

Form **990**
Department of the Treasury
Internal Revenue Service

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)

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

OMB No. 1545-0047

2006-07

Open to Public Inspection

A For the 2006 calendar year, or tax year beginning July 1, 2006, and ending June 30, 20 07

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

C Name of organization
McNeilly Center for Children
 Number and street or P.O. box (if mail is not delivered to street address) Room/suite
400 Meridian Street
 City or town, state or country, and ZIP + 4
Nashville, TN 37207-5922

D Employer identification number
62 0479366

E Telephone number
615) 255-2549

F Accounting method: ☐ Cash ☒ Accrual
☐ Other (specify) ▶

G Website: ▶ mcneillycenter.org

H and **I** are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? ☐ Yes ☒ No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? ☐ Yes ☒ No
 If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No
I Group Exemption Number ▶

J Organization type (check only one) ▶ ☒ 501(c)(3) (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check here ▶ ☐ if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **3,686,952**

M Check ▶ ☐ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
	a	Contributions to donor advised funds	1a		0	
	b	Direct public support (not included on line 1a)	1b		208,149	
	c	Indirect public support (not included on line 1a)	1c		432,259	
	d	Government contributions (grants) (not included on line 1a)	1d		296,188	
	e	Total (add lines 1a through 1d) (cash \$ <u>922,419</u> noncash \$ <u>14,177</u>)	1e		936,596	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		2,598,414	
	3	Membership dues and assessments	3		0	
	4	Interest on savings and temporary cash investments	4		3,937	
	5	Dividends and interest from securities	5		79,507	
	6a	Gross rents	6a			
	b	Less: rental expenses	6b			
	c	Net rental income or (loss). Subtract line 6b from line 6a	6c		0	
	7	Other investment income (describe ▶)	7		0	
	8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
	b	Less: cost or other basis and sales expenses	8a			
	c	Gain or (loss) (attach schedule)	8b			
	d	Net gain or (loss). Combine line 8c, columns (A) and (B)	8c			
	8d				0	
	9	Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>				
	a	Gross revenue (not including \$ <u>0</u> of contributions reported on line 1b)	9a		66,352	
	b	Less: direct expenses other than fundraising expenses	9b		31,510	
	c	Net income or (loss) from special events. Subtract line 9b from line 9a	9c		34,842	
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less: cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c		0	
	11	Other revenue (from Part VII, line 103)	11		2,046	
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		3,655,442	
	Expenses	13	Program services (from line 44, column (B))	13		3,410,083
		14	Management and general (from line 44, column (C))	14		202,225
15		Fundraising (from line 44, column (D))	15		52,700	
16		Payments to affiliates (attach schedule)	16		0	
17		Total expenses. Add lines 13 and 14, column (A)	17		3,665,013	
Net Assets	18	Excess or (deficit) for the year. Subtract line 17 from line 12	18		-9,571	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		1,824,499	
	20	Other changes in net assets or fund balances (attach explanation)	20		7,606	
	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21		1,822,534	

Part II **Statement of Functional Expenses** All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	0	0		
22b	Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	0	0		
23	Specific assistance to individuals (attach schedule)	0	0		
24	Benefits paid to or for members (attach schedule)	0	0		
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)	179,144		179,144	
25b	b Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	0	0	0	0
25c	c Compensation and other distributions not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	0	0	0	0
26	Salaries and wages of employees not included on lines 25a, b, and c	2,148,168	2,106,434	0	41,734
27	Pension plan contributions not included on lines 25a, b, and c	74,202	72,453	0	1,749
28	Employee benefits not included on lines 25a - 27	198,877	198,305	0	572
29	Payroll taxes	175,540	159,819	12,542	3,179
30	Professional fundraising fees	0	0	0	0
31	Accounting fees	20,335	3,337	16,998	0
32	Legal fees	0	0	0	0
33	Supplies	106,842	104,997	1,560	285
34	Telephone	14,360	12,988	1,355	517
35	Postage and shipping	337	42	756	39
36	Occupancy	212,200	204,109	4,020	4,071
37	Equipment rental and maintenance	66,371	63,600	3,271	0
38	Printing and publications	5,112	5,040	16	56
39	Travel	9,931	8,745	1,039	147
40	Conferences, conventions, and meetings	10,759	9,716	750	293
41	Interest	0	0	0	0
42	Depreciation, depletion, etc. (attach schedule)	85,243	105,984	-20,741	0
43	Other expenses not covered above (itemize):				
a	Employee/Client Assistance	10,315	10,252	505	58
b	Food Costs	317,251	317,251	0	0
c	Field Trips/ Enrichment	23,592	23,592	0	0
d	Bad Debt	310	310	0	0
e	Continuing Education	1,614	1,614	0	0
f	Dues	2,010	1,000	1,010	0
g					
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	3,665,013	3,410,038	202,225	52,700

