TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

JUNE 30, 2022

PREPARED FOR:

TENNESSEE PERFORMING ARTS CENTER (TPAC)
MANAGEMENT CORPORATION
505 DEADERICK STREET, 3RD FLOOR
NASHVILLE, TN 37243

PREPARED BY:

KRAFTCPAS PLLC 555 GREAT CIRCLE ROAD NASHVILLE, TN 37228

AMOUNT DUE OR REFUND:

NOT APPLICABLE

MAKE CHECK PAYABLE TO:

NOT APPLICABLE

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

NOT APPLICABLE

RETURN MUST BE MAILED ON OR BEFORE:

NOT APPLICABLE

SPECIAL INSTRUCTIONS:

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. AFTER YOU HAVE REVIEWED THE RETURN FOR COMPLETENESS AND ACCURACY, PLEASE SIGN, DATE AND RETURN FORM 8879-TE TO OUR OFFICE. WE WILL TRANSMIT THE RETURN ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED. RETURN FORM 8879-TE TO US BY MAY 15, 2023

DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE IRS.

DUE TO ELECTRONIC FILING RULES IMPLEMENTED BY VARIOUS TAXING AUTHORITIES, WE URGE YOU TO RETURN YOUR FORM 8879-EO WITHIN 5 BUSINESS DAYS OF RECEIPT.

EXTENDED TO MAY 15, 2023

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 private foundations)

OMB No. 1545-0047

▶ Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

A F	or the	2021 calendar year, or tax year beginning $JUL 1, 2021$ and	ending J	<u>UN 30, 2022</u>	
B c	heck if pplicable	C Name of organization TENNESSEE PERFORMING ARTS CENTER (TPAC)	D Employer identific	cation number
	Addres	S MANAGEMENT GODDODATION			
	Name change			58-13205	90
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	r
	Final return/	505 DEADERICK STREET, 3RD FLOOR		(615) 78	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	26,931,895.
	Amend return	NASHVILLE, IN 3/243		H(a) Is this a group re	
	Application	F Name and address of principal officer. OBMNIP BR		for subordinates	? Yes X No
	pendin	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
		mpt status: X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) c	or 527	If "No," attach a	list. See instructions
_		e: WWW.TPAC.ORG		H(c) Group exemptio	
		organization: X Corporation	L Year	of formation: 1977 $_{ m N}$	1 State of legal domicile: $\mathbf{T}\mathbf{N}$
Pa	_	Summary			
Φ	1 1	Briefly describe the organization's mission or most significant activities: CREA	re mea	NINGFUL EXPI	ERIENCES
Governance		THROUGH PERFORMING ARTS; PROVIDE ARTS ENT			-
ř	2	Check this box 🕨 🔛 if the organization discontinued its operations or dispos	ed of more	than 25% of its net ass	
ŏ				3	23
	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	23
es 6		Total number of individuals employed in calendar year 2021 (Part V, line 2a)			255
ξ		Total number of volunteers (estimate if necessary)			200
Activities &	7 a ⁻	Total unrelated business revenue from Part VIII, column (C), line 12		7a	-1,631.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
				Prior Year	Current Year
Φ	8	Contributions and grants (Part VIII, line 1h)		11,564,387.	10,957,841.
au a	9	Program service revenue (Part VIII, line 2g)		102,277.	13,392,162.
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		-4,999.	-581,039.
ш	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		77,109.	2,116,400.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		11,738,774.	25,885,364.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		4,715,673.	7,267,646.
Expenses	16a I	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
e x be	b ·	Total fundraising expenses (Part IX, column (D), line 25) 922,95	53.		
Ú	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,898,375.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		7,614,048.	21,786,105.
	19	Revenue less expenses. Subtract line 18 from line 12		4,124,726.	4,099,259.
Net Assets or			Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		22,129,130.	35,782,071.
t As	21	Total liabilities (Part X, line 26)		7,475,102.	17,031,316.
	22	Net assets or fund balances. Subtract line 21 from line 20		14,654,028.	18,750,755.
	art II	Signature Block			
		ties of perjury, I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is
true,	correc	, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.	
		Signature of officer		Data	
Sig	n	•		Date	
Her	е	JENNIFER TURNER, PRESIDENT & CEO			
		Type or print name and title	T r	Ooto In F	DTIN
_		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid	l l	KEN YOUNGSTEAD KEN YOUNGSTEAD		2/20/22 self-employ	
-	arer	Firm's name KRAFTCPAS PLLC		Firm's EIN ▶	62-0713250
Use	Only	Firm's address 555 GREAT CIRCLE ROAD			E 040 E054
		NASHVILLE, TN 37228		Phone no. 61	5-242-7351
Mav	the IF	S discuss this return with the preparer shown above? See instructions			X Yes No

Form	1990 (2021) MANAGEMENT CORPORATION 58-1320590 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO PROVIDE FACILITIES, SERVICES, AND PROGRAMS OF THE HIGHEST QUALITY
	FOR THE GREATEST BENEFIT OF THE PEOPLE, INSTITUTIONS, AND COMMUNITIES
	OF THE STATE, AND TO TAKE A LEADERSHIP ROLE IN FOSTERING THE
	PERFORMING ARTS, ARTS EDUCATION, RESIDENT ART GROUPS AND OTHER ARTS
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations 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 \$16, 258, 009. including grants of \$) (Revenue \$15, 537, 511.
	TPAC ENTERED INTO AN AGREEMENT WITH THE STATE OF TENNESSEE & THE
	TENNESSEE PERFORMING ARTS FOUNDATION IN 1978. THE INITIAL AGREEMENT
	ESTABLISHED TPAC PRINCIPALLY FOR THE PURPOSE OF PRESENTING QUALITY ARTS
	ENTERTAINMENT & EDUCATION TO TENNESSEE RESIDENTS THROUGH THE OPERATION
	OF THE TENNESSEE PERFORMING ARTS CENTER. TPAC HAS ADMINISTRATIVE
	CONTROL OVER THE OPERATIONS AND FUNCTIONS OF THE FOUR THEATERS LOCATED
	IN TWO BUILDINGS IN DOWNTOWN NASHVILLE. IN ADDITION TO ITS ROLE WITH
	THE STATE OF TENNESSEE, TPAC OPERATES SEVERAL PROGRAM INITIATIVES
	INCLUDING SIX ARTS EDUCATION PROGRAMS, PUBLIC OFFERINGS SUCH AS A
	BROADWAY SERIES, CONCERTS, COMEDY SHOWS, ETC. ADDITIONALLY, TPAC RENTS
	ITS FACILITIES TO THREE PERFORMING ARTS RESIDENT COMPANIES - THE
	NASHVILLE OPERA ASSOCIATION, NASHVILLE BALLET, AND THE NASHVILLE
4b	(Code:) (Expenses \$157, 181. including grants of \$) (Revenue \$33, 192.)
	DURING THE 2022 FISCAL YEAR, THE SEASON FOR YOUNG PEOPLE (PREVIOUSLY
	CALLED HUMANITIES OUTREACH IN TENNESSEE) PRESENTED PROFESSIONAL
	PERFORMANCES OF THEATER, DANCE AND MUSIC FOR STUDENT AUDIENCES. THE
	SEASON INCLUDED LIVE PERFORMANCES AT TPAC AS WELL AS VIRTUAL
	PERFORMANCES AVAILABLE FOR STUDENTS TO VIEW REMOTELY FROM THEIR
	CLASSROOM. TPAC ALSO PROVIDED INTERACTIVE VIRTUAL WORKSHOPS AND ARTIST
	DISCUSSIONS WITH STUDENTS. DURING THE 2021-2022 ACADEMIC YEAR, 45,191
	STUDENTS AND TEACHERS FROM 429 SCHOOL GROUPS ATTENDED SEASON FOR YOUNG
	PEOPLE PERFORMANCES (68,946 STUDENTS AND TEACHERS FROM 810 SCHOOL
	GROUPS DURING THE 2020-2021 ACADEMIC YEAR).
	71 013
4c	(Code:) (Expenses \$ 71,013. including grants of \$) (Revenue \$) DISNEY MUSICALS IN SCHOOLS ("DMIS") DEVELOPS SUSTAINABLE MUSICAL
	THEATRE PROGRAMS IN PUBLIC ELEMENTARY AND MIDDLE SCHOOLS. THE PROGRAM
	PROVIDES SCHOOL FACULTY WITH THE TRAINING AND TOOLS NECESSARY TO
	SUPPORT STUDENT PERFORMANCE AND PRODUCTION AND TO EMPOWER THEM TO DO
	SO. PARTICIPATING SCHOOLS RECEIVE (AT NO COST) A PERFORMANCE LICENSE
	TO ANY DISNEY KIDS MUSICAL, SHOWKIT MATERIALS, INCLUDING DIRECTORS
	GUIDES, STUDENT SCRIPTS, ACCOMPANIMENT AND VOCAL CDS AND A CHOREOGRAPHY DVD, AND CROSS-CURRICULAR ACTIVITIES. SCHOOLS ALSO RECEIVE SUPPORT FROM
	TEAMS OF TWO TPAC TEACHING ARTISTS DURING AFTER-SCHOOL RESIDENCIES THAT RUN FOR 20 WEEKS. IN 2021-2022, FOLLOWING THE PANDEMIC PAUSE, DMIS
	TEACHING ARTIST SUPPORT RESUMED IN SIX SCHOOLS, INVOLVING 253 STUDENTS
	IN DAVIDSON, BEDFORD AND COFFEE COUNTIES. TWELVE ADDITIONAL "VETERAN"
40	Other program services (Describe on Schedule O.) (Expenses \$ 145,783 • including grants of \$) (Revenue \$ 25,440 •)
	(Expenses \$ 145,783 · including grants of \$) (Revenue \$ 25,440 ·) Total program service expenses ▶ 16,631,986 ·
40	Total program service expenses ► ±0,03±,300 •

