SCANNED DEC 0 7 2009

Form **990**

Return of Organization Exempt From Income Tax

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

20**08**

Department of the Treasury Internal Revenue Service

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

Open to Public

Inter			nave to use a copy of the					on on			
<u>A</u>	For th	e 2008 calendar year, or tax year be			and ending		ne 30	, 20 09 er identification number			
		LISA IRS	Nashville State Com					4			
		change label or Dolling Business As 1	Nashville State Comm			on	62 E Telephoi	1567873			
	Name c	nange type	O box if mail is not delivered to	street address)	Room/suite						
	nitial re	See 120 White Bridge			<u> </u>		(615)	353-3743			
	Termina	tion Instruc- City or town, state or	• •								
	Amende	d return tions. Nashville, TN 372					G Gross rec				
	Application	n pending F Name and address of princip	oal officer Edward An	drews		H(a) Is this	a group return t	for affiliates? Yes Vo			
		120 White Bridge Road,				H(b) Are	all affiliates in	cluded? Ves No			
1	Tax-ex	empt status	4947(a)(1) or	527		If "N	f "No," attach a list (see instructions)				
_		te: ► http://www.nashvillestatefo				H(c) Group	exemption num	ber >			
<u>K</u>	Type of	organization 🗹 Corporation 🔲 Trust 🔲 Associa	ation ☐ Other ►	L Yea	r of formation	1994	M State of	legal domicile TN			
Pa	art I	Summary									
	1	Briefly describe the organization's	mission or most signif	icant activitie	s: The NS	CC Found	dation ope	erates for the			
_		support and benefit of Nashville	State Community Co	llege. It work	s to expan	d access	to higher	education and			
20		further regional workforce and ed	conomic developmen	it by raising f	unds to pr	ovide stu	dent scho	larships, enhance			
rna		college programs, advocate the	welfare of the college	, and engage	in activitie	s to ben	efit the co	llege.			
Governance	2	Check this box ▶ ☐ if the organization	discontinued its operation	s or disposed of	more than 2	5% of its a	ssets				
Ğ	1	Number of voting members of the				_	3	24			
Š	1	Number of independent voting mei	• • • •	· · · · · · · · · · · · · · · · · · ·	VI. line 1b)	-	4	24			
Activities &		Total number of employees (Part V	_	g 202, (, 2,, t	• • • • • • • • • • • • • • • • • • • •		5	0			
Ć		Total number of volunteers (estima		CEN VEE		•	6	40			
•	72	Total gross unrelated business reve	enue from Part-VIII lin	SPINED.	(C)		7a	0			
	b	Net unrelated business taxable inco	ome from Form 990-T	, line 34	701		7b	0			
-			VON 12	I 8 2009	18	Prior Ye	ear	Current Year			
	8	Contributions and grants (Part VIII,	1 1	4 0 2009	RS-OS	15	5,110 92	113,432.31			
ĭe	1	Program service revenue (Part VIII,	· ·	<u> </u>							
Revenue	40	Investment income (Part VIII, colun		馬N. UT		20	5,831.10	(4,000.86)			
æ	10	Other revenue (Part VIII, column (A	III (A), IIIIes-s, -4,-anu. Nunce 5 6d 8c 9c -	10c and 11a	⇒ ⊢		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(58,104.36)			
		Total revenue—add lines 8 through 1	181,942.02		51,327 09						
		- · · ·					5,277.74	96,376.71			
	1	Grants and similar amounts paid (F					,				
S		Benefits paid to or for members (P			F 10)						
Expenses	Į.	Salaries, other compensation, employ			5-10)		7,500.00				
ğ		Professional fundraising fees (Part I)	, ,	1.82	3 77	'	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
ш		Total fundraising expenses (Part IX, o			*.:.' 		8,185.96	10,102.91			
	1	Other expenses (Part IX, column (A			05)		1,963.70	106,479 62			
		Total expenses. Add lines 13–17 (r		lumn (A), line	25).		9.978.32	(55,152 53)			
o o c		Revenue less expenses. Subtract line	10 HOITI III 12	· · · · · · · · · · · · · · · · · · ·		Beginning		End of Year			
ance							7,858.64	668,576.39			
Assets d Baland	20	Total assets (Part X, line 16)					5,086.52	956.80			
Net A	21	Total liabilities (Part X, line 26)			•		2,772.12	667,619.59			
		Net assets or fund balances. Subti	act line 21 from line 2			12.	2,112.12	007,015.35			
	art II	Signature Block Under pepalties of perjury, I declare that I h	and a superior of the anteres on		www.aabadula	e and states	nonte and to	the best of my knowledge			
		and belief, it is true, correct, and complete	Declaration of preparer (of	ther than officer)	s based on all	information	of which pre	parer has any knowledge			
		The Day	In			1	11/12/	$^{\circ}$			
Siç		The second secon	MUI)				MICH	<u> </u>			
He	re	Signatule of officer	00000	tools.		Dat	ie '				
		Laurierino	U I FICCOL	ritain							
		Type or print name and title		15	Chec	ok of	I Barrer				
		Preparer's		Date	self-		(see instruction	lentifying number ions)			
Paid	i	signature			empl	oyed ▶ 📖	[•			
	parer's						<u> </u>				
	Only	Firm's name (or yours if self-employed),				EIN	<u> </u>				
		address, and ZIP + 4	 _			Phone r	no > (
14-		IDS discuss this return with the pri	naror chown above?	(coo instruction	nne)			Yes No			

