Department of the Treasury Internal Revenue Service

Short Form

Return of Organization Exempt From Income Tax

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

► For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.

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

OMB No. 1545-1150

Open to Public nspesion

Α	For the	or the 2004 calendar year, or tax year beginning , 2004, and ending , 20						, 20		
В	Check if a					tification number				
$\overline{\Delta}$	Address of	change use IRS	Chinese Arts Alliance o)	Nachville	1	06:	166	0626		
	Name cha	change label or Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Telep								
	Initial retu	return type. 2510 Boarton Ave (6)				(110	15) 385-9341			
	Final retu									
	Amended	return Instruc-	Oity of towit, state of cooling, and 211 14	001 - 200		F Group	,			
Ц		on pending tions.		721-4115			ber >			
	 Secti 		rations and 4947(a)(1) nonexempt charita					🗵 Cash 🗌 Accrual		
		a con	mpleted Schedule A (Form 990 or 990-EZ	z).	Other	(specify)	<u> </u>			
					H Check	→ □	if the o	rganization		
1	Websit	Website: ► \\\ \tau\!/\A\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\						_		
			nly one)— ∑ 501(c) (3) ∢ (insert no.)	4947(a)(1) or 527	1	•	form 990, 990-EZ, or 990-PF).			
_			ion's gross receipts are normally not more		tion nood	aat fila a r	rotum i	with the IDC: but if the		
			n 990 Package in the mail, it should file a r							
							▶ \$	mprete return		
Marie S	Name and Address of the Owner, where		ne 9 to determine gross receipts; if \$100,000							
F.	art I		enses, and Changes in Net Asset	s or Fund Balances (See page	e 37 of t				
	1	Contributions, gifts	s, grants, and similar amounts received				1	18,609,-		
	2	Program service	revenue including government fees an	d contracts		[2	14, 154.		
	3	_					3	5,880,-		
	4	Investment incom					4	25, -		
	5a		om sale of assets other than inventory	1 - 1	• •	` '				
	1		_				l			
	b		er basis and sales expenses				E .			
0	C		m sale of assets other than inventory (5c			
Revenue	6		d activities (attach schedule). If any amo		k here 🕨	. Ц				
3,6	a	Gross revenue (no	ot including \$ of							
Ĕ		reported on line 1	1) . <i>.</i>							
	b	Less: direct expe	nses other than fundraising expenses	6b						
	С	Net income or (lo	ss) from special events and activities	(line 6a less line 6b) .		[6c			
	7a	Gross sales of inv	ventory, less returns and allowances	7a						
	b	Less: cost of goo	ods sold	7b						
	c	_	oss) from sales of inventory (line 7a les				7c			
	8	Other revenue (de	•				8			
	9		dd lines 1, 2, 3, 4, 5c, 6c, 7c, and 8).			. ▶	9	38, 668, -		
	10		ar amounts paid (attach schedule) .				10	8,860,-		
	11		or for members ,				11	0,000		
e)	l .	-				• • •	12			
Se	12		empensation, and employee benefits			1		0 F OR		
Expenses	13	Professional fees and other payments to independent contractors					13	8,580,		
X	14	Occupancy, rent, utilities, and maintenance Printing, publications, postage, and shipping. Other expenses (describe See Stanisaent 2			• • }	14	: 54 11			
-	15	Printing, publicati	ions, postage, and shipping				15	1,864		
	16	Other expenses (describe Sec 67/2	White 12	***************************************) 	16	13,119,-		
	17	iotai expenses (add lines 10 through 16)	 			17	32,423,-		
ŝ	18	Excess or (deficit)) for the year (line 9 less line 17)				18	612451-		
Net Assets	19							11,675,-		
¥		end-of-year figure reported on prior year's return)				[19	1 1,015,		
et	20 Other changes in net assets or fund balances (attacl		net assets or fund balances (attach e	explanation)			20			
_	21		d balances at end of year (combine lin			. 🏲	21	17, 420		
P	art II	Balance Sheets	s—If Total assets on line 25, column (I	B) are \$250,000 or more	, file Form	990 inst	ead of	Form 990-EZ.		
		(See page 40 of the instructions.) (A) Beginning of						(B) End of year		
22	Cach	n, savings, and inv				675,-		17,920,-		
23						<u>~ .~\</u>	23	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		
24		Land and buildings					24			
25		· ·		•	6 1	675,		17,920,-		
26	Total	Total assets			26	<u>* 11 -1 201</u>				
27							27	17 920		
				,	1	2 121	141			