09561220 781331 18961-18961

Part 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	Ť		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		
0	, ,	8		х
•	Schedule D, Part III	l °		-25
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			х
	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	ا ا		₹.
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	<u> </u>	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	"		
.5	·	19		х
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
20a	·	20a 20b		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21		,,		х
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		Λ

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	—
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			3,7
	Schedule K. If "No," go to line 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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 24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		_
2 5a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	254		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L. Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		 ^-
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? f	28c		x
29	"Yes," complete Schedule L, Part IV	29	Х	1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
-	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	<u> </u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
~~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			_ v
27	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		<u> </u>
37		37		X
38	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	31		1
00	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	4		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	1

Form **990** (2021)

Form 990 (2021)

MANAGEMENT CORPORATION Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) 58-1320590

Page 5

			Yes	No					
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 255								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.								
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Х						
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х						
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x					
h	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
		30							
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6-		X					
L	any contributions that were not tax deductible as charitable contributions?	6a							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	CL							
_	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).	_	v						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X						
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		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year			.,,					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
	sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12								
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								
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans								
С	Enter the amount of reserves on hand								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		Х					
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х					
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any								
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		L					
	If "Yes," complete Form 6069.								

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line oa, ob, or too below, describe the circumstances, processes, or changes on schedule of see instructions.			₹₹
Sec	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management			X
000	tion A. doverning body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 23		163	140
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 23			
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
_	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶TN			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.	,,		
	Own website X Another's website Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	JULIE GILLEN, CFO - 615-782-4033			
	505 DEADERICK STREET, 3RD FLOOR, NASHVILLE, TN 37243			
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MANAGEMENT CORPORATION

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<u> Page</u> **7**

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do		Pos	ition		ono	Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	rson i	than o	n an	compensation	compensation	amount of
	week		cer ar	id a di	irecto	r/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or dir	e e			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		96	suadı		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	ualtr	tional		yoldı	t con	_	1099-NEC)		organizations
	line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) JENNIFER TURNER	40.00									
PRESIDENT & CEO	0.30			Х				333,647.	0.	8,807.
(2) JAMES TIMM	40.00									
CHIEF STRATEGY OFFICER				Х				211,012.	0.	8,287.
(3) JULIE GILLEN	40.00									
CFO	1.00			Х				168,751.	0.	8,841.
(4) DENISE MINATOYA	40.00									
COO	1			Х				151,251.	0.	8,024.
(5) ROBERTA CIUFFO	40.00							1.10 = 60		
EVP FOR EDUCATION & COMMUN	40.00					Х		142,762.	0.	8,066
(6) DR. MARY CLARK (STARTD 9/2021)	40.00			,,				41 600	_	221
VP OF INFORMATION TECHNOLO (7) DR. PHILIP WENK	2.00			Х				41,600.	0.	331.
CHAIR	2.00	Х		х				0.	0.	0.
(8) STEVE MASON	0.50	-25		25				•	•	· ·
DIRECTOR		Х						0.	0.	0.
(9) RONALD L. CORBIN	0.50									
DIRECTOR	0.30	Х						0.	0.	0.
(10) JIM SCHMITZ	2.00									
VICE CHAIR		Х		Х				0.	0.	0 .
(11) CLAIRE W. TUCKER	0.50									
DIRECTOR		Х						0.	0.	0.
(12) TODD SHIPLEY	0.50									
DIRECTOR		Х						0.	0.	0.
(13) ANSEL L. DAVIS	0.50								_	
DIRECTOR	0.50	Х						0.	0.	0.
(14) EMANUEL J. EADS DIRECTOR	0.50	~							_	_
(15) ALEXIA POE	0.50	Х						0.	0.	0.
DIRECTOR	0.30	Х						0.	0.	0.
(16) MARTHA R. INGRAM	0.50	-23						"		
DIRECTOR	3.30	Х						0.	0.	0.
(17) ANDREW TAVI	0.50									
DIRECTOR		х						0.	0.	0.
132007 12-09-21										Form 990 (202

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Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do		Pos		l than o	nne	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	son i	s both	n an	compensation	compensation	amount of
	week (list any		Ler ar	lu a u	recid	i / ii us	iee)	from	from related	other
	hours for	ndividual trustee or director						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or c	stee			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	nstitutional trustee		ee/	Highest compensated employee		1099-NEC)	1000 NEO)	and related
	below	idual	ution	<u></u>	ey employee	sst co	er	,		organizations
	line)	Indiv	Instit	Officer	Key e	Highe	Former			
(18) J. REGINALD HILL	2.00									
TREASURER	0.30	Х		Х				0.	0.	0.
(19) SHEILA GIBSON	2.00									
SECRETARY		Х		X				0.	0.	0.
(20) TRACY KANE	2.00									
IMMEDIATE PAST CHAIR		Х		X				0.	0.	0.
(21) MELVIN MALONE	0.50									
DIRECTOR		Х						0.	0.	0.
(22) ROBERT M. HEBERT JR.	0.50									
DIRECTOR		Х						0.	0.	0.
(23) NATHAN POSS	0.50									
DIRECTOR		Х						0.	0.	0.
(24) RHONDA TAYLOR	0.50									
DIRECTOR		Х						0.	0.	0.
(25) GAIL WILLIAMS	0.50									
DIRECTOR		Х						0.	0.	0.
(26) KEVIN HARTLEY	0.50									
DIRECTOR		Х						0.	0.	0.
1b Subtotal							ightharpoons	1,049,023.	0.	42,356.
c Total from continuation sheets to Part VI	I, Section A						ightharpoons	0.	0.	0.
d Total (add lines 1b and 1c)							<u> </u>	1,049,023.	0.	42,356.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	ceived more than \$100,	000 of reportable	

compensation from the organization

Yes Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization Х 4 and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes." complete Schedule J for such person

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
BUENA VISTA THEATRICAL GROUP		
214 W 42ND STREET, NEW YORK, NY 10036	PRODUCER	2,151,333.
NASHVILLE BALLET		
3630 REDMON STREET, NASHVILLE, TN 37209	TENANT	792,592.
MEAN GIRLS NATIONAL TOUR, LLC		
630 9TH AVE, SUITE 1106, NEW YORK, NY 10036	PRODUCER	639,047.
AUTUMN SMILE US TOUR, LLC, 260 WEST 44TH		
STREET, 6TH FLOOR, NEW YORK, NY 10036	PRODUCER	542,654.
FISH WITH CHEESE, LIMITED PARTNERSHIP		
630 9TH AVE, SUITE 610, NEW YORK, NY 10036	PRODUCER	457,413.
2 Total number of independent contractors (including but not limited to those listed \$100,000 of compensation from the organization ▶ 23	l above) who received more than	