Form **990** (2008)

Pa	t III Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission: The NSCC Foundation operates for the support and benefit of Nashville State Community College. It works to expand access to higher education and further regional workforce and economic development by raising funds to provide student scholarships, enhance college programs, advocate the welfare of the college, and engage in activities to benefit the college.
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 V No If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code) (Expenses \$ 81,976.75 including grants of \$ 81,976.75) (Revenue \$) 74 scholarships were awarded to students of Nashville State Community College
4b	(Code) (Expenses \$ 8,696.09 including grants of \$ 8,696.09) (Revenue \$) Funds allocated to promote the College at meetings/events and through donor cultivation
40	(Code.) (Expenses \$ 5,703.87 including grants of \$ 5,703.87) (Revenue \$)
70	Funds used to support various departments of the College, membership dues, and communications
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
40	Total program conting expenses > \$ 96.376.74 (Must equal Part IX Line 25. column (R))

Pai	t IV Checklist of Required Schedules			
			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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	✓	
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</i> "Yes," <i>complete Schedule C, Part I</i>	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		✓
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓_
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	✓	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11		✓
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	_	√
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		✓
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, Part III	16		1
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		✓
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	✓	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		√
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		✓
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	√	1
22	Did the organization report more than \$5,000 on Part IX, column (A), line 29 If "Yes," complete Schedule I, Parts I and III			✓
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		✓
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 questions	24a		./
L	24b-24d and complete Schedule K. If "No," go to question 25.	24b		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			<u> </u>
Ü	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		✓
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
	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		✓
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		1

	t IV Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		√
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV.	28b		1
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	✓_	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		√

Form **990** (2008)

Pai	Statements Regarding Other IRS Filings and Tax Compliance						
			Yes	No			
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of						
	U.S. Information Returns. Enter -0- if not applicable <u>1a -0-</u>						
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b -0-						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1c					
	gaming (gambling) winnings to prize winners?						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax						
	Statements, filed for the calendar year ending with or within the year covered by this return 2a -0-						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)						
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		✓			
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	4a		1			
_	account)?	44		V			
b	If "Yes," enter the name of the foreign country. ▶						
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts						
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓			
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity						
•	Regarding Prohibited Tax Shelter Transaction?	5c					
6a	Did the organization solicit any contributions that were not tax deductible?	6a		✓			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).						
-	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than		,				
	\$75?	7a		✓			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1			
d	If "Yes," indicate the number of Forms 8282 filed during the year						
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1			
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g					
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as						
	required?	<u>7h</u>					
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section						
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring	8		1			
_	organization, have excess business holdings at any time during the year?	-					
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	9a		1			
a b	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1			
10	Section 501(c)(7) organizations. Enter						
а	Initiation fees and capital contributions included on Part VIII, line 12	J					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities]					
11	Section 501(c)(12) organizations. Enter						
а	Gross income from members or shareholders	-		ĺ			
b	Gross income from other sources (Do not net amounts due or paid to other sources against						
	amounts due or received from them.)	10-					
	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. 12b	12a		L			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, processes, or changes in Schedule O See instructions.			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent		:	
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		✓_
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3_		√
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4_		
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5_		<u> </u>
6	Does the organization have members or stockholders?	6_		✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a_		<u> </u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:		,	
	The governing body?	8a	√	
	Each committee with authority to act on behalf of the governing body?	8b	V	
	Does the organization have local chapters, branches, or affiliates?	9a		-
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations	4-		
	must describe in Schedule O the process, if any, the organization uses to review the Form 990 .	10		✓
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at	4.4		,
800	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		
360	uon b. Poncies		Yes	No
122	Does the organization have a written conflict of interest policy? If "No," go to line 13.	12a	<u>√</u>	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	• • • • • • • • • • • • • • • • • • • •			
	rise to conflicts?	12b		✓
_	rise to conflicts?	12b		✓
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	✓	√
	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c 13	✓	✓
13	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		✓
13 14	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by	12c 13	✓	✓
13 14 15	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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:	12c 13 14	✓	✓
13 14 15 a	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official?	12c 13 14	✓	✓
13 14 15 a	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization?	12c 13 14	✓	✓
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	12c 13 14	✓	✓
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	12c 13 14 15a 15b	✓	
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	12c 13 14	✓	✓ ✓
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	12c 13 14 15a 15b	✓	
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	12c 13 14 15a 15b	✓	
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	12c 13 14 15a 15b	✓	
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? tion C. Disclosure	12c 13 14 15a 15b	✓ ✓	
13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed List the states with which a copy of this Form 990 is required to be filed	12c 13 14 15a 15b	√	
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)	12c 13 14 15a 15b	√	
13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed List the states with which a copy of this Form 990 is required to be filed	12c 13 14 15a 15b	√	
13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(creation available for public inspection. Indicate how you make these available. Check all that apply. □ Own website □ Another's website ☑ Upon request	12c 13 14 15a 15b 16a 16b	only)	
13 14 15 a b 16a b Sec 17	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c available for public inspection. Indicate how you make these available. Check all that apply. □ Own website □ Another's website ☑ Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	12c 13 14 15a 15b 16a 16b	only)	
13 14 15 a b 16a b Sec 17	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(creation available for public inspection. Indicate how you make these available. Check all that apply. □ Own website □ Another's website ☑ Upon request	12c 13 14 15a 15b 16a 16b	only)	

