net Assets or Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 rt II	Program Investm Other rev Total rev Grants a Benefits Salaries Profess Total fun Other e Total ex Revenue Total as Total ias Net ass	n service revenue (Part VIII, co ent income (Part VIII, co evenue (Part VIII, column enue—add lines 8 through and similar amounts paid paid to or for members other compensation, emp ional fundraising fees (Part xpenses (Part IX, column penses. Add lines 13–11 e less expenses (Part sets (Part X, line 16) bilities (Part X, line 16) bilities (Part X, line 26). ets or fund balances Su gnature Block	VIII, line 2g) . blumn (A), lines h (A), lines 5, 6 h (1) (must equal d (Part IX, colum lovee benefits (cart IX, column t IX, column	3, 4, and 7d)	e)	Beginnin	226 669 900 205 727 932 -32 -32 932 -32 -32 -32 -32 -32 -32 -32 -32 -32 -	0,499 5,038 0,546 5,566 7,093 2,659 2,113 Year 3,889 0 3,889	2 2 1 1 2 5 1 2 5 5 6 7 6 7 6 8 7 6 7 6 7 6 7 6 7 6 7 7 7 7	42,245 15,953 6 9,436 67,640 0 58,574 0 58,574 0 06,868 65,442 2,198 80,451 50,000
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For Paperwork Reduction Act Notice, see the separate instructions.

	0 (2012) Arts and Business Council of Greater Nashville, Inc.	20-3255129	Page 2
Par	t III Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission: Arts and Business Council of Greater Nashville leverages and unites the unique resources of		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	· · · Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	· · Yes	X No
4	Describe the organization's program service accomplishments for each of its three largest program services expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allo the total expenses, and revenue, if any, for each program service reported.		
4a	Serving & Educating the Creative Community: ABC provides direct services, key opportunities and		
4b	Creating Arts & Business Partnerships: ABC creates mutually beneficial partnerships between arts	e\$6	3 <mark>,291</mark>)
	husiness community in the area in addition through Community Initiatives APC		
4c	(Code:) (Expenses 5 53,792 including grants of \$) (Revenue Engaging Busines with the Ans ABC inspires workplace creativity in businesses to demonstrate the impact of the arts through tangible benefits and develop life-long arts participants and supporters. WorkCreative In-office art projects bring music, visual and performing arts into the workplace and integrate employees in hands-on creativity to stimulate communication, build teamwork, and spark innovation for effective business growth.		
4d	Other program services. (Describe in Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	
4e	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ Total program service expenses • 190,818		. adas

Part	990 (2012) Arts and Business Council of Greater Nashville, Inc. 20-32551 IV Checklist of Required Schedules 20-32551	29	Р	age 3
anu			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	-
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> .	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			v
7	"Yes," complete Schedule D, Part I	6		X
	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, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a		x
b	Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		x
c	Did the organization report an amount for investments program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		x
d	Did the organization report an amount for other assets 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.	11d		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	11	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate		1.1	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV .	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV.	16		>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i> .	17		>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		,
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	19)
20	a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.	20	a)
20	b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20	C	

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the second s		20-3255129) P	age 4
Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		-	-
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J.			v
240		23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	241)	<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	240		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240	1	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a	1	X
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.	251		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or			-
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II			x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		<u> </u>
21				
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
~~	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	100		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28)	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			1
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	280	:	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M.	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,		-	1
51		31		x
22	Part I	31	-	
32				
	If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V line 1		_	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35	a	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	b	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
00	organization? If "Yes," complete Schedule R, Part V, line 2.	36		X
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
37				
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37	-	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
-	19? Note. All Form 990 filers are required to complete Schedule O.	38	X	

Form 990 (2012)