		Statement of Program Service Accom	plishments (See pa	age 41 o	f the instruct	ions.)		Expenses	
Wha	t is th	e organization's primary exempt purpose? 🗜	rumamity, cours	<u>.</u>	. —		and and	uired for 501 (4) organiza	
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, I a							er, and	4947(a)(1) to	rusts;
		ne services provided, the number of persons ber						onal for other	S.)
		o Nauhuille ANS Commission, Cr							
		to Production, including diverse e					ا يب		
		moduction also achieve antistic m) 28a		
29	Μεπ	c Northwille ANS Commission, Open	evilon Basic I	- Ch	كاللغط عليانا	liance of	<u></u>		
	Nown	wille is a small organization but p	model genin	e pulit	ic yestm	2-			
		new Arts and culture posterial activities) 29a		
30	Ove	rseas Chinus Association. Pro	Jest 2 Mbson -	This	grant to	p to fee	ud		
		echnical part of our stories produ		11 one					
		ity DVP to distribute Mustravito	production.		nts \$ 😤 🖎) 30a		
			JIMON 3	. (Gra	nts \$ え; ご	<u>co</u>) 31a	S 0-1	
		program service expenses (add lines 28a th			 		▶ 32	8,86	
13	rt-IV	List of Officers, Directors, Trustees, and Key I							
		(A) Name and address	(B) Title and average hours per week		C) Compensation (If not paid,	employee be	ibutions to enefit plans &	(E) Expen	
			devoted to position	<u> </u>	enter -0)	deferred co	mpensation	other allowa	nces
		Please see attachment a							
		100							
			-						
			· ·			-		_ · · · · -	
	rt V	Other Information (Note the attachme	ent requirement in	Goromi	Instruction	V page 1	4)	Voc	No
			· · · · · · · · · · · · · · · · · · ·					Yes	No
33		ne organization engage in any activity not previously				· ·		- 1	×
34		any changes made to the organizing or governing docume	•					- 1	 ^
35		organization had income from business activity	•	•				i	
_		eported on Form 990-T, attach a statement exp ne organization have unrelated business gross incom						1	×
a		es," has it filed a tax return on Form 990-T for		1033(e) NO	ice, reporting, a	uid proxy iaz	k requireme	#11S?	 ^
36		there a liquidation, dissolution, termination, or s			no voor? (If "V	or " attach		nt)	X
		amount of political expenditures, direct or inc				37a	a staterrie	114)	1
		he organization file Form 1120-POL for this		1 (10 113)	adduoris.	L <u>= : = J</u>			X
		he organization borrow from, or make any lo		irector t	rustee or ke	, omploved			
OOL		loans made in a prior year and still unpaid a					e or were	ally	
b			ne 38 instructions and enter the amount involved. 38b						
39		01(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9							
b		s receipts, included on line 9, for public use	•			39b			
		(3) organizations. Enter: Amount of tax imposed or		ng the vea	r under:				
			12 -			5 ▶			
b	501(0	c)(3) and (4) organizations. Did the organization					ion durina	the	
	year	or did it become aware of an excess benefit t	transaction from a pr	ior year?	If "Yes," atta	ch an expl	anation.	L	1
		nt of tax imposed on organization managers or disc			ınder 4912, 495	5, and 4958	>		
d		: Amount of tax on line 40c, above, reimburs		on			>	· · · · · · · · · · · · · · · · · ·	
41		he states with which a copy of this return is file	1 .	<u>TN</u>					
42		pooks are in care of ▶		;;-(t-=		phone no.	► (.6.15	1385-9	34)
	Located at ▶ 2510 Bourton Auc Nowhville TN ZIP+4 ▶ 3								15
43 	Section Sectio	on 4947(a)(1) nonexempt charitable trusts filir enter the amount of tax-exempt interest recei	ved or accrued during	ng the tax	kyear	► 43	▶ □		
		Under penalties of perjury, I declare that I have examinand belief, it is true correct, and complete. Declaration	ned this return, including a	ccompany	ing schedules an	d statements	and to the	est of my kno	wledge
Plea	se	of the same	· .	· • · · · · · · · · · · · · · · · · · ·	bases on an into			i nas any kilot	wieuge.
Sigr		Jan Jan Tu				2/15	105		
Here		Signature of officer	, Direc	*	_	Date			
		Type or print name and title.	1 011 02	/1 CV				· · · · · · · · · · · · · · · · · · ·	
				Date	Check if		mared - 601.	- DTIN 10- 0	hert 145
Paid	.	Preparer's signature		Jale	self-		aparers 5514 (r PTIN (See Gen.	. anst. W)
-	arer's	Firm's name (or yours)	•	1	employe	EIN ►	·		
Use (חווע	if self-employed), address, and ZIP + 4				Phone no. ▶	()		