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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 the organization did not compensate any officer, director, trustee, or key employee										
(A)	(B)			{(C)			(D)	(E)	(F)
Name and Title	Average hours per week	Po Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Steven Andre' trustee	<1	1						0.00	0 00	0 00
Debra Bauer		_	-	-						
trustee - ex officio	<1	1						0.00	0 00	0 00
Ken Bissell										
trustee	<1	1						0.00	0 00	0 00
Scott Bvers trustee	<1	1						0.00	0 00	0.00
Bob Clement	<1							0.00	0.00	0.00
trustee Jason Dean		✓_	<u> </u>				╁╾			·····
trustee	<1	1						0.00	0.00	0 00
Silas Deane										
trustee	<1	1		1				0.00	0 00	0 00
Nancy Eisenbrandt	<1	1						0.00	0.00	0.00
trustee Chris Ferrell	<1							0.00	0.00	0 00
trustee		✓	-	_						
Hank Flury trustee	<1	1						0.00	0.00	0.00
Richard Ford trustee	<1	1						0 00	0.00	0.00
Bob Grohovsky	<1							0.00	0.00	0 00
trustee		√	-				 			
Barton Herbison	<1	/						0.00	0.00	0 00
trustee Jim Knight	<1						-	0 00	0 00	0 00
trustee Heather MacDonald		✓		-			-			
trustee	<1	✓					L	0.00	0 00	0.00
Ebie McFarland trustee	<1	1						0.00	0.00	0 00
Rita Mitchell trustee	<1	/						0.00	0.00	0 00

Part	VII Section A. Officers, Directors, Tru	istees, Key	/ Emp	loy	ees,	an	d Hig	hest	Compensate	d Employees (co	ntınue	d)	
	(A)	(B) (C)							(D)	(E)	(F)		
	Name and title	Average hours per		_	_	_	that ap		Reportable compensation	Reportable compensation		stimated nount c	
		week	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	fr org an	other pensati rom the panizatio d relate anizatio	e on ed
	y Newman etary - ex officio	<1			,				0.00	0 00		(0 00
	ard Andrews		-	-	/	 		 				_	
chair		<1			1				0.00	0.00		(000
	es Porter		_		· ·		 						
trust	ee	<1	1			1			0 00	0.00		(0 00
Eric	Powers									-			
trust		<1	1	<u></u>		_			0 00	0.00			0.00
	ıy кауригn	<1							0.00	0 00			0 00
trust			✓	<u> </u>					0.00	0 00	<u> </u>		
	n Ritchason	<1							0.00	0.00		(0 00
trust	ee Rogers	·	/	-	-								
trust		<1	/						0.00	0.00		(00 0
	vn Thomas		- ' -		 	-		<u> </u>	1				
trust	ee	<1	1			1			0.00	0.00	0 00		00 0
Geor	ge Van Allen												
trust	ee - ex officio	<1	1		L.				0.00	0.00	0 00		J 00
	t Young	<1							0.00	0 00	0 00		0 00
	ee - ex officio		✓	<u> </u>	<u> </u>	_	ļ	<u> </u>	0.00	0 00	0 00		
	Weed	<1	,					İ	0.00	0.00	0 00		0 00
trust	ee		-	-	-		<u> </u>	-			-		
• • • • • •							ļ						
				-			 	 					
					İ		İ						
1b	Total		J				'	>	0.00	0.00			0.00
2	Total number of individuals (including thos	e in 1a) wh	no rec	eive	ed r	nor	e thar	า \$1	00,000 in repo	rtable compens	ation	from t	the
	organization ► N/A										1	- 1	
												Yes	No
	Did the organization list any former office employee on line 1a? <i>If "Yes," complete</i> S							oye	e, or highest o	compensated	3		✓
	For any individual listed on line 1a, is the sthe organization and related organizations										4		✓
5	<i>individual</i> Did any person listed on line 1a receive	or accrue	com	pen:	satı	on 1	from	any	unrelated org	anization for			
	services rendered to the organization? If "	Yes," com	olete	Sch	edu	le J	I for s	uch	person	<u> </u>	5		_ ✓
	ion B. Independent Contractors										20.000		
	Complete this table for your five highest compensation from the organization.	ompensate	ed ind	epe	nde	ent d	contra	acto	rs that receive	d more than \$10	00,000) of 	
	(A) Name and business add	dress							(B) Description of s	ervices	(C Compe		i
N/A					_	•		1					
						_							
								1					
						_		1					
2	Total number of independent contractors		those	ın	1) v	/ho	recei	ved	more than \$1	00,000 in			

. .

Parl	VII	Statement of Re	venue	 				
	_				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contri All other contributions, gifts, g and similar amounts not inclu Noncash contributions include Total. Add lines 1a–1f	grants, ded above 1f	26,296 11 87,136 20 1,470 00	113,432.31			
venue	2a			Business Code				
Program Service Revenue	b c d							
Progra		All other program servi Total. Add lines 2a-2f	ce revenue	>				
	3 4 5	Investment income (incother similar amounts) Income from investment of Royalties		. ▶	15,054.39			15,054.39
	6a b c	Gross Rents Less: rental expenses Rental income or (loss) Net rental income or (lo	(i) Real	(ii) Personal				
		Gross amount from sales of assets other than inventory	(i) Securities 162,130.38	(II) Other				
	С	Less cost or other basis and sales expenses . Gain or (loss) Net gain or (loss)	181,185.63 (19,055.25)	-	(19,055.25)			(19,055.25)
r Revenue	8a	Gross income from events (not including \$ of contributions reported See Part IV, line 18		108,037.97				
Other		Less: direct expenses Net income or (loss) fro	b om fundraising e	108,037.97 vents ►	0.00			0.00
		Gross income from gam See Part IV, line 19 Less direct expenses	ning activities. a . b					
	с 10а	Net income or (loss) from Gross sales of inverteurns and allowances Less, cost of goods so	om gaming activentory, less	ties >				
	С	Net income or (loss) from Miscellaneous Rev	enue	Business Code				
	11a b c				(58,104.36)			(58,104.36)
	d	All other revenue Total. Add lines 11a-1		•	(58,104 36)			
	12	Total Revenue. Add III 9c, 10c, and 11e		5, 6d, 7d, 8c,	51,327.09			(62,105.22)

. .