Joint Costs. Check ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☐ No
If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;
(iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III	Statement of Program Service Accomplishments <i>(See the instructions.)</i>
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Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► Child Care		Program Service Expenses <small>(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)</small>
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)		
a Our business purpose is to provide quality child care at an affordable cost to low income families		
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>		3,410,083
b		
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>		
c		
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>		
d		
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>		
e Other program services (attach schedule)		
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>		
f Total of Program Service Expenses (should equal line 44, column (B), Program services).		3,410,083

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash—non-interest-bearing	39611	45	62035
	46 Savings and temporary cash investments	286811	46	181710
	47a Accounts receivable	47a 184262		
	b Less: allowance for doubtful accounts	47b 4	189389	47c 184258
	48a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b 0	48c 0	
	49 Grants receivable	0	49	0
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)	0	50a	0
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	0	50b	0
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less: allowance for doubtful accounts	51b 0	51c 0	
	52 Inventories for sale or use	0	52	0
	53 Prepaid expenses and deferred charges	27982	53	30620
	54a Investments—publicly-traded securities <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	576251	54a	652332
	b Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b	
55a Investments—land, buildings, and equipment: basis	55a			
b Less: accumulated depreciation (attach schedule)	55b 0	55c 0		
56 Investments—other (attach schedule)	0	56	0	
57a Land, buildings, and equipment: basis	57a 1880192			
b Less: accumulated depreciation (attach schedule)	57b 881426	1005186	57c 998766	
58 Other assets, including program-related investments (describe ►)	0	58	0	
59 Total assets (must equal line 74). Add lines 45 through 58	2125230	59	2109721	
Liabilities	60 Accounts payable and accrued expenses	195731	60	206730
	61 Grants payable	0	61	0
	62 Deferred revenue	105000	62	80457
	63 Loans from officers, directors, trustees, and key employees (attach schedule)	0	63	0
	64a Tax-exempt bond liabilities (attach schedule)	0	64a	0
	b Mortgages and other notes payable (attach schedule)	0	64b	0
	65 Other liabilities (describe ► 0)	0	65	0
66 Total liabilities. Add lines 60 through 65	300731	66	287187	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	1643434	67	1731434
	68 Temporarily restricted	181065	68	91100
	69 Permanently restricted	0	69	0
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds	0	70	0
	71 Paid-in or capital surplus, or land, building, and equipment fund	0	71	0
	72 Retained earnings, endowment, accumulated income, or other funds	0	72	0
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	1824499	73	1822534
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	2125230	74	2109721	

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

Instructions		Form 990 (2015)	
a	Total revenue, gains, and other support per audited financial statements	a	3655442
b	Amounts included on line a but not on Part I, line 12:		
1	Net unrealized gains on investments	b1	
2	Donated services and use of facilities	b2	
3	Recoveries of prior year grants	b3	
4	Other (specify):	b4	
Add lines b1 through b4		b	0
c	Subtract line b from line a	c	3655442
d	Amounts included on Part I, line 12, but not on line a:		
1	Investment expenses not included on Part I, line 6b	d1	00
2	Other (specify):	d2	0
Add lines d1 and d2		d	0
e	Total revenue (Part I, line 12). Add lines c and d	e	36554422