SEE PART VII, SECTION A CONTINUATION SHEETS

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Part VII Section A. Officers, Directors, Tru	ıstees, Key En	nplo	yee	s, aı	nd F	ligh	est (Compensated Employe	es (continued)	
(A) (B) (C) (D) (E) (F)										
Name and title	Average			Pos	ition	ı		Reportable	Reportable	Estimated
	hours	(cl	heck	all :	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week) yee		the	organizations	compensation
	(list any	rector				old me		organization	(W-2/1099-MISC)	from the
	hours for	ordi	e e			ated		(W-2/1099-MISC)		organization
	related	ustee	trust		ee	Suedic				and related
	organizations below	lual tr	tional		nploy	t con	_			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) VICTOR BERRIOS	0.50	_	⊢	\vdash	-	H	-			
DIRECTOR	0.50	Х						0.	0.	0.
(28) HARRY ALLEN	0.50	25						•	•	.
DIRECTOR	333	Х						0.	0.	0.
(29) ADAM SANSIVERI	0.50									<u> </u>
DIRECTOR		Х						0.	0.	0.
						_				
		ļ								
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

	11 411	Check if Schedule O contains a response of	or note to any line	e in this Part VIII			
		Crossic in Correctants Containing a response of	or moto to any min	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts st	1 a	Federated campaigns 1a					
irar oun	b	Membership dues 1b					
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events 1c	384,783.				
ar Z	d	Related organizations 1d	841,265.				
in's,	е	Government grants (contributions) 1e	7,347,092.				
ž Š	f	All other contributions, gifts, grants, and					
₽ E		similar amounts not included above 1f	2,384,701.				
dit	g	Noncash contributions included in lines 1a-1f	78,644.				
<u>ठ</u> ह	h	Total. Add lines 1a-1f		10,957,841.			
			Business Code	0.505.100	0.505.400		
<u>e</u>	2 a		711110	9,527,120.	9,527,120.		
er v	b		711110	2,613,538.	2,613,538.		
n S	С		711110	1,251,504.	1,251,504.		
Jrar Re	d						
Program Service Revenue	e						
_	•	All other program service revenue		13,392,162.			
	g	Total. Add lines 2a-2f Investment income (including dividends, interest		13,332,102.			
	3	other similar amounts)	<i>'</i>	515.			515.
	4	Income from investment of tax-exempt bond pr					
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a 384,442.	25,602.				
		Less: rental expenses 6b 0.	27,233.				
	С		-1,631.				
	d	Net rental income or (loss)		382,811.	384,442.	-1,631.	
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
	b	Less: cost or other basis					
ne		and sales expenses 7b 581,554.					
Revenue	С	Gain or (loss) 7c 581,554.					
		Net gain or (loss)		-581,554.			-581,554.
Other	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See					
		Part IV, line 188a	119,634.				
	b	Less: direct expenses 8b	205,584.				
	С	Net income or (loss) from fundraising events		-85,950.			-85,950.
	9 a	Gross income from gaming activities. See					
		Part IV, line 19 9a					
		Less: direct expenses 9b					
	С	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
		Less: cost of goods sold 10b	232,160.	006 400	006 400		
	С	Net income or (loss) from sales of inventory	Puoiness Ords	806,409.	806,409.		
ns	44	SALES TAX REBATE	Business Code 711110	737,838.	737,838.		
Jeo Le	11 a	OTHER INCOME	711110	275,292.	275,292.		
llar	b	THE THOUSE	,	213,232.	213,232.		
Miscellaneous Revenue	Q C	All other revenue					
Σ	u م	Total. Add lines 11a-11d		1,013,130.			
	12	Total revenue. See instructions		25,885,364.	15596143.	-1,631.	-666,989.
							GOO (0004)

Part IX | Statement of Functional Expenses

	Check if Schedule O contains a respons	se or note to any line in t	his Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,182,663.		1,115,200.	67,463
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	4 000 106	4 445 040	204 655	205 600
7	Other salaries and wages	4,890,196.	4,117,849.	384,657.	387,690
8	Pension plan accruals and contributions (include	100 500		100 500	
	section 401(k) and 403(b) employer contributions)	122,588.		122,588.	
9	Other employee benefits	615,209.	200 400	615,209.	25 02/
10	Payroll taxes	456,990.	320,429.	100,737.	35,824
11	Fees for services (nonemployees):				
a	Management	1 767		1 767	
b	Legal	1,767.		1,767.	
	Accounting	36,750. 15,300.		36,750. 15,300.	
	Lobbying	15,300.		15,300.	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	1,217,423.	165,799.	891,925.	159,699
40	column (A), amount, list line 11g expenses on Sch 0.)	1,444,590.	1,434,645.	1,000.	8,945
12	Advertising and promotion	797,643.	654,370.	119,682.	23,591
13	Office expenses	131,043.	034,3701	115,002.	23,331
14 15	Information technology				
15 16	Royalties				
10 17	Occupancy Travel	86,064.	41,955.	34,357.	9,752
ı, 18	Payments of travel or entertainment expenses	00,0010	11,7550	31/33/1	3,732
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	2,472.	54.	2,418.	
21	Payments to affiliates	_,		=,	
22	Depreciation, depletion, and amortization	733,757.	403,176.	308,845.	21,736
23	Insurance	182,889.	3,495.	179,394.	, , ,
24	Other expenses. Itemize expenses not covered	·	,	ĺ	
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	ARTIST FEES	6,119,867.	6,119,617.		250
b	CONTRACT LABOR	1,734,327.	1,732,852.		1,475
С	REPAIRS & MAINTENANCE	501,791.	359,406.	142,385.	
d	COVID TESTING	335,038.	335,038.		
е	All other expenses	1,308,781.	943,301.	158,952.	206,528
25	Total functional expenses. Add lines 1 through 24e	21,786,105.	16,631,986.	4,231,166.	922,953
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

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Form 990 (2021) Part X Balance Sheet

Pai	τx	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	4,960.	1	27,000
	2	Savings and temporary cash investments	9,960,589.	2	26,660,796
	3	Pledges and grants receivable, net	6,899,963.	3	3,913,623
	4	Accounts receivable, net	66,250.	4	660,598
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	22,698.	8	32,086
As	9	Prepaid expenses and deferred charges	257,754.	9	443,755
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 11,605,997.			
	b	Less: accumulated depreciation 10b 7,579,609.	4,335,074.	10c	4,026,388
	11	Investments - publicly traded securities	15,876.	11	13,344
	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	565,966.	15	4,481
	16	Total assets. Add lines 1 through 15 (must equal line 33)	22,129,130.	16	35,782,071
	17	Accounts payable and accrued expenses	826,424.	17	2,043,033
	18	Grants payable		18	
	19	Deferred revenue	6,427,588.	19	13,877,525
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			
iţie		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
Ĕ	23	Secured mortgages and notes payable to unrelated third parties	65,788.	23	39,522
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	155,302.	25	1,071,236
	26	Total liabilities. Add lines 17 through 25	7,475,102.	26	17,031,316
		Organizations that follow FASB ASC 958, check here ▶ X			
Ses		and complete lines 27, 28, 32, and 33.			
anc	27	Net assets without donor restrictions	14,462,278.	27	18,200,732
Bal	28	Net assets with donor restrictions	191,750.	28	550,023
nd		Organizations that do not follow FASB ASC 958, check here			
교		and complete lines 29 through 33.			
S O	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	14,654,028.	32	18,750,755
_	33	Total liabilities and net assets/fund balances	22,129,130.	33	35,782,071

Form **990** (2021)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,88.		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,78		
3	Revenue less expenses. Subtract line 2 from line 1	3		,09		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	14	<u>,65</u>		
5	Net unrealized gains (losses) on investments	5		- :	2,5	32.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	18	,75	0,7	55.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	b Were the organization's financial statements audited by an independent accountant?					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,	l			
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	l			1
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audi	t			1
	Act and OMB Circular A-133?			За	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require		:			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	Х	
				Form	990	(2021)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

TENNESSEE PERFORMING ARTS CENTER (TPAC)