Part IX Statement of Functional Expenses

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

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	96,376.71	96,376.71							
2	Grants and other assistance to individuals in the U S See Part IV, line 22									
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16									
4	Benefits paid to or for members .									
5	Compensation of current officers, directors, trustees, and key employees									
6 7	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages									
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)									
9	Other employee benefits									
10	Payroll taxes									
11	Fees for services (non-employees).									
	Management									
	Legal									
	Accounting .									
	Lobbying									
	Professional fundraising services See Part IV, line 17									
f	Investment management fees	4,169.00		4,169.00						
_	Other									
g 12			· · · · · · · · · · · · · · · · · · ·							
13	Advertising and promotion	1,406.04		1,406 04						
14	Information technology	- 1,1223								
15	Royalties									
16	Occupancy									
17	Travel									
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	4,503.87		2,699 10	4 904 77					
19	Conferences, conventions, and meetings	4,303.67		2,699 10	1,804.77					
20	Interest									
	Payments to affiliates									
22	Depreciation, depletion, and amortization									
23	Insurance .									
24	Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)									
а	Printing	24 00			24 00					
b										
С										
d										
е										
f	All other expenses									
<u> 25</u>	Total functional expenses. Add lines 1 through 24f	106,479 62	96,376.71	8,274.14	1,828 77					
26	Joint Costs. Check here ▶ ☐ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation									

Pa	rt X	Balance Sheet						
			(A) Beginning of year		(B) End of year			
	1	Cash—non-interest-bearing .	262,980 52	1	312,391 53			
	2	Savings and temporary cash investments		2				
Ì	3	Pledges and grants receivable, net		3				
,	4	Accounts receivable, net	10,760.48	4				
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5				
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6				
ts	7	Notes and loans receivable, net		7				
Assets	8	Inventories for sale or use .		8				
ď	9	Prepaid expenses and deferred charges		9				
	10a	Land, buildings, and equipment: cost basis 10a						
	b	Less: accumulated depreciation Complete Part VI of Schedule D		10c				
	11	Investments—publicly traded securities .	454,117 64	11	356,184 86			
	12	Investments—other securities. See Part IV, line 11		12				
	13	Investments—program-related. See Part IV, line 11		13				
	14	Intangible assets		14				
	15	Other assets. See Part IV, line 11		15				
	16	Total assets. Add lines 1 through 15 (must equal line 34)	727,858 64	16	668,576 39			
	17	Accounts payable and accrued expenses	5,086.52	17	956 80			
	18	Grants payable		18				
	19	Deferred revenue		19				
	20	Tax-exempt bond liabilities .		20				
ies	21	Escrow account liability Complete Part IV of Schedule D		21				
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	_	22				
	23	Secured mortgages and notes payable to unrelated third parties		23				
	24	Unsecured notes and loans payable		24				
	25	Other liabilities Complete Part X of Schedule D		25				
	26	Total liabilities. Add lines 17 through 25	5,086 52	26	956 80			
alances		Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.						
a	27	Unrestricted net assets	312,322 27	27	294,228 28			
8	28	Temporarily restricted net assets		28				
힏	29	Permanently restricted net assets	410,449 85	29	373,391.31			
or Fund		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.						
\$	30	Capital stock or trust principal, or current funds		30	<u></u>			
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31				
₹	32	Retained earnings, endowment, accumulated income, or other funds		32	 			
Š	33	Total net assets or fund balances	722,772.12	33	667,619 59			
	34	Total liabilities and net assets/fund balances	727,858 64	34	_668,576.39			
Pa	Part XI Financial Statements and Reporting							
					Yes No			
1	Acco	ounting method used to prepare the Form 990: 🔲 Cash 🛮 🗹 Accrual	∪ Other		2a /			
	Were the organization's financial statements compiled or reviewed by an independent accountant?							
b		e the organization's financial statements audited by an independent according			2b /			
С	c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of							
the audit, review, or compilation of its financial statements and selection of an independent accountant?								
Зa		result of a federal award, was the organization required to undergo an a Single Audit Act and OMB Circular A-133?	audit or audits as set	toπn in	3a 🗸			
b		es," did the organization undergo the required audit or audits?			3b V			

SCHEDULE A (Form 990 or 990-EZ)

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 Open to Public **Inspection**