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a		Total expenses and losses per audited financial statements	a	3665013
b		Amounts included on line a but not on Part I, line 17:		
1	Donated services and use of facilities	b1	0	
2	Prior year adjustments reported on Part I, line 20	b2	0	
3	Losses reported on Part I, line 20	b3	0	
4	Other (specify):	b4	0	
Add lines b1 through b4			b	0
c		Subtract line b from line a	c	3665013
d		Amounts included on Part I, line 17, but not on line a:		
1	Investment expenses not included on Part I, line 6b	d1	0	
2	Other (specify):	d2	0	
Add lines d1 and d2			d	0
e		Total expenses (Part I, line 17). Add lines c and d	e	3665013

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

[illegible]

Part V-A **Current Officers, Directors, Trustees, and Key Employees** *(continued)*

Yes	No
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- 75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 17

- b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) . . .

- c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization."

- If "Yes," attach a statement that includes the information described in the instructions.

- d Does the organization have a written conflict of interest policy?

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

[illegible]**Part VI** Other Information (See the instructions.)[illegible]

- 76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change

- 77 Were any changes made in the organizing or governing documents but not reported to the IRS? . . .
If "Yes," attach a conformed copy of the changes.

- 78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?

- b If "Yes," has it filed a tax return on Form 990-T for this year?

- 79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement

- 80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?

- b If "Yes," enter the name of the organization ►

- 81a Enter direct and indirect political expenditures. (See line 81 instructions.) ☐ and check whether it is ☐ exempt or ☐ nonexempt

- b Did the organization file Form 1120-POL for this year?

Part VI Other Information (continued)

Yes No

82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		✓
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	✓	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		✓
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		✓
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b		✓
c	Dues, assessments, and similar amounts from members	85c		0
d	Section 162(e) lobbying and political expenditures	85d		0
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e		0
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f		0
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		✓
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		✓
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a		0
b	Gross receipts, included on line 12, for public use of club facilities	86b		0
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a		0
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b		0
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a		✓
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b		
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		✓
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			0
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		✓
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		✓
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		✓
90a	List the states with which a copy of this return is filed ▶ Tennessee			
b	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)	90b		101
91a	The books are in care of ▶ Melba Marcum Telephone no. ▶ (615) 255-2549 Located at ▶ 400 Meridian Street, Nashville, TN ZIP + 4 ▶ 37207-5922			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b		✓

Part VI Other Information (continued)

Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c ☐ ☒

If "Yes," enter the name of the foreign country: _____

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here ☐ and enter the amount of tax-exempt interest received or accrued during the tax year: 92 ☐**Part VII** Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

		Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
		(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93	Program service revenue:					
a	Child Care Fees					753321
b	Metro Nashville Gov					28088
c	HeadStart (MDHA)					251672
d	TN Department of Human Services					1565333
e						
f	Medicare/Medicaid payments					
g	Fees and contracts from government agencies					
94	Membership dues and assessments					
95	Interest on savings and temporary cash investments			14	3937	
96	Dividends and interest from securities			14	79607	
97	Net rental income or (loss) from real estate:					
a	debt-financed property					
b	not debt-financed property					
98	Net rental income or (loss) from personal property					
99	Other investment income					
100	Gain or (loss) from sales of assets other than inventory					
101	Net income or (loss) from special events			1	34842	
102	Gross profit or (loss) from sales of inventory					
103	Other revenue: a TN Worker's Comp surplus			1	425	
b	Philadelphia Ins.-Ins. claim for loss			1	1621	
c						
d						
e						
104	Subtotal (add columns (B), (D), and (E))		0		120432	2598414
105	Total (add line 104, columns (B), (D), and (E))					2718846

Note: Line 105 plus line 1a, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93A	Fees collected from clients for child care—McNeilly's exempt purpose
93b-e	Fees and grants provided by TN Dept of Human Services, HeadStart, Metro Nashville Government to pay clients child care—McNeilly's exempt purpose