OMB No. 1545-0047

2021
Open to Public

Inspection
Employer identification number

		MANA	GEMENT COR	PORATION				5	8-1320590
Pa	rt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.	
The	organ	ization is not a private found	ation because it is: (F	For lines 1 through 12, cl	neck only	one box.)			
1		A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	n 990).)				
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).		
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)	(iii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a col	llege or university owned	or operate	ed by a go	vernmental u	nit describe	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local government	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7		An organization that norma	lly receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from th	e general _l	public described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8	Щ	A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Part	t II.)				
9	Ш	An agricultural research org	ganization described	in section 170(b)(1)(A)(i	ix) operate	ed in conju	ınction with a	land-grant	college
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or
		university:							
10	X	An organization that norma							
		activities related to its exen		·					•
		income and unrelated busir		(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	after June 30, 1975.
		See section 509(a)(2). (Con							
11	\mathbb{H}	An organization organized a							
12	Ш	An organization organized a	•	•	-			•	•
		more publicly supported or	~						Sneck the box on
_		lines 12a through 12d that	* *					-	
а		■ Type I. A supporting organization	· · · · · · · · · · · · · · · · · · ·	•	•	-			
		the supported organization			majority o	it the direc	tors or trustee	es of the st	apporting
h		organization. You must o			ion with it	o oupports	d organization	a(a) by bay	ina
b		Type II. A supporting org control or management o	•				-		-
		organization(s). You mus			arrie persor	iis triat co	TILIOI OI IIIAIIA	je trie sup	Jorted
С		Type III functionally inte			in connect	ion with a	and functional	lv integrate	ad with
ŭ		its supported organization	-					iy iiitograte	od Withi,
d		Type III non-functionally		·				ted organi:	zation(s)
-		that is not functionally int						-	
		requirement (see instructi	-	•	•		-		
е		Check this box if the orga	•	•	•			I, Type III	
		functionally integrated, or							
f	Ente	er the number of supported o	organizations						
g	Prov	vide the following information	about the supporte	d organization(s).					
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	inization listed ng document?	(v) Amount of	•	(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see in	structions)	support (see instructions)
Tota	ıl								
. 5.6							·		I .

58-1320590 Page 2

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Tax revenues levied for the organ-						_	
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 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 shown on line 11,							
	column (f)							
6	Public support. Subtract line 5 from line 4.							
	etion B. Total Support							
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
	Amounts from line 4	(4) 23 11	(3) 2010	(6) 2515	(4) 2020	(6) 2521	(i) rotar	
	Gross income from interest,						-	
•	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources							
9	Net income from unrelated business							
Ŭ	activities, whether or not the							
	business is regularly carried on							
10	Other income. Do not include gain							
10	or loss from the sale of capital							
	assets (Explain in Part VI.)							
11	Total support. Add lines 7 through 10							
	Gross receipts from related activities,	etc (see instruction	ne)			12		
	First 5 years. If the Form 990 is for th	•		fourth or fifth tax		· ·		
	organization, check this box and stop				•	. , . ,		
Sec	ction C. Computation of Publi							
	Public support percentage for 2021 (li			column (f))		14	%	
	Public support percentage from 2020		•	.,,		15	%	
	33 1/3% support test - 2021. If the c					nore, check this box	and	
	stop here. The organization qualifies	as a publicly supp	orted organization				>	
b	33 1/3% support test - 2020. If the o	organization did no	ot check a box on I	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check thi	s box	
	and stop here. The organization quali							
17a	a 10% -facts-and-circumstances test - 2021. 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	s-and-circumstanc	es test, check this	box and stop he	ere. Explain in Part	VI how the organiz	ation	
	meets the facts-and-circumstances te	st. The organizatio	on qualifies as a pu	blicly supported o	organization		>	
b	10% -facts-and-circumstances test	-	•	* ''	-	17a, and line 15 is	10% or	
	more, and if the organization meets th	ie facts-and-circun	nstances test, che	ck this box and s	top here. Explain i	n Part VI how the		
	organization meets the facts-and-circu	ımstances test. Th	ne organization qua	alifies as a publicly	/ supported organi	zation	>	
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	b, check this box a	nd see instructions		
			·			-		

Schedule A (Form 990) 2021

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Calendar year (or fiscal year beginning in) 1 Giffs, grants, contributions, and membershy flees received. (Do not include any "unusual grants.") 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 3269336. 3850085. 3234989.11564387.10957841. 32876638. 32680463. 3229056. 118, 266. 14815173. 80680463. 32680463. 3229056. 118, 266. 14815173. 80680463. 32680463. 3229056. 118, 266. 14815173. 80680463. 3268087. 23250502. 26464045. 11682653. 25773014. 11355710. 32680463. 32260464. 3268087. 23250502. 26464045. 11682653. 25773014. 11355710. 3268087. 23250502. 26464045. 11682653. 25773014. 11355710. 3268087. 23250502. 26464045. 11682653. 25773014. 11355710. 3268087. 23250502. 26464045. 11682653. 25773014. 11355710. 32680887. 23250502. 26464045. 11682653. 25773014. 11355710. 3268087. 23250502. 26464045. 11682653. 25773014. 11355710. 3268087. 23250502. 26464045. 11682653. 25773014. 11355710. 32680887. 23250502. 26464045. 11682653. 25773014. 11355710. 32680887. 23250502. 26464045. 11682653. 25773014. 11355710. 32680887. 23250502. 26464045. 11682653. 25773014. 11355710.	qualify under the tests listed below, please complete Part II.) Section A. Public Support									
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandies sold or services performed, or facilities furnished in any activity that is related to the organization's tax exempt purpose 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 through 5 7 A Amounts included on lines 1, 2, and 3 received from disqualified persons that exceed the grant of the form of the flush disqualified persons that exceed the grant of \$5.00 to \$0.00 to \$0.										
membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services per formed, or facilities furnished in any activity that is related to the organizations bat exempt purpose of the property o		(a) 2017	(a) 2018	(c) 2019	(a) 2020	(e) 2021	(t) lotal			
Gross receipts from admissions, merchandles sold or services percentage and admissions, merchandles sold or services percentage and admissions, merchandles sold or services percentage and admissions are served by a constitute that are not an unrelated trade or business under section 513	· ·									
merchandise sold or services per formed, or facilities furnished in any activity that is related to the organization or stax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levided for the organization without charge 5 Total. Add lines 1 through 5 2 6386887. 23250502. 26464045. 11682653. 25773014. 11355710: 73 Amounts included on lines 1.2, and 3 received from disqualified persons but most the disqualified persons 5 Aromatis included on lines 1.2, and 3 received from disqualified persons 6 Aromatis included on lines 1.2, and 3 received from disqualified persons 6 Aromatis included on lines 1.2, and 3 received from disqualified persons 6 Aromatis included on lines 1.2, and 3 received from disqualified persons 6 Aromatis included on lines 1.2, and 3 received from disqualified persons 6 Aromatis included on lines 1.2, and 3 received from disqualified persons 6 Aromatis included on lines 1.2, and 3 received from disqualified persons 6 Aromatis included on lines 1.2, and 3 received from disqualified persons 6 Aromatis included on lines 1.2, and 5 received from disqualified persons 96,702. 113,720. 138,072. 103,191. 130,367. 582,052. 8 Public support. (several law fixed and 1.2) 96,702. 113,720. 138,072. 103,191. 130,367. 582,052. 8 Public support. (several law fixed and 1.2) 96,702. 113,720. 138,072. 103,191. 130,367. 582,052. 8 Public support. (several law fixed and 1.2) 96,702. 113,720. 138,072. 103,191. 130,367. 582,052. 8 Public support. (several law fixed and 1.2) 96,702. 113,720. 138,072. 103,191. 130,367. 582,052. 8 Public support fixed law fixed and 1.2) 12,720. 130,936. 54,628. 202. 174. 515. 1,135. 1,	· · · · · · · · · · · · · · · · · · ·	3269336.	3850085.	3234989.	11564387.	10957841.	32876638.			
are not an unrelated trade or business under section 513 1 Tax reverues levied for the organization's benefit and either paid to or expended on its behalf or the organization without charge 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5	2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the									
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 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons but exceed the greater of \$5.000 or 156 of the amount on line 13 for the year of Add lines 7a and 7b 96, 702. 113, 720. 138, 072. 103, 191. 130, 367. 582, 052. 2	are not an unrelated trade or bus-									
ization'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 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 1, 2, and 3 received from other than disqualified persons that exceed the gester of \$5,000 or 14 of the amount on line 15 for the year c Add lines 7a and 7b 8 Public support. (Spihartiles 7 time line 5) Section B. Total Support Calendar year (or fiscal year beginning in) 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 89 . 155 . 202 . 174 . 515 . 1,135 . 1,135 . b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 1 line 10b, whether or not the business is regularly carried on 1 line 10b, whether or not the business is regularly carried on 1 line 10b, whether or not the business is regularly carried on 1 line 10b, whether or not the business is regularly carried on 1 line 10b, whether or not the business is regularly carried on 1 line 10b, whether or not the business is regularly carried on 1 line 10b, whether or not the business is regularly carried on 1 line 10b, whether or not the business is regularly carried on 1 line 10b, whether or not the business is regularly carried on 1 line 10b, whether or not the business is regularly carried on 1 line 10b, whether or not the business is regularly carried on 1 line 10b, whether or not the business is regularly carried on 1 line 10b, whether or not the business is regularly carried on 1 line 10b, whether or not the business is regularly carried on 1 lin										
furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5	ization's benefit and either paid to									
7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from the than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year or 18 and 7b	furnished by a governmental unit to									
7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from the than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year or line 14 for the year or line 15 for line 15	6 Total. Add lines 1 through 5	26386887.	23250502.	26464045.	11682653.	25773014.	113557101			
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 96,702. 113,720. 138,072. 103,191. 130,367. 582,052. 8 Public support. (Subtract line 7c from line 6) 9 Amounts from line 6 26386887. 23250502. 26464045. 11682653. 25773014. 11355710. 9 Amounts from line 6 26386887. 23250502. 26464045. 11682653. 25773014. 11355710. 10a 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	7a Amounts included on lines 1, 2, and	06 500	112 700	120 050	102 101	120 265	F00 050			
Public support. (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ 9 Amounts from line 6 10a 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 c Add lines 10a and 10b 11 Net income from unrelated business activities not included on 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 VI.) 13 Total support. (Subtract line 7c from line 6) 14 First 5 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	b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the	96,702.	113,720.	138,072.	103,191.	130,367.				
Section B. Total Support Subtract line 75 from line 6. Section B. Total Support		96 702	113 720	138 072	103 101	130 367				
Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2017 (b) 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total 9 Amounts from line 6 10a 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 c Add lines 10a and 10b 11 Net income from unrelated business activities not included on 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 VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 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		90,702.	113,720.	130,072.	103,191.	130,307.				
Calendar year (or fiscal year beginning in) ▶ (a) 2017 (b) 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total 9 Amounts from line 6 26386887 · 23250502 · 26464045 · 11682653 · 25773014 · 113557103 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 89 · 155 · 202 · 174 · 515 · 1,135 b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 122,702 · 130,936 · 54,628 · 25,602 · 333,868 · 24,628 · 24,628 ·	Section B. Total Support						<u>µ12973049</u>			
9 Amounts from line 6 10a 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 c Add lines 10a and 10b 11 Net income from unrelated business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 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 26386887. 23250502. 26464045. 11682653. 25773014. 113557102 174. 515. 1,135. 174. 515. 1,135. 174. 515. 1,135. 175. 202. 174. 515. 1,135. 174. 25,602. 333,868. 174. 26,117. 335,003. 174. 2	Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total			
10a 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 c Add lines 10a and 10b 11 Net income from unrelated business activities not included on 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 VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 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			23250502.	26464045.	11682653.	25773014.	113557101			
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 12 Other income from unrelated business activities not included on 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 VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 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	10a Gross income from interest, dividends, payments received on securities loans, rents, royalties,									
c Add lines 10a and 10b 11 Net income from unrelated business activities not included on 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 VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 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	b Unrelated business taxable income									
11 Net income from unrelated business activities not included on 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 VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 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	acquired after June 30, 1975					25,602.	333,868.			
activities not included on 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 VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 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	c Add lines 10a and 10b	122,791.	131,091.	54,830.	174.	26,117.	335,003.			
or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 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	11 Net income from unrelated business activities not included on line 10b, whether or not the business is									
Total support. (Add lines 9, 10c, 11, and 12.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 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	or loss from the sale of capital	1/16080	1079522	133/1972	81 907	1013130	1925611			
14 First 5 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										
Check this box and stop here Section C. Computation of Public Support Percentage	••				•					
Section C. Computation of Public Support Percentage										
				column (f))		15	95.08 %			
16 Public support percentage from 2020 Schedule A, Part III, line 15										
				no 12 poluma (f)		47	28 %			
1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							4.0			
T							▶ 5			
b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and	9a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization \(\bigs\) \(\bigs\) \(\bigs\)									
line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization										