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

62 1567873 Nashville State Community College Foundation Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) ☐ An organization that normally receives. (1) more than 33⅓ % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III-Functionally integrated **d** Type III-Other a 🗌 Type I **b** Type II e 🗌 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (III) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . Provide the following information about the organizations the organization supports. h (III) Type of organization (vii) Amount of (ii) EIN (iv) is the organization (v) Did you notify (vi) Is the (i) Name of supported the organization in organization in col support organization (described on lines 1-9 in col (i) listed in your above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? US? Yes No Yes No Yes No Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received (Do not 329.828 85 146.879.30 238,701 98 155,110.92 113,432.31 983,953.36 include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 329,828 85 146,879.30 238,701.98 155,110 92 113,432 31 983,953.36 Total. Add lines 1-3 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 233,896.76 shown on line 11, column (f) 750,056 60 Public support. Subtract line 5 from line 4 Section B. Total Support (d) 2007 (f) Total Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (e) 2008 329.828.85 146,879.30 238,701 98 155,110 92 983,953 36 113,432 31 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 12,036.03 10,512 85 26,831 10 (4,00086)48,497.84 3,118.72 sources Net income from unrelated business activities, whether or not the business is (1515)(15.15)regularly carried on Other income Do not include gain or loss from the sale of capital assets (540.21)18,081 39 (58,10436)(40,563 18) (Explain in Part IV) 991,872 87 Total support. Add lines 7 through 10 12 983.953.36 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 76 % Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 62 15 % Public support percentage from 2007 Schedule A, Part IV-A, line 26f 33\% % support test - 2008. If the organization did not check the box on line 13, and line 14 is 33\% % or more, check this box and stop here. The organization qualifies as a publicly supported organization 331/3 % support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this ▶ □ box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. . . . b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Sche							Page 3
Pa	Support Schedule for Organ (Complete only if you checke	nizations De	escribed in S n line 9 of Pa	Section 509(a art I.)	1)(2)		
	tion A. Public Support						,
Ca	alendar year (or fiscal year 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 any "unusual grants")						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5 .						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
С	Add lines 7a and 7b				<u> </u>		
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support						
Ca	ılendar year (or fıscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)			.,			
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for toganization, check this box and stop leads to the stop of th	nere		nd, third, fourth	n, or fifth tax y	ear as a section	on 501(c)(3) ► □
Sec	tion C. Computation of Public Sup	port Perce	ntage				
15 16	Public support percentage for 2008 (lin Public support percentage from 2007 S				(f)) .	15	%
	tion D. Computation of Investmen					,	

Section D. Computation of Investment Income Percentage % 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 19a 331/3 % support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 331/3 %, and line 17 is not more than 331/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization 331/3 % support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33/3 %, and line 18 is not more than 33½%, check this box and **stop here**. The organization qualifies as a publicly supported organization ightharpoonup20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ □

Schedule A (Form 990 or 990-EZ) 2008 Page 4							
Part IV	Supplemental Information. Part II, line 17a or 17b; or Pa	Complete this part to irt III, line 12. Provide	provide the explanation recany other additional informa	quired by Part II, line 10, tion. (see instructions)			
				•••••••••••••••••••••••••••••••••••••••			
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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047 Open to Public

Department of the Treasury

▶ Attach to Form 990. To be completed by organizations that

answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Inspection Name of the organization Employer identification number Nashville State Community College Foundation 52 1567873 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete If the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised Yes No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 2a Total number of conservation easements 2b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) . d Number of conservation easements included in (c) acquired after 8/17/06. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶..... Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . . . In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenues included in Form 990, Part VIII, line 1 . (ii) Assets included in Form 990, Part X . \$_____

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

a Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 relating to these items:

n	2
Page	_

Par	t III Organizations Maintaini	ng Collections	of Art, H	istorica	Treasures,	or O	ther Similar As	sets (contir	าued)
3	Using the organization's accession items (check all that apply)	and other records	s, check a	any of th	e following tha	at are	e a significant us	e of its coll	ection
а	Public exhibition		d		oan or exchan				
b	Scholarly research		е	\sqcup 0	ther				
С	Preservation for future general	cions							
4	Provide a description of the organize Part XIV.	ation's collections	s and exp	lain how	they further th	ne or	ganızatıon's exer	npt purpose	e in
5	During the year, did the organization sassets to be sold to raise funds rathe	r than to be mainta	ained as p	art of the	organization's	colle	ection?	Yes [☐ No
Par	Trust, Escrow and Cust Part IV, line 9, or reported					ansv ——	wered "Yes" to I	Form 990,	
	Is the organization an agent, trusted included on Form 990, Part X?				•	s or	other assets not	Yes [□ No
b	If "Yes," explain the arrangement in	Part XIV and cor	mplete the	e followin	ng table [.]		T		
							Am	ount	
С	Beginning balance .					1c		_	
d	Additions during the year .					1d			
е	Distributions during the year .	•			-	1e			
	Ending balance	•			•	_1f			٦
b	Did the organization include an ame If "Yes," explain the arrangement in	Part XIV			•		· ·	└ Yes └	No
Par	rt V Endowment Funds. Co		, -				90, Part IV, line		
		(a) Current year	(b) Pric	or year	(c) Two years ba	ick	(d) Three years back	(e) Four years	s back
1a	Beginning of year balance	221,979 36							
b	Contributions	11,192.11					<u>-</u>		
¢	Investment earnings or losses	(30,707.10)							
d	Grants or scholarships .					_			
е	Other expenditures for facilities and programs	<u> </u>							
f g	Administrative expenses End of year balance	202,464 37							
2	Provide the estimated percentage of	of the year end ba	lance hel	d as:					
а	Board designated or quasi-endown	nent >	%						
b	Permanent endowment ► 100	%							
С	Term endowment ▶9/	ó							
За	Are there endowment funds not in th	e possession of the	he organiz	ation tha	t are held and	admi	inistered for the		
	organization by							Yes	+
	(i) unrelated organizations						•	3a(i)	1
	(ii) related organizations						•	3a(ii)	
ь 4	If "Yes" to 3a(ii), are the related org Describe in Part XIV the intended us							_3b	
						· V 1	100 10		
Par	t VI Investments – Land, Bu								
	Description of investment	(a) Cost or of (investm			st or other s (other)	(c) D	Pepreciation	(d) Book valu	.e
1a	Land								
b	Buildings								
С	Leasehold improvements								
d	Equipment								
	Other .								
Tota	II. Add lines 1a-1e (Column (d) should e	equal Form 990, Pa	art X, colur	nn (B), lın	e 10(c)) .		>		