990 EZ Attachment 1

Partl 10 Grants and similar amounts paid

Chinese Arts Alliance of Nashville

Metro Nashville Arts Commission Overseas Chinese Association	Creation Grant Project Support	"Our Stories" Production Marketing Expense "Our Stories" Production Technical Expense		\$	960.00 300.00
Metro Nashville Arts Commission	Operation Basi III	CAAN Adminstration fee		\$ 5,	600.00
TN Arts Commission Arts Built Community Grant "Moor		"Moon Goddess" Production Costumes cost			
		"Moon Goddess" Production Music Expense	\$ 127.00		
		"Moon Goddess" Production rehearsal technical cost	\$ 338.00	\$ 2,	00.00
				\$8,	860.00

990 EZ Attachment 2

Partl Other Expenses Line 16

Chinese Arts Alliance of Nashville

Other Expenses

04 Fundraise cost	\$ 4,066
04 Summer Kungfu Camp	\$ 683
Business, boad meeting, doc filings	\$ 825
"Our Stories" production other costs	\$ 3,414
"Moon Goddess" production costs	\$ 1,112
Operation equipments-computer & progrms	\$ 1,687
Office Expense, supplies, and public relations	\$ 1,332
	\$ 13,119

990 EZ Attachment 1 3

Part III Line 31 Other program services

Chinese Arts Alliance of Nashville

Grants:

Arts Built Community Grant Metro Nashville Arts Commission and Tennesses Arts Commission \$

2,000.00

This grant is to support "Moon Goddess" production which is going to present in March of 2005. Some expenses were already paid in 2004. "Moon Goddess" production provides general public an opportunity to learn about Chinese stories, and arts.

Board of Directors:			B) title, Average house per week devoted	c) compensation	D) contributions to employee benefit plans & deferred	E) Expenses account and other allowances
A)	Names	Address	to position		compensation	
1 0	ynthia Morin	2510 Barton Ave, Nashville, TN 37212	Chair	0	0	0
2 E	Becky Waldrop	2510 Barton Ave, Nashville, TN 37212	Board members, 2 hours	0	0	0
3 S	herry Wang	2510 Barton Ave, Nashville, TN 37212	Board members, 4 hours	0	0	0
4 F	Raymond Friedman	2510 Barton Ave, Nashville, TN 37212	Board members, 4 hours	0	0	0
5 F	Ruth Chen	2510 Barton Ave, Nashville, TN 37212	Board members, 4 hours	0	0	0
6 F	Rudi Aldridge	2510 Barton Ave, Nashville, TN 37212	Board members, 4 hours	0	0	0