Form 99	Arts and Business Council of Greater Nashville, Inc. 20-325	5129	Р	age 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1111		-
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			a l'adabie
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			And Control of Street
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4			a theat
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		2.00.C.W.D.	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	-	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," 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 authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
-	account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			V
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	0-		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	-	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ch		
-	gifts were not tax deductible?	6b	-	
7	Organizations that may receive deductible contributions under section 170(c).	and a	Sugar and	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	70	v	
	and services provided to the payor?	7a 7b	X	-
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	10	<u> </u>	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		X
	required to file Form 8282?	7c		
d		70		X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f	-	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		-	<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h		+
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?. Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	/11		
8	organizations. Did the supporting organization, or a donor advised funds and section sos(a)(s) supporting			
	organization, have excess business holdings at any time during the year?	8		X
•	Sponsoring organizations maintaining donor advised funds.	0		
9	Did the organization make any taxable distributions under section 4966?	9a		X
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
122.000		30		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12			
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
b		-	1.500	
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a		-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).	M aga		
120		12a		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	IZd		
b		- 100-	1.5	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	158		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	14-		X
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	_	+^
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	140		

Form 9	90 (2012) Arts and Business Council of Greater Nashville, Inc. 20-32	55129	P	age 6
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for		'	
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee inst	tructio	
	Check if Schedule O contains a response to any question in this Part VI		• •	X
Sect	ion A. Governing Body and Management			
10	Enter the number of veting members of the governing hedy at the and of the tax year		Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year 1a 32 If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 32	2		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	2	X
3	Did the organization delegate control over management duties customarily performed by or under the direct		1	
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	-	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
а	the year by the following: The governing body?	8a	X	
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	00	-	<u> </u>
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	9		X
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code.)	1
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	1	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a		-
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	-
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
40	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	-
14	Did the organization have a written document retention and destruction policy?	14	X	Carlos and
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?	91.23		
a	The organization's CEO, Executive Director, or top management official.	150	v	
b	Other officers or key employees of the organization	15a 15b	-	+
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	150		
16a	Did the organization lovest in, contribute assets to, or participate in a joint venture or similar arrangement		No.	
iou	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	100		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard			- diam
	the organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			-
17	List the states with which a copy of this Form 990 is required to be filed TN		-	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(B)s onl	y)	
	available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website Upon request Other (explain in Schedule O,			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest			
	policy, and financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	074		
	organization: Casey Summar (615) 460-8	2/4		
-	1900 Belmont Blvd., Nashville, TN 37212			

Form 990 (2012)	Arts and Business Council of Great	ter Nashville, Inc						1		20-325512	29 Page 7
Part VII	Compensation of Officers, Dire	ctors, Trustee	es, K	ey	Em	plo	yees	s, H	lighest Comp	ensated	
	Check if Schedule O contains a re	esponse to any	y que	estic	on i	n th	nis Pa	art \	∕II		🛛 🗙
Section A.	Officers, Directors, Trustees, Key El	mployees, and I	Highe	est (Con	npe	nsate	d E	mployees	a the set of	
Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors Check if Schedule O contains a response to any question in this Part VII X 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 current highest compensated employees (other than an officer, director, trustee, or key employee) who received regaralizations 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 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 pformer director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List all of the organization from the organization compensater any current officer, director, or trustee. (0)											
organization's	s tax year.		20								
 List all 	of the organization's current officers, di	rectors, trustees	(whe	the	inc	livid	uals	or o	rganizations), reg	gardless of amou	int
of compensat	tion. Enter -0- in columns (D), (E), and (I	F) if no compens	ation	was	s pa	aid.					
											/ee)
		m VV-2 and/or Bo	ox / c	of FC	orm	109	9-MI	SC)	of more than \$10	00,000 from the	
			d big	hoo	+ ~~	mn	neat	ad a	mployeee where	accived more the	n
\$100 000 of r	reportable compensation from the organ	ization and any i	relate	d or	an	nizat	ions	eue	inployees who h	cerved more ma	21.1
								tity a	a former direc	tor or trustee of t	he
											iic .
	The second second of the second s		-					All states			
										,g	
		v related organiz	ation	con	npe	nsa	ted a	nv o	urrent officer, dir	ector. or trustee.	
							-	.,			
		1.1.1									
					neck	more					
	Name and Title										
		week (list any		The second second	-	-	0 I		from	from related	other
			dire	stitut	fice	y er	Ines	rme			
			ctor	Iona		oldu	00	_	(W-2/1099-MISC)		organization
			rust	l tru		vee	npe				organizations
			ee e	stee		- 1	nsat			· · · · · · · · · · · · · · · · · · ·	
				-	-		ed				
(1) Amy A	tkinson	3.00							1		
				1	Sau				0	0	C
(2) Rob B	arrick		1. C			125					
Contraction of the second second			-	-	-	-			0	0	the second second
	Beaman										
		- Contraction -		-	-			-	0	0	
	el Bressman										
	- On internation			-	-	-		-	0	0	
	a Cruicksnanks									0	
	Cush			+	+	+		-	0	0	
	Juib			1						0	
	bert Eisber			-	-	+	-		0	0	
	ibert Fisher								0	0	
	riet	the second s		-	-	-			0	0	
	nist .		-						0	0	
	awkins			+	+						
Director		0.00	-						0	0	
(10) Kate H	Herman	3.00			\mathbf{T}		-	+			
Director		0.00	- 1					1.	0	0	
(11) Bob H	liggins	3.00									
Director		0.00	- 1						0	0	
(12) Ed La	nguist	3.00									
Director		0.00							0	0	
(13) Sandr	a Lipman	3.00							1.		
Director		0.00							0	0	<u> </u>
(14) Mike M	Vilom	3.00		1						- Charles	
Director		0.00	X						0	0	