Page	-

Part VII Investments—Other Securities	s. See Form 990, Part X, III	ne 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products . Closely-held equity interests		
Other	i	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) ▶		
Part VIII Investments—Program Relat	ed. See Form 990, Part X, li	ne 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) ► Part IX Other Assets. See Form 990, P	art X line 15	
Part IX Other Assets: Occ 1 offit 550, 1	(a) Description	(b) Book value
Total. (Column (b) should equal Form 990, Part X, c		•
Part X Other Liabilities. See Form 990 (a) Description of liability	, Part X, line 25. (b) Amount	
Federal income taxes		
T-1-1/0-1		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ► In Part XIV, provide the text of the footnote to the	,	nents that reports the organization's liability for
uncertain tax positions under FIN 48.		

Sche	dule D (Form 990) 2008			Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 99	0 to Financial St	tatements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		. 1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	•	. 3	
4	Net unrealized gains (losses) on investments		. 4	
5	Donated services and use of facilities	•	5	
6	Investment expenses		6	
7	Prior period adjustments	•	7	
8	Other (Describe in Part XIV)	•	8	
9	Total adjustments (net). Add lines 4–8	010	9	
10	Excess or (deficit) for the year per financial statements. Combine line **T XII** Reconciliation of Revenue per Audited Financial St			
-			1	
1	Total revenue, gains, and other support per audited financial stateme	ents		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	2a		
a	Net unrealized gains on investments	2b		
b	Recoveries of prior year grants	2c		
۲ 0	Other (Describe in Part XIV)	2d		
d	Add lines 2a through 2d	L	2e	
е 3	Subtract line 2e from line 1	• •	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
a b	Other (Describe in Part XIV)	4b		
C	Add lines 4a and 4b		. 4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, I	ine 12.)	5	
Pa	t XIII Reconciliation of Expenses per Audited Financial S		Expenses per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Losses reported on Form 990, Part IX, line 25	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
С	Add lines 4a and 4b		4c	
	Total expenses Add lines 3 and 4c. (This should equal Form 990, P.	art I, line 18.) .	. 5	
	t XIV Supplemental Information			
	pplete this part to provide the descriptions required for Part II, lines 3,			b
and	2b, Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b, and	Part XIII, lines 20	I and 4b	
-				
Pa	rt V, line 4: Endowment funds are used for Nashville State Commi	inity College stud	lent scholarships	
			··	
-				

Schedule D (Forn	990) 2008 Pag	ge 5
	Supplemental Information (continued)	
Fait Aiv	odphemental information (continued)	
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SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17,

OMB No 1545-0047

Department of the Treasury

ternal Revenue Service	L	18, or 19, and by org	janizations that	enter more than	\$15,000 on Form 990-EZ, line		Inspection
ame of the organization						Employer identifi	
Nashville State Commu	inity College	Foundation				62 :	1567873
Part I Fundraisir	ng Activities	. Complete ı	f the orga	nızatıon a	answered "Yes" to	o Form 990, Par	t IV, line 17.
1 Indicate whether the	e organization	raised funds	through an	y of the fo	llowing activities C	heck all that apply	/
a Mail solicitations	5		e 🖳	Solicitati	on of non-governm	ent grants	
b Email solicitation	ns		f 🖳	Solicitati	on of government g	grants	
c Phone solicitation	ons		g 🗀	Special f	undraising events		
d In-person solicit	ations		_	·	-		
2a Did the organization or key employees lis	have a writtei	n or oral agree 990. Part VII) o	ment with a	any individi connection	ual (including officer with professional f	s, directors, truste undraising service	es s?
b If "Yes," list the ten to be compensated	highest paid	individuals or	r entities (f	undraisers)	pursuant to agree	ments under which	th the fundraiser is
(i) Name of individe or entity (fundraise		(ii) Activity	custody o	draiser have	(iv) Gross receipts from activity	(v) Amount paid to (or retained by)	(vi) Amount paid to (or retained by)
· · · · · · · · · · · · · · · · · · ·			contrib	outions?		fundraiser listed in col (i)	organization
			Yes	No			
				j			
							
		 					
	į						
							
			-				
					-		
· · · · · · · · · · · · · · · · · · ·				<u> </u>			
Total .		_		•			
3 List all states in which registration or licensing		zation is regis	stered or li	censed to	solicit funds or ha	as been notified if	t is exempt from
	•••••						
							·····
			· · · · · · · · · · · · · · · · · · ·				
			 -				