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
- 14		
4b		
40		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
5		
9b		
36		
9c		
90		
40-		
10a		
40.		
10b		
ile A (Forn	n 990)	2021

		3-13 <u>2</u> 039	U Pa	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	44.		
Sec	<u>detail in</u> Part VI. tion B. Type I Supporting Organizations	11c		
	tion B. Type i cupporting organizations		Voc	No
4	Did the governing hady, members of the governing hady, officers eating in their official conseity, or membership of and	or	Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	,		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	e 1		
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	•		
2	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations			l
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	<u> </u>		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ctions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	(see instruction		ı
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	01:		
•	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
	and to the supported organizations: If yes or two provide details in Fait VI.			

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

3b

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgar	nizations						
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.								
	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.								
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)					
_1	Net short-term capital gain	1							
_2	Recoveries of prior-year distributions	2							
3	Other gross income (see instructions)	3							
4	Add lines 1 through 3.	4							
_5	Depreciation and depletion	5							
6	Portion of operating expenses paid or incurred for production or								
	collection of gross income or for management, conservation, or								
	maintenance of property held for production of income (see instructions)	6							
7	Other expenses (see instructions)	7							
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8							
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)					
1	Aggregate fair market value of all non-exempt-use assets (see								
	instructions for short tax year or assets held for part of year):								
a	Average monthly value of securities	1a							
b	Average monthly cash balances	1b							
c	Fair market value of other non-exempt-use assets	1c							
d	Total (add lines 1a, 1b, and 1c)	1d							
е	Discount claimed for blockage or other factors								
	(explain in detail in Part VI):								
2	Acquisition indebtedness applicable to non-exempt-use assets	2							
_3	Subtract line 2 from line 1d.	3							
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,								
	see instructions).	4							
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5							
_6	Multiply line 5 by 0.035.	6							
7	Recoveries of prior-year distributions	7							
8	Minimum Asset Amount (add line 7 to line 6)	8							
Sect	ion C - Distributable Amount			Current Year					
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1							
2	Enter 0.85 of line 1.	2							
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3							
4	Enter greater of line 2 or line 3.	4							
5	Income tax imposed in prior year	5							
6	Distributable Amount. Subtract line 5 from line 4, unless subject to								
	emergency temporary reduction (see instructions).	6							
7	Check here if the current year is the organization's first as a non-functional	ly integrat	od Type III supporting orga	nization (soo					

Schedule A (Form 990) 2021

instructions).

Par	t V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	nizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes	1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2021 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount	<u> </u>	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2021			
a	From 2016			
<u>b</u>	From 2017			
<u> </u>	From 2018			
<u>d</u>	From 2019			
<u> e </u>	From 2020			
f	Total of lines 3a through 3e			
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2021 distributable amount			
<u>i_</u>	Carryover from 2016 not applied (see instructions)			
<u>_i</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2021 distributable amount			
	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019 Excess from 2020			
<u>u</u>	LV0033 110111 7070			

Schedule A (Form 990) 2021

e Excess from 2021

TENNESSEE PERFORMING ARTS CENTER (TPAC)

Schedule A	(Form 990) 2021 MANAGEMENT CORPORATION 58-1320590 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
	(Occ mondono.)

Schedule A (Form 990) 2021

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

•	Section 501(c)(4), (5), or (6) organizat	tions: Complete Part III.			
Nan		EE PERFORMING AR	TS CENTER (T	PAC) En	ployer identification number
	MANAGEM	ENT CORPORATION	504/)		58-1320590
Pa	art I-A Complete if the org	anization is exempt und	er section 501(c) (or is a section 527 of	organization.
2 3	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures gn activities		>	* \$
	·	anization is exempt und		·	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955		\$
	Enter the amount of any excise tax				
	If the organization incurred a sectio				
	Was a correction made?				Yes No
	o If "Yes," describe in Part IV. art I-C Complete if the org	anization is exempt und	er section 501(c)	except section 501	(c)(3)
	Enter the amount directly expended			-	· \$
	Enter the amount of the filing organ				Ψ
_	exempt function activities		· ·		· \$
3	Total exempt function expenditures				<u> </u>
Ū	line 17b		•		· \$
4	Did the filing organization file Form				
5					
	made payments. For each organiza				
	contributions received that were pro-	omptly and directly delivered to a	a separate political orga	anization, such as a separ	ate segregated fund or a
	political action committee (PAC). If	additional space is needed, prov	ride information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fron filing organization's funds. If none, enter -0	contributions received and