Arts and Business Council of Greater Nashville, Inc.

20-3255129

	90 (2012) Arts and Business Council of C				_			_		20-325	
Pa	rt VII Section A. Officers, Directors, Tru	stees, Key Em	ploye	es,	and	d Hi	ghes	t Co	ompensated Em	ployees (continu	ued)
	(A) Name and title	(B) Average hours per	box,	unles	Pos neck ss pe	erson	e than c is both or/trust	an ee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(15)	David Minnigan	3.00									
Direc		0.00							0	0	L.
(16)	Bill Nigh	3.00									
Direc		0.00							0	0	
(17)	Cindy Oliva	3.00				1					
Direc		0.00		-					0	0	
	Tim Ozgener	3.00									
Direc		0.00							0	0	
	Laurence M Papel	3.00					1.50				
Direc		0.00			-				0	0	
	Paul Polycarpou	3.00				1					
Direc		0.00			-	-			0	0	1
	Joseph "Pepe" Presley	3.00	1								
Direc		0.00						-	0	0	
	Dawn Rudolph	3.00								0	
Direc		3.00		-	-	-			0	0	
Direc	Carolyn Schott	0.00		11	1						
	Howard Stringer	3.00		-		-	-	-	0	0	
Direc		0.00	1 3000000						0	0	
	James Threalkill	3.00		1					0	0	
Direc		0.00	S		133				0	0	
1b	Sub-total		-		-				0		C
c	Total from continuation sheets to Part VILS	ection A		11					57,095		0
d	Total (add lines 1b and 1c).								57,095		0
2	Total number of individuals (including but not in reportable compensation from the organization	And the second s	sted a	abov	/e) \ 0	who	recei	iveo			
	reportable compensation norm the organization				0	1					Yes No
3	Did the organization list any former officer, dir employee on line 1a? If "Yes," complete Scher		-				-		t compensated		3 X
4	For any individual listed on line 1a, is the sum the organization and related organizations gre individual.	and the second							and the second		4 X
5	Did any person listed on line 1a receive or acc for services rendered to the organization? If ">										5 X
Sec	tion B. Independent Contractors	,p.o.o o.									
1	Complete this table for your five highest comp compensation from the organization. Report co year.										tax
	(A) Name and business add	dress							(B) Description of se	rvices ((C) Compensation
_			1								(
_	the second s	States -	2								(
			134		. 6.						(
			-	8							(
								1			0