8 Direct expense summary. Add lines 4 through 7 in column (d) 9 Net income summary. Combine lines 3 and 8 in column (d) 108,037.97 26,296.17 26,29	Pá	rt II	Fundraising Events. Comore than \$15,000 on F					orted	
Contributions Gross revenue (line 1 minus line 2) 93,444.13 33,380.95 7,509.00 134,334.0i	Φ	-		SFS Banquet	Golf Tournament	O'Bryant Show	(Add col (a) t	through	
Contributions Gross revenue (line 1 minus line 2) 93,444.13 33,380.95 7,509.00 134,334.0i	venu	1	Gross receipts	93,444 13	33,380.95	7,509.00	1:	34,334	08
minus line 2) 93,444.13 33,380.95 7,509.00 134.334.01 4 Cash prizes	æ	2							
5 Non-cash prizes 6 Rent/facility costs 7 Other direct expenses 82,202.64 25,728.30 107.03 108,037.97 8 Direct expense summary. Add lines 4 through 7 in column (d) 108,037.97 9 Not income summary. Combine lines 3 and 8 in column (d) 108,037.97 26,296.11 Part IIII Gross revenue (a) Bingo (b) Pull tabs/instant bingo/progressive bingo (c) Other gaming (d) Total gaming (Add cd) (e) through col (e)		3		93,444.13	33,380.95	7,509.00	1;	34,334	.08
8 Direct expense summary. Add lines 4 through 7 in column (d) 9 Net income summary. Combine lines 3 and 8 in column (d) 26,295 i. 26,295 i. 26,295 i. 26,295 i. 26,295 i. 26,295 i. 26,295 i. 27 Carsh prizes 2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses. 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine lines 1 and 7 in column (d) 9 Enter the state(s) in which the organization operates gaming activities in each of these states? 10 Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 11 Does the organization operate gaming activities with nonmembers? 11 Does the organization operate gaming activities with nonmembers? 11 Does the organization operate gaming activities of a trust or a member of a partnership or other entity		4	Cash prizes					<u> </u>	
8 Direct expense summary. Add lines 4 through 7 in column (d) 9 Net income summary. Combine lines 3 and 8 in column (d) 26,295 i. 26,295 i. 26,295 i. 26,295 i. 26,295 i. 26,295 i. 26,295 i. 27 Carsh prizes 2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses. 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine lines 1 and 7 in column (d) 9 Enter the state(s) in which the organization operates gaming activities in each of these states? 10 Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 11 Does the organization operate gaming activities with nonmembers? 11 Does the organization operate gaming activities with nonmembers? 11 Does the organization operate gaming activities of a trust or a member of a partnership or other entity	uses	5	Non-cash prizes .						
8 Direct expense summary. Add lines 4 through 7 in column (d) 9 Net income summary. Combine lines 3 and 8 in column (d) 26,295 i. 26,295 i. 26,295 i. 26,295 i. 26,295 i. 26,295 i. 26,295 i. 27 Carsh prizes 2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses. 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine lines 1 and 7 in column (d) 9 Enter the state(s) in which the organization operates gaming activities in each of these states? 10 Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 11 Does the organization operate gaming activities with nonmembers? 11 Does the organization operate gaming activities with nonmembers? 11 Does the organization operate gaming activities of a trust or a member of a partnership or other entity	t Expe	6	Rent/facility costs .						
Part IIII Gaming. Combine lines 3 and 8 in column (d) Raming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (a) Bingo (b) Pull tabs/instant bingo/progressive bingo (e) Other gaming (Add col (a) through col (e)) 1 Gross revenue (b) Full tabs/instant bingo/progressive bingo (e) Other gaming (Add col (a) through col (e)) 2 Cash prizes (b) Full tabs/instant bingo/progressive bingo (e) Other gaming (Add col (a) through col (e)) 3 Non-cash prizes (b) Full tabs/instant bingo/progressive bingo (e) Other gaming (Add col (a) through col (e)) 4 Rent/facility costs (c) Tyes (c) Yes (c)	Direc	7	Other direct expenses	82,202.64	25,728.30	107.03	1(08,037	.97
than \$15,000 on Form 990-EZ, line 6a. (a) Bingo (b) Puil tabs/instant bingo/progressive bingo (c) Other gaming (Add col (a) through col (d)) 1 Gross revenue (a) Bingo (b) Puil tabs/instant bingo/progressive bingo (c) Other gaming (Add col (a) through col (d)) 2 Cash prizes (a) Non-cash prizes (b) Pves (b) Pves (c) Other direct expenses (c) Other direc		_				•			
Column C	Pa	rt II	Gaming. Complete if then \$15,000 on Form	the organization answ	vered "Yes" to Form	990, Part IV, line 19,	or reported	more	€
bingo/progressive bingo col (a) through col (c) 1 Gross revenue 2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses Yes % Yes % Yes % No No No No No No Yes % Yes	0		than \$15,000 on Form		(b) Pull tabs/instant	(c) Other gaming	(d) Total gar	ming (Ad	
2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses . Yes	eun			(,ge		(4, 4 4 5 5	col (a) throu	igh col (c))
5 Other direct expenses .	- Re	1	Gross revenue						
5 Other direct expenses .	ses	2	Cash prizes						
5 Other direct expenses .	Expen	3	Non-cash prizes .		 				
5 Other direct expenses .	Direct	4	Rent/facility costs						
6 Volunteer labor	_	5	Other direct expenses .						
8 Net gaming income summary Combine lines 1 and 7 in column (d) 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? b If "No," Explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," Explain: 11 Does the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity		6	Volunteer labor .		<u> </u>	<u> </u>			
9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? b If "No," Explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," Explain: 11 Does the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity		7	Direct expense summary Ac	ld lines 2 through 5 in c	olumn (d)	•	(-)
9 Enter the state(s) in which the organization operates gaming activities: a is the organization licensed to operate gaming activities in each of these states? b if "No," Explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b if "Yes," Explain: 11 Does the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity		8	Net gaming income summary	y Combine lines 1 and	7 ın column (d) .	•			
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," Explain: 11 Does the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity		ls	the organization licensed to o				. 9a	Yes	No
b If "Yes," Explain: 11 Does the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity	b) If "							
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity				gaming licenses revoke	d, suspended or termin	ated during the tax yea	ar? 10a		
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity									
formed to administer charitable gaming /		Is	the organization a grantor, be	eneficiary or trustee of a	a trust or a member of				