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

Schedule C (Form 990) 2021

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132041 11-03-21

Part II-A Complete if the org			npt under section	501(c)(3) and file		ection under
section 501(h)).						
	7			Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and share			• •			
		ed box A a ying Expe	nd "limited control" pro	visions apply.	(a) Filing	(b) Affiliated group
(The term "expend	ditures" m	eans amou	unts paid or incurred.)		organization's totals	totals
1a Total lobbying expenditures to influ	uence publ	ic opinion (grassroots lobbying)			
b Total lobbying expenditures to influ	uence a leg	islative boo	dy (direct lobbying)			
c Total lobbying expenditures (add li	nes 1a and	l 1b)				
d Other exempt purpose expenditure						
e Total exempt purpose expenditure	•					
f Lobbying nontaxable amount. Ente	er the amou	unt from the	e following table in bot	n columns.		
If the amount on line 1e, column (a) o	or (b) is:		bying nontaxable am	ount is:		
Not over \$500,000			the amount on line 1e.			
Over \$500,000 but not over \$1,000			00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,5			00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,	000,000		00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000		\$1,000,	000.			
g Grassroots nontaxable amount (en	ter 25% of	line 1f)				
h Subtract line 1g from line 1a. If zer	o or less, e	nter -0-				
i Subtract line 1f from line 1c. If zero	o or less, er	nter -0				
j If there is an amount other than ze	ro on eithe	r line 1h or	line 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this	year?					Yes No
(Some organizations t	hat made a	section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all c	of the five columns b	elow.
	Lobb	ying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount (150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

Schedule C (Form 990) 2021

Schedule C (Form 990) 2021

MANAGEMENT CORPORATION Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

r each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(b)	
the lobbying activity.	No	Amo	unt	
During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?		X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
c Media advertisements?		X		
d Mailings to members, legislators, or the public?		X		
e Publications, or published or broadcast statements?		X		
f Grants to other organizations for lobbying purposes?		X		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	. X			30
i Other activities?		Х		
j Total. Add lines 1c through 1i				30
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
art III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5), or sec	tion	
501(c)(6).				
			Yes	No
Were substantially all (90% or more) dues received nondeductible by members?				
		1		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from	the prior year	2 ? 3		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	the prior year	2 ? 3 5), or sec		0 :-
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	the prior year	2 ? 3 5), or sec		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	the prior year on 501(c)(d	? 3 5), or sec (b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members	the prior year on 501(c)(d	? 3 5), or sec (b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	the prior year on 501(c)(d	? 3 5), or sec (b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of policexpenses for which the section 527(f) tax was paid).	the prior year on 501(c)(designation in the second in the	2 ? 3 5), or sec (b) Part I		3, is
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

TENNESSEE PERFORMING ARTS CENTER (TPAC) MANAGEMENT CORPORATION

Employer identification number 58-1320590

Schedule D (Form 990) 2021

Par	organizations Maintaining Donor Adviser organization answered "Yes" on Form 990, Part IV, lin		or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor o	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that appl <u>y).</u>	
	Preservation of land for public use (for example, recrea		a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic stru		
	Number of conservation easements included in (c) acquired a	· ·	
	listed in the National Register		
	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the	organization during the tax
	year ▶		
	Number of states where property subject to conservation eas		
	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation easements during the year
_	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservat	tion easements during the year
•	> \$		I-)/4)/D/C)
	Does each conservation easement reported on line 2(d) abov	· · ·	
	In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footr	•	
	organization's accounting for conservation easements.	5	ents that describes the
Par		f Art. Historical Treasures. or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95		nd balance sheet works
	of art, historical treasures, or other similar assets held for put	•	
	service, provide in Part XIII the text of the footnote to its finar	,	•
	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	•	
	provide the following amounts relating to these items:	,	•
	(i) Revenue included on Form 990, Part VIII, line 1		• \$
			L 4
	If the organization received or held works of art, historical treations		
	the following amounts required to be reported under FASB A		•
	Revenue included on Form 990, Part VIII, line 1	_	> \$
			. .

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

	t III Organizations Maintaining Col				asures o	r Other			2000		ige 🗲
	•								(CONTIN	uea)	
3	Using the organization's acquisition, accession,	, and other record	s, cneck	any of the	rollowing that	make sigi	nificant us	e or its			
	collection items (check all that apply):		. $ egin{array}{c} $								
a	Public exhibition	d			hange progra						
b	Scholarly research	е	• 🗀	Other							
С	Preservation for future generations										
4	Provide a description of the organization's colle							in Part	XIII.		
5	During the year, did the organization solicit or re							_	_		1
D :	to be sold to raise funds rather than to be main								_ Yes		No
Par	t IV Escrow and Custodial Arrange		ete if the	organizatio	n answered	"Yes" on F	orm 990,	Part IV,	line 9, or		
	reported an amount on Form 990, Part X										
1a	Is the organization an agent, trustee, custodian								7		1
	on Form 990, Part X?							L	」Yes		No
b	If "Yes," explain the arrangement in Part XIII and	d complete the fol	llowing t	able:							
									Amount		
	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2 a	Did the organization include an amount on Form	n 990, Part X, line	21, for 6	escrow or cu	ustodial acco	unt liability	/?	L	Yes		No
	If "Yes," explain the arrangement in Part XIII. Ch										
Par	Complete ii ti								1		
		(a) Current year	(b) P	rior year	(c) Two yea	rs back (d) Three ye	ars back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curren	t year end balance	e (line 1g	j, column (a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Term endowment ▶%										
	The percentages on lines 2a, 2b, and 2c should	l equal 100%.									
За	Are there endowment funds not in the possessi	on of the organiza	ation tha	t are held ar	nd administer	ed for the	organizat	ion	_		
	by:									Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizatio	ns listed as requir	ed on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the or										
Par	t VI Land, Buildings, and Equipmer	nt.									
	Complete if the organization answered "	Yes" on Form 990), Part IV	, line 11a. S	See Form 990	, Part X, lir	ne 10.				
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Acc	cumulated	ı	(d) Bool	c value	9
		basis (investn	nent)	basis	(other)	depr	eciation				
1a	Land										
b	Buildings										
С	Leasehold improvements				5,137.		90,16	9.	1,834	1,96	58.
d	Equipment				4,934.	$\overline{4}$, $\overline{4}$	89,44	0.	1,95		
<u>e</u>	Other			23	5,926.					5,92	
	. Add lines 1a through 1e. (Column (d) must equi	al Form 990. Part	X. colun	nn (B). line 1	0c.)			▶ □	4,026	$5, \overline{38}$	88.

Schedule D (Form 990) 2021

Schedule D	(Form 990) 2021	MANAGEMENT	CORPORATION	5	8-1320590 Page 3
Part VII	Investments - 0	Other Securities.			
	Complete if the orga	anization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Descrip	tion of security or categ	Ory (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
1) Financia	al derivatives				
(2) Closely	held equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (I	o) must equal Form 990.	Part X, col. (B) line 12.)			
Part VIII	J	Program Related.	F 000 B+ IV I'	14 - O - Farm 000 Bart V Fra 10	
				11c. See Form 990, Part X, line 13.	
	(a) Description of i	investment	(b) Book value	(c) Method of valuation: Cost or e	end-oi-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6) (7)					
(8)					
(9)					
	a) must equal Form 990	, Part X, col. (B) line 13.)			
Part IX	Other Assets.	,	•		
	Complete if the orga	anization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
		(a)	Description		(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colu	mn (b) must equal Fo	rm 990, Part X, col. (B) lin	e 15.)		<u> </u>
Part X	Other Liabilities		F 000 D+ IV I'	14 141 O Faura 200 Bart V. Para (25
	· · ·		on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	
<u>1. </u>	` '	escription of liability			(b) Book value
	eral income taxes	OMITED			1 071 226
	POSITS AND	OTHER			1,071,236.
(3)					
(4)					+
(5)					
<u>(6)</u> (7)					
(8)					
(0)					

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ... 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2021

4c

,786,105

	dule D (Form 990) 2021 MANAGEMENT CORPORATION			20-	1320390 Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Statement	ts With	Revenue per Ret	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	27,260,752.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-2,532.		
b	Donated services and use of facilities	2b	912,943.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	910,411.
3	Subtract line 2e from line 1			3	26,350,341.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	-464,977.		
С	Add lines 4a and 4b			4c	-464,977.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	25,885,364.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statemer	nts With	Expenses per R	letur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	23,164,025.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	912,943.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	464,977.		
е	Add lines 2a through 2d			2e	1,377,920.
3	Subtract line 2e from line 1			3	21,786,105.
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			

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18. Part XIII Supplemental Information.

b Other (Describe in Part XIII.) c Add lines 4a and 4b

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

MANAGEMENT PERFORMS AN EVALUATION OF ALL INCOME TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE COURSE OF PREPARING THE ORGANIZATION'S INCOME TAX RETURNS TO DETERMINE WHETHER THE INCOME TAX POSITIONS MEET A "MORE LIKELY THAN NOT" STANDARD OF BEING SUSTAINED UNDER EXAMINATION BY THE APPLICABLE TAXING AUTHORITIES. MANAGEMENT HAS PERFORMED ITS EVALUATION OF ALL INCOME TAX POSITIONS TAKEN ON ALL OPEN INCOME TAX RETURNS AND HAS DETERMINED THAT THERE WERE NO POSITIONS TAKEN THAT DO NOT MEET THE "MORE LIKELY THAN NOT" STANDARD. ACCORDINGLY, THERE ARE NO PROVISIONS FOR INCOME TAXES, PENALTIES OR INTEREST RECEIVABLE OR PAYABLE RELATING TO UNCERTAIN INCOME TAX POSITIONS IN THE ACCOMPANYING FINANCIAL STATEMENTS.