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
None	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. *Complete only if the organization is a controlling organization as defined in section 512(b)(13).*

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	✓

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	✓

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No
	✓

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Sign Here

Signature of officer: Melba Marcum Date: 8/8/07

Melba Marcum, Executive Director

Type or print name and title

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed: ☐

Firm's name (or yours if self-employed), address, and ZIP + 4: _____ EIN: _____ Preparer's SSN or PTIN (See Gen. Inst. X): _____

Phone no.: _____



McNeilly Center for Children
 400 Meridian Street
 Nashville, TN 37207
 62-0479366

July 1, 2006-June 30, 2007 Tax Year

Part 1-# 1

b. Gifts/Grants	208149
c. United Way(including RTS)	432259
d. CACFP	<u>296188</u>
	936596

Part 1- # 9

	Revenue	Expenses	Net
Support A Child Campaign	21020	292	20728
McNeilly In May Event	<u>45332</u>	<u>31218</u>	<u>14114</u>
	66352	31510	34842

Part 1 - #20

Adjustment to Fund Balance

\$7,606

Difference between accrued amount to TN DHS for June, 06 and actual receipts for Certificate child care received in July, 06.

Endowment Fund

Part IV- # 54- Endowment

Regions- Money Fund	64120.39
Royce Fund - #266	40493.51
#710- Pioneer Mid Cap	46996.04
#755 - Pioneer Short Term Income	86913.49
#701 - Pioneer Fund Class Y	93903.21
#748 - Pioneer Oak Ridge Large cap Growth	100877.21
#702 - Pioneer Value Fund Class Y	71973.64
#769 - Pioneer International Core Equity	34475
#703 - Pioneer Bond Fund Class Y Fund	52301.65
#774- Pioneer Government Income Fund	<u>60277.49</u>
	652331.63

McNeilly Center For Children
400 Meridian Street
Nashville, TN 37207

ID#62-0479366
FORM 990- Part II-#42 & Part IV-#57
July 1, 2006-June 30, 2007

Description	Year	Acct #	Cost	Life	Prior	Current	Discard	Accrued
				Method	Depreciation	Depreciation	Adj.	6/30/2006
Land			65588.61					
Bldg B	1995	1875	479339.83	40/SL	133815.76	11983.50		145,799.26
Bldg B-Improvements	Varied	1876	51930.14	Var/SL	20078.06	6222.47		26300.53
Bldg. A	1968	1825	273201.77	40/SL	204973.26	6762.39		211735.65
Bldg.A- Improvements	Varied	1826	181267.91	Var/SL	118692.12	16785.6		135477.72
NCC Bldg	Varied	1835	311297.54	40/SL	57702.62	7782.44		65485.06
NCC Bldg Improve	Varied	1836	42928.45	Var/SL	19674.03	2964.37	-971	21667.4
Playground RenoParking	Varied	1860	246053.93	15/SL	80525.53	15374.23		95899.76
NCC Equipment	Varied	1859	18617.85	Var/SL	10117.56	3826.18	-3919.00	11278.32
NCC Furniture/Fixtures	Varied	1863	16629.00	Var/SL	14750.02	353.31	* 1253.58 * -1253.58	13849.75
Educational Equip	Varied	1858	34480.41	Var/SL	25518.58	5333.92	-7902.81	22949.69
Educational Equip-SA	Varied	1857	6516.00	Var/SL	6393.8	122.2		6516
Educational Equip-Infant		1856	4683.59	Var/SL	1446.09	1393.28		2839.37
Office Equipment	Varied	#1862	44248.01	Var/SL	59304.38	3351.78	-26601.49	36054.67
Kitchen/Laundry Equip	Varied	1864	39704.68	Var/SL	28022.09	1969.89		29991.98
Bus	2000	1841	42120	Var/SL	42120.00	0		42120
Playground Equip	Varied	1855	21584.78	Var/SL	12443.84	1017.47		13461.31
			1880192.50		835577.74	85243.03	-39394.30	881426.47

*Equipment listed in wrong acct.