Pa	_	6	-3

Schedule	G	(Form	990	or	990-EZ)	200

001101	350 C 1/ 5/11/ 350 C 350-E2/ 2000			ugo 🕶
			Yes	No
13	Indicate the percentage of gaming activity operated in:	ł		
а	The organization's facility			
b	An outside facility			
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records:	: :		
	Name ▶			
	Address ▶			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			
С	If "Yes," enter name and address			
	Name ▶			
	Address ►			
16	Gaming manager information:			
	Name ▶.			
	Gaming manager compensation ▶ \$			
	Description of services provided ▶			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?			
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$			

SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.

► Attach to Form 990.

OMB No 1545-0047

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 \square Schedule I (Form 990) 2008 dues/communicatio ŝ student scholarship (h) Purpose of grant or assistance donor cultivation Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Employer identification number 1567873 ✓ Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance 62 (f) Method of valuation (book, FMV, appraisal, other) Cat No 50055P book book book Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (e) Amount of non-cash assistance (d) Amount of cash grant 81,976.75 8,696.09 5,703.87 Part IV and Schedule I-1 (Form 990) if additional space is needed For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of section 501(c)(3) and government organizations State governmt State governmt State governmt (c) IRC section if applicable the selection criteria used to award the grants or assistance? Part I General Information on Grants and Assistance 62-0808901 Nashville State Community College Foundation 62-0808901 62-0808901 (P) EIN Enter total number of other organizations Nashville-State-Comm. College, Nashville.State.Comm, College, Nashville-State-Comm, College, 1 (a) Name and address of organization or government Nashville. TN 37209 Nachville TN 37209 Nachville TN 37209 Name of the organization 2 Des

Page 2

Schedule I (Form 990) 2008

Schedule I (Form 990) 2008 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. (f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 2. Monthly and quarterly reconciliations and reporting are prepared for each grant, as well as a review of individual transactions through approvals. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients Part I: General Information on Grants and Assistance (a) Type of grant or assistance Part IV Part III

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

NonCash Contributions

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No 1545-0047

2008

Open To Public Inspection

Nam	lame of the organization				Employer identification number 62 1567873				
Nashville State Community College Foundation									
Pai	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported Form 990, Part VIII, I		Method o	(d) If dete		g
1	Art—Works of art								
2	Art—Historical treasures		·						
3	Art—Fractional interests .								
4	Books and publications								
5	Clothing and household goods	√		1,470.00		cost/se	lling	price	
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities—Publicly traded								
10	Securities—Closely held stock								
11	Securities—Partnership, LLC, or trust interests								
12	Securities-Miscellaneous								
13	Qualified conservation contribution (historic structures)								
14	Qualified conservation contribution (other)								
15	Real estate—Residential								
16	Real estate—Commercial								
17	Real estate—Other		·						
18	Collectibles	✓	 	ļ- · · - · · - · · · · · · · · · · · · ·		cost/se	lling	price	
19	Food inventory .								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts			-			llina	nrina	
25	Other ► (tickets/passes)	✓				cost/se	_		
26	Other ► (. gift cards/pkgs)			 		COSUSE	ming	price	
27 28	Other ► () Other ► ()								
					- 6	T			
29	Number of Forms 8283 received which the organization complete				29	g			
	which the organization complete	50 1 01111 02	oo, i ait iv, bolice Ackilo	wicagement .				Yes	No
30a	During the year, did the organization								
	used for exempt purposes for the		- -	•	•		30a		✓
	If "Yes," describe the arrangement								ĺ
31	Does the organization have a contributions?	gift acce	ptance policy that requil	res the review of a	any non-s	tandard 	31	✓_	
32a	Does the organization hire or us contributions?	se third pai	rties or related organization	ns to solicit, proces	s, or sell r	oncash .	32a		1
b	If "Yes," describe in Part II					ļ			
33	If the organization did not report	revenues ir	n column (c) for a type of pr	operty for which colu	ımn (a) ıs c	hecked,			

Schedule M (Form 990) 2008 Page 2				
Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 32b, and 33. Also complete this part for any additional information.				
Part I, Line 33 Other noncash contributions were used in fundraising auction				

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Nashville State Community College Foundation	62	1567873
Part I Summary	-	
11 Other revenue = Change in market value		
Part VI Government, Management, and Disclosure	- -	
Section A. Governing Body and Management		
10. Review of Form 990 - The Accountant prepares and reviews Review and oversite is	provide	ed by the Vice President
of Finance and Administrative Services		
. ,		
Section B. Policies	-	
12. c. Disclosure of Conflict of Interest - Each Board member completes a conflict of inte	rest do	ocument when they begin
a two-year term on the Foundation Board They are reviewed every two years or as mem	ber tur	nover occurs.
Section C. Disclosure		
19 Documentation Availability to Public - Dependent upon the type of document, disclose	sure is	either printed for public
consumption or provided upon request.		