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 MANAGEMENT CORPORATION	58-1320590 Page 5
Part XIII Supplemental Information (continued)	
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
DIRECT SPECIAL EVENT EXPENSES	-205,584.
UNRELATED BUSINESS INCOME - RENTAL EXPENSES	-27,233.
CONCESSION SUPPLIES EXPENSE	-232,160.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-464,977.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
DIRECT SPECIAL EVENT EXPENSES	205,584.
UNRELATED BUSINESS INCOME - RENTAL EXPENSES	
CONCESSION SUPPLIES EXPENSE	232,160.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	

SCHEDULE G (Form 990)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

TENNESSEE PERFORMING ARTS CENTER (TPAC)

Employer identification number

	ENI CORPORATION				30-1320	390	
Fundraising Activities. required to complete this part	Complete if the organization answet.	red "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not	
Indicate whether the organization raised funds through any of the following activities. Check all that apply. a							
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundr have c or cor contrib	ustody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization	
		Yes	No				
Fotal			>				
3 List all states in which the organizatio or licensing.	n is registered or licensed to solicit o	ontrib	utions	or has been notified	it is exempt from re	gistration	

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

Schedule G (Form 990) 2021

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		of fundraising event contributions and gro	oss income on Form 990-	EZ, lines 1 and 6b. List e	vents with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events
			TPAC GALA	FAMILY DAY	NONE	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
ne			(GVGHE LYPS)	(GVGIII LYPO)	(total Hambol)	
Revenue	1	Gross receipts	412,390.	92,027.		504,417.
	2	Less: Contributions	314,566.	70,217.		384,783.
	3	Gross income (line 1 minus line 2)	97,824.	21,810.		119,634.
	4	Cash prizes				
"	5	Noncash prizes				
penses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	65,393.	12,625.		78,018.
	Ω	Entertainment	32 430.	9,185.		41,615.
	9	Entertainment Other direct expenses	32,430. 71,954.	13,997.		85,951.
		Direct expense summary. Add lines 4 through		2373371	•	205,584.
		Net income summary. Subtract line 10 from lin			_	-85,950.
Pa	rt I	II Gaming. Complete if the organization a				<u> </u>
		\$15,000 on Form 990-EZ, line 6a.				
ine			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue						() ()
R	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
		Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)		>	
	_	Nat assissing in a second of the second of t	forms the and the second of the			
	8	Net gaming income summary. Subtract line 7	rrom line 1, column (d))	L
0	En	ter the state(s) in which the organization condu	ets gaming activities:			
		the organization licensed to conduct gaming ac	_			Yes No
		No," explain:				res No
J	"	ito, oxpiani.				
	_					
		ere any of the organization's gaming licenses re			ear?	Yes No
b	If "	Yes," explain:				
	_					

Schedule G (Form 990) 2021

132082 10-21-21

TENNESSEE PERFORMING ARTS CENTER (TPAC)

Sch	edule G (Form 990) 2021 MANAGEMENT CORPORATION	58-1.	3205	<u> 90</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?			′ es	☐ No
	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?			es	No
12	Indicate the percentage of gaming activity conducted in:				
			400		0/
	The organization's facility		13a		<u>%</u>
	An outside facility		13b		<u>%</u>
14	Enter 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?		<u> </u>	⁄es	☐ No
b	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amou	nt			
	of gaming revenue retained by the third party \$\bigs\\$				
_	: If "Yes," enter name and address of the third party:				
٠	in Tes, entername and address of the tilld party.				
	Name				
	Address ►				
16	Gaming manager information:				
10	Garning 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?			⁄es	☐ No
h	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the			
	·	uic			
Da	organization's own exempt activities during the tax year \(\) \$ Trick Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v): a	and Dood	III - P	- 0 0	N- 40-
ı a	The state and explanations required by the art is the contract to the state of the	.na Part	III, IINE	es 9, s	D, IUD,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				

TENNESSEE PERFORMING ARTS CENTER (TPAC) 58-1320590 Page 4 MANAGEMENT CORPORATION Schedule G (Form 990) Part IV Supplemental Information (continued)

Schedule G (Form 990)

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

➤ Go to www.irs.gov/Form990 for instructions and the latest information.

2021

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

TENNESSEE PERFORMING ARTS CENTER (TPAC) MANAGEMENT CORPORATION

Employer identification number 58-1320590

Pa	art I Questions Regarding Compensation			
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee X Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year did any never listed an Form 000 Part VIII Section A line to with respect to the filing			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
•		4a		х
a h	Receive a severance payment or change-of-control payment? Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	Х	
c	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
Ĭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	10		
	The state of the s			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		37	
_	not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		<u> </u>

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2021

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred benefits		(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) JENNIFER TURNER	(i)	305,647.	28,000.	0.	0.	8,807.	342,454.	0.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JAMES TIMM	(i)	202,910.	8,102.	0.	0.	8,287.	219,299.	0.
CHIEF STRATEGY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JULIE GILLEN	(i)	162,237.	6,514.	0.	0.	8,841.	177,592.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) DENISE MINATOYA	(i)	145,707.	5,544.	0.	0.	8,024.	159,275.	0.
C00	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ROBERTA CIUFFO	(i)	137,124.	5,638.	0.	0.	8,066.	150,828.	0.
EVP FOR EDUCATION & COMMUN	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 4B:
IN 2019, TENNESSEE PERFORMING ARTS CENTER MANAGEMENT CORPORATION ENTERED
INTO AN EMPLOYMENT AGREEMENT WITH JENNIFER TURNER, CEO. INCLUDED IN THIS
AGREEMENT WAS A PAYMENT TO A SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN THAT
INCLUDES DEFERRED COMPENSATION. THERE WERE NO PAYMENTS TO THE PLAN DURING
2021.
PART I, LINE 7:
THE BOARD APPROVED A 3% BONUS FOR STAFF, EXCLUDING TPAC'S PRESIDENT & CEO,
WHO RECEIVED A CONTRACTUAL BONUS IN NOVEMBER FOR HER WORK IN THE FISCAL
YEAR ENDED 6/30/21.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

TENNESSEE PERFORMING ARTS CENTER (TPAC) MANAGEMENT CORPORATION

Employer identification number 58-1320590

Pal	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or litems contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) d of determinir ontribution am	•	s	
1	Art - Works of art								
2	Art - Works of art Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8									
9		X	1	3,599.					
	Securities - Publicly traded Securities - Closely held stock			3,333.					
10									
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								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ► (DONATED LIQUO)	X	2		COST OF 1				
26	Other (MISCELLANEOUS)	X	1	3,187.	COST OF 1	DONATED	PF	ROP	
27	Other								
28	Other ()								
29	Number of Forms 8283 received by the organiz for which the organization completed Form 828	,	,						
		, ,	9				Yes	No	
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it				
	must hold for at least three years from the date								
	exempt purposes for the entire holding period?		,			30a		Х	
b	If "Yes," describe the arrangement in Part II.								
31									
	Does the organization hire or use third parties of	-	-	•		31			
-	contributions?		•			32a	x		
b									
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	for which column (a) is chec	ked,				
-	describe in Part II.	(-, -0.	71	(-y 5/104	,				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2021

is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
SCHEDULE M, PART I, COLUMN (B):
PART I COLUMN (B) IS REPORTED USING THE NUMBER OF CONTRIBUTORS.
SCHEDULE M, LINE 32B:
GIFTS OF STOCK ARE TO BE TRANSFERRED INTO AN ESTABLISHED BROKERAGE
ACCOUNT OPERATED BY TPAC. IT IS THE POLICY OF TPAC TO IMMEDIATELY
LIQUIDATE ALL GIFTS OF STOCK/SECURITIES.