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization
 0

rt V		Statement of Revenue	121 ×15 (1210)				
		Check if Schedule O contains a response to a	any question in this	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded fror tax under secti 512, 513, or 5
s .		Federated campaigns		and the standard of the second	AND	Minden of Astrony States	
and Other Similar Amounts		Membership dues					
Am		Fundraising events			A DESCRIPTION OF THE OWNER OF THE		
Ilar		Related organizations			A		
SIM		Government grants (contributions) 1e	6,800				
her	f	All other contributions, gifts, grants, and similar amounts not included above 1f	221 045				
ō	g	Noncash contributions included in lines 1a-1f: \$	231,045				
an	•	Total. Add lines 1a–1f		242,245			
			Business Code	10.2910.000		and the second second second	
	2a	Arts Immersion	900099	10,395	10,395		
		Education/Seminars	900099	5,558	5,558		
	с			0			a
	d			0			
	е			0			
	f	All other program service revenue		0			
	g	Total. Add lines 2a–2f		15,953			The second second
3	3	Investment income (including dividends, interest					
t,		other similar amounts)		6			
	4	Income from investment of tax-exempt bond pro	ceeds	0		1. S.	
1	5	Royalties	(if) Personal	0			
	6a	Gross rents			E HIS HERALDER		State of the second second
	b	Less: rental expenses		All and the state of the state			
	c	Rental income or (loss)	0	Tole Transmission of the	the second second second		
	d	Net rental income or (loss)		0			
ñ. *	7a	Gross amount from sales of (i) Securities	(ii) Other	The second second		in the patho	
		assets other than inventory	0				
	b	Less: cost or other basis					
		and sales expenses	0				
	С	Gain or (loss)	0				
	d	Net gain or (loss)		0			
			0			All the second second	
	8a	Gross income from fundraising					
		events (not including \$ 0					a log of the party
		of contributions reported on line 1c) See Part IV, line 18	0				STATISTICS STATISTICS
	h	See Part IV, line 18				dina and been the	
	0	Net income or (loss) from fundraising events		0		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
	9a			Second Statements	States and the states of	Parallel States	- In the length of the
		See Part IV, line 19	0				
	b	Less: direct expenses				States of the second	
	c	Net income or (loss) from gaming activities		0			
1	l0a	Gross sales of inventory, less					
		returns and allowances					
	b	Less: cost of goods sold b		and the second second	Contraction of the second		
	С	Net income or (loss) from sales of inventory		0			
		Miscellaneous Revenue	Business Code				te a stat the same
1	11a	Miscellaneous revenue	900099	9,436	9,436		
	b			0			-
	C			0			
	d	All other revenue	L	0 426			
1	е	Total. Add lines 11a-11d	🟲	9,436			

Form 990 (2012)

Form 990 (2012) Part IX

following SOP 98-2 (ASC 958-720)

Arts and Business Council of Greater Nashville, Inc. Statement of Functional Expenses

sectio	on 501(c)(3) and 501(c)(4) organizations must complete all concerning the content of the content				
Doi	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and			And States and Andrews and Andrews and	
	organizations in the United States. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the			The R. Brancaster and a second	
-	United States. See Part IV, line 22	0			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the			The second second and	
-	United States. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	142,683	99,878	28,537	14,26
6	Compensation not included above, to disqualified			Sal	
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	9,635	6,744	1,927	96
0	Payroll taxes	6,256	4,379	1,251	62
1	Fees for services (non-employees):				
а	Management.	0			AT I
b	Legal	0	and the second s	1	
С	Accounting	7,700		7,700	
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0		Service and the service of the servi	
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	1,033		207	10
12	Advertising and promotion	7,718	5,402	1,544	77
13	Office expenses	10,624	7,437	2,125	1,06
14	Information technology	0			
15	Royalties	0			
16	Occupancy	37,200	26,040	7,440	3,72
17	Travel	1,717	1,202	343	17
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials .	0			
19	Conferences, conventions, and meetings				
20		846	592	169	8
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	
23	Insurance	1,423	996	285	14
24	Other expenses. Itemize expenses not covered	11.20			
	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.)		ter inditidade autobio	Strength Hill Hand Strength And Strength	
2	Memberships and dues	1,537	1,076	307	15
a b	Bank fees	1,836			18
-		8,262	the second se		10
C	Event costs	the second se			
d	Education, seminar and program costs	26,404			
e	All other expenses Miscellaneous	568			
25	Total functional expenses. Add lines 1 through 24e	265,442	190,818	52,315	22,30
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs	a in Serie			
	from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)		1		