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

TENNESSEE PERFORMING ARTS CENTER (TPAC) MANAGEMENT CORPORATION

Employer identification number 58-1320590

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: ORGANIZATIONS.

PROGRAM SERVICE ACCOMPLISHMENTS: FORM 990, PART III, LINE 4A, ALL THREE OF WHICH ARE NON-PROFIT ORGANIZATIONS. REPERTORY THEATRE, TPAC ALSO RENTS ITS FACILITIES TO OUTSIDE PROMOTERS FOR EVENTS IN WHICH AND TO THE STATE OF TENNESSEE (WITH RENT THE PROMOTERS ARE AT RISK, TO SUPPORT PUBLIC PROGRAMMING, WAIVED) FOR STATE EVENTS. TPAC OPERATES ITS OWN TICKETING SERVICES. TPAC SUPPORTS ITS MISSION OF PROVIDING ARTS, CULTURE AND EDUCATION FOR THE COMMUNITY BY FUNDRAISING FROM INDIVIDUALS, CORPORATIONS, GOVERNMENT AND FOUNDATIONS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: FACULTY TEAMS COMPLETED MUSICALS WITH 627 STUDENTS BASED ON THE DMIS PROGRAM MODEL UNDER THEIR OWN DIRECTION. (IN 2020-21 WHILE THE SCHOOL TPAC TEACHING ARTISTS LED 36 STORY ADVENTURE PROGRAM WAS PAUSED, THEATRE WORKSHOPS ON-LINE FOR FAMILIES. 1003 CHILDREN AND FAMILIES ZOOMED IN FROM 11 STATES TO MOVE AND SING ALONG WITH TEACHING ARTISTS IN DISNEY STORIES.)

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: TPAC'S WOLF TRAP EARLY LEARNING THROUGH THE ARTS PROGRAM BRINGS ARTS-BASED CLASSROOM RESIDENCIES TO PRESCHOOLS AND HEAD START CENTERS. TEACHING ARTISTS AND TEACHERS USE ARTS INSTRUCTION TO TARGET EARLY CHILDHOOD DEVELOPMENTAL GOALS AND HELP CHILDREN LEARN. IN 2020-21 AND CONTINUING IN 2022 THE NUMBER OF IN-PERSON RESIDENCY VISITS WITH LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Name of the organization TENNESSEE PERFORMING ARTS CENTER (TPAC)

MANAGEMENT CORPORATION

Employer identification number 58-1320590

TEACHING ARTISTS WAS REDUCED OR MODIFIED FOR VIRTUAL OR OUTDOOR

INTERACTION TO RESPOND TO THE LEARNING REQUIREMENTS OF EACH INDIVIDUAL

CENTER DURING THE PANDEMIC. A TOTAL OF 941 CHILDREN AND TEACHERS

PARTICIPATED IN WOLF TRAP IN 2021-2022 AT NO CHARGE TO THEM (1,077

CHILDREN AND TEACHERS IN 2020-2021).

EXPENSES \$ 70,177. INCLUDING GRANTS OF \$ 0. REVENUE \$ 2,750.

INSIDEOUT IS FOR ADULTS WHO WANT TO GROW IN THEIR KNOWLEDGE AND

ENJOYMENT OF THE PERFORMING ARTS. EVENTS AT TPAC, IN COMMUNITY

LOCATIONS, AND THROUGH VIRTUAL OPTIONS PROVIDED OPPORTUNITIES FOR AUDIENCES OF ALL AGES TO INTERACT WITH THE PERFORMING ARTS. 4,132

INDIVIDUALS VIEWED AND PARTICIPATED IN TPAC'S EDUCATION AND COMMUNITY

ENGAGEMENT PUBLIC PROGRAMMING IN 2021-22. VIRTUAL AND IN-PERSON PANEL

DISCUSSIONS AND PRESENTATIONS HIGHLIGHTED LOCAL ARTS AND COMMUNITY

GROUPS; CLASSES EXPLORED MUSICAL THEATER, DANCE AND ACTING, AND SIX

WORKSHOPS FOR CHILDREN INCLUDING A BI-LINGUAL SESSION WERE A FEW OF THE

LEARNING AND ENGAGEMENT EXPERIENCES TPAC PROVIDED FOR THE PUBLIC.

(4,685 INDIVIDUALS PARTICIPATED IN INSIDEOUT DURING 2020-2021).

EXPENSES \$ 24,418. INCLUDING GRANTS OF \$ 0. REVENUE \$ 2,970.

ARTS INTEGRATION PROGRAMS IN SCHOOLS (WORKING TITLE) WAS LAUNCHED IN

2021 FOLLOWING THE DISCONTINUATION OF THE ARTSMART PROGRAM. GOING

FORWARD, THIS INITIATIVE WILL SUPPORT MULTI-YEAR PARTNERSHIPS PLANNED

WITH A LIMITED NUMBER OF SCHOOLS IN A WHOLE-SCHOOL MODEL. TWO SCHOOLS

ENGAGED IN WHOLE-SCHOOL PARTNERSHIPS IN 2021-22. A TOTAL OF 337

STUDENTS AND TEACHERS AT WARNER ELEMENTARY PARTICIPATED IN ARTS

INTEGRATED RESIDENCIES AND PROFESSIONAL DEVELOPMENT PROVIDED BY TPAC IN

2021-2022 (250 STUDENTS AND TEACHERS AT WARNER ELEMENTARY PARTICIPATED

Name of the organization TENNESSEE PERFORMING ARTS CENTER (TPAC) Employer identification number 58-1320590

IN 2020-2021). TPAC ALSO FACILITATED A YEAR-LONG PROJECT WITH I.T.

CRESWELL ARTS MAGNET MIDDLE SCHOOL INVOLVING 298 MIDDLE SCHOOL STUDENTS

AND TEACHERS IN THE CREATION OF AN ORIGINAL DOCUMENTARY ABOUT THEIR

SCHOOL EXPERIENCE, INSPIRED BY TPAC'S DOCUMENTARY ABOUT THE FISK

JUBILEE SINGERS. THE SCHOOL FILM WAS RESEARCHED, WRITTEN AND FILMED BY

CRESWELL STUDENTS UNDER THE DIRECTION OF A TPAC TEACHING ARTIST AND

PREMIERED AT A FILM SCREENING ATTENDED BY MORE THAN 200 FRIENDS AND

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FAMILIES IN THE I.T. CRESWELL COMMUNITY.

THE SPOTLIGHT AWARDS CELEBRATES, SUPPORTS, AND GROWS THE ARTISTRY AND CAPACITY OF HIGH SCHOOL MUSICAL THEATRE PROGRAMS IN TENNESSEE. THROUGH THE PROGRAM, HIGH SCHOOL THEATRE STUDENTS AND TEACHERS PARTICIPATE IN WORKSHOPS AND DEVELOPMENT OPPORTUNITIES WITH THEATRE PROFESSIONALS, AND THEIR SCHOOL MUSICALS ARE EVALUATED BY A DIVERSE PANEL OF ADJUDICATORS. THE PROGRAM CULMINATES IN MAY WHEN EXEMPLARY WORK IS RECOGNIZED WITH THE SPOTLIGHT AWARDS CEREMONY AT TPAC, WHERE THE TOP CONTENDERS FOR "OUTSTANDING MUSICAL" PERFORM AND HONORS ARE PRESENTED IN A VARIETY OF CATEGORIES, INCLUDING "OUTSTANDING LEAD ACTOR" AND "OUTSTANDING LEAD ACTRESS." THE RECIPIENTS OF THESE TWO AWARDS THEN MOVE ON TO NATIONAL CONSIDERATION FOR THE JIMMY AWARDS IN NEW YORK. IN 2021-2022, 27 HIGH SCHOOLS AND 1,594 STUDENTS PARTICIPATED IN THE PROGRAM, WITH MORE THAN 1,800 ATTENDING THE LIVE SPOTLIGHT AWARDS CEREMONY AT TPAC. (IN 2020-21, 45 HIGH SCHOOLS AND MORE THAN 500 STUDENTS PARTICIPATED IN SPOTLIGHT VIRTUAL ACTIVITIES PROVIDED BY TPAC.) EXPENSES \$ 51,188. INCLUDING GRANTS OF \$ 0. REVENUE \$