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	28,889	1	62,288
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	0	3	18,163
	4	Accounts receivable, net	0	4	(
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.	0	F	
	~	Complete Part II of Schedule L		5	
	6	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and		- Helle	
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary	And the second second second		
2		organizations (see instructions). Complete Part II of Schedule L.		6	
	7	Notes and loans receivable, net	0	7	(
2	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or	AVA.		
		other basis. Complete Part VI of Schedule D 10a	all the set the second be well		
	b	Less: accumulated depreciation 10b	0	10c	(
	11	Investments—publicly traded securities	0	11	
	12	Investments-other securities. See Part IV, line 11	0	12	
	13	Investments-program-related. See Part IV, line 11	0	13	
	14	Intangible assets	0	14	1 Mil 84 1
	15	Other assets. See Part IV, line 11	0	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34).	28,889	16	80,45
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Ë	22	Loans and other payables to current and former officers, directors,	Statement of the second second		Paralleline Transmitter
	1.1	trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
LIADIIITIES	22	Secured mortgages and notes payable to unrelated third parties	0		
	23 24	Unsecured notes and loans payable to unrelated third parties	0		50,00
	25	Other liabilities (including federal income tax, payables to related third	0		00,00
		parties, and other liabilities not included on lines 17-24). Complete			
		Part X of Schedule D.	0	25	
	26	Total liabilities. Add lines 17 through 25.	0	1	50,00
		Organizations that follow SFAS 117 (ASC 958), check here X and			
es		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	28,889	27	30,45
Sali	28	Temporarily restricted net assets	20,000	28	00,40
0	29	Permanently restricted net assets		29	14
i.					
2					
Net Assets or Fund Balances	20	complete lines 30 through 34.		20	
sse	30	Capital stock or trust principal, or current funds		30	
Y	31	Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds		31	
Ne	32	Total net assets or fund balances	28,889		30,45
	34	Total liabilities and net assets/fund balances	28,889		80,45
_			20,009		Form 990 (2012

Form 990 (2012)

the same same same	990 (2012) Arts and Business Council of Greater Nashville, Inc.	20-325	55129	Page 12
Part				
	Check if Schedule O contains a response to any question in this Part XI			. X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		267,640
2	Total expenses (must equal Part IX, column (A), line 25)	2		265,442
3	Revenue less expenses. Subtract line 2 from line 1	3		2,198
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	28,889
5 6	Net unrealized gains (losses) on investments	5		
7		7	T X	
8	Prior period adjustments	8	1	
9	Other changes in net assets or fund balances (explain in Schedule O).	9		-636
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33.	10	1.00	30,451
Part				
21.34	Check if Schedule O contains a response to any question in this Part XII			. X
-			-	Yes No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		C LAND NO.	
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			Contract of the second
	reviewed on a separate basis, consolidated basis, or both:			
	Separate basis X Consolidated basis Both consolidated and separate basis			Carlo Carlo
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both:		and the second	
	Separate basis Consolidated basis Both consolidated and separate basis			and the second
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			N.
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .	· · · .	2c	X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule Q.		1 apres	Sale rest
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
Ju	the Single Audit Act and OMB Circular A-133?		3a	x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
		d Physics	Form	990 (2012)

Continuation Sheet for Form 990

Page 1 of 1

Name of the Organization Arts and Business Council of Greater Nashville, Inc.							Employer identification number 20-3255129				
Part VII Section A Continuation of O		rs. 1	Trus	stee	es.				Highest	1.1	
Compensated Em		,			,	,					
(A)	(B)	(C)						(D)	(E)	(F)	
Name and title	Average	Position (check all that apply)					ply)	Reportable	Reportable	Estimated	
	hours per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
26) Ted Welch	3.00					1				1.1	
Director	0.00	X						0	0		
(27) Alan Yuspeh	3.00					100					
Director	0.00					5		0	0	and the state	
(28) Janice Zeitlin	3.00				1						
Director	0.00							0	0		
(29) Martha R Ingram	3.00										
Honorary and Founding Chairman	0.00							0	0		
(30) Thor Urness	3.00				1						
Chairman	0.00			1		1		0	0		
(31) Shirley Zeitlin	3.00						111				
Immediate Past Chairman	0.00					17		0	0	4 T E	
(32) Bo Spessard	3.00										
Treasurer	0.00			X				0	0		
(33) Casey Summar	3.00	_									
Executive Director	0.00	100		X				57,095	0		
(34)											
(35)											
(36)		-									
(37)		-	\uparrow						210		
(38)		-									
(39)	•	-									
(40)		-					à				
(41)		-									
(42)		-								2	
(43)		-									
(44)		-									
(45)		-									
(46)		-					1		1.1		

SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 o	or 990-EZ	OMB No. 1545-0047		
Department of the Treasury Internal Revenue Service	Complete to provide information for responses to specific ques Form 990 or 990-EZ or to provide any additional informati Attach to Form 990 or 990-EZ.	on.	Open to Public Inspection		
Name of the organization Arts and Business Coun	cil of Greater Nashville, Inc.	Employer iden 20-3255129	tification number		
	The organization changed its accounting method to accrual basis in				
	o be reported in the same manner as the year-end financial				
statements.					
Form 990 Part I Line 1 C	continuation: provides direct services, opportunities and education to		<u></u>		
the creative community,	and inspires workplace creativity in businesses.				
Form 990 Part III Line 1	Continuation: and create civil society.	<u> </u>			
Form 990 Part VI Sectio	n B Line 11 The Form 990 is first reviewed by staff, then by the				
financial committee. The	final draft of the Form 990 is circulated to the entire board for				
input.					
Form 990 Part VI Sectio	n B Line 12c The Board and staff leadership monitor all transactions to	>			
ensure compliance with	the conflict of interest policy. In addition, all ABC board members are				
given a copy of the polic	ey and required to sign an annual acknowledgement stating: "I,				
, do ackno	wledge that I received a copy of the conflict of interest policy of the				
Arts and Business Coun	cil of Greater Nashville ("Policy"). Thave read and understand the				
policy, and do agree to o	comply with the policy. I understand the Arts and Business Council of		· :		
Greater Nashville is a ch	naritable organization, and in order to maintain its federal tax				
exemption, the Arts and	Business Council of Greater Nashville must engage primarily in		<mark>-</mark>		
activities that accomplis	h one or more of its tax-exempt purposes."				
Form 990 Part VI Sectio	n B Line 15 Compensation is set by the ABC board after considering a	all			
aspects of the job descr	ption, the indivduals' performance and independent research on the				
salaries of similiar positi	ons at comparable organizations (drawn from publicly available				
information on Form 990	Os and other documents). In order to assure that compensation remain	IS			
reasonable after it has b	peen set, the ABC board engages in periodic reviews of updated				
information. Salary reim	bursement: The Arts and Business Council reimburses a related				
organization for personr	nel costs (wages, payroll taxes and benefits) including officer				
compensation. While ABC does not issue W-2's, the Form 990 reflects the actual expense paid to					

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2012) Name of the organization	Page 2 Employer identification number
Arts and Business Council of Greater Nashville, Inc.	20-3255129
reimburse the related organization for its employees. From July 2012 - December 2012, ABC	
processed payroll through the local Chamber of Commerce and were reimbursed for all associat	ed
costs. In January 2013, ABC entered into an agreement with Belmont University under which the	9
organization only reimburses wages and not payroll taxes and benefits.	
Form 990 Part VII Line 2c Arts and Business Council of Greater Nashville, Inc. has not changed	
its oversight process or selection process during the tax year.	
Form 990 Part XI Line 9 This adjustment is attributed to the transistion from cash to accrua	
basis accounting method.	
Form 990 Part XII Line 2a Quarterly compilations are prepared by a volunteer who is a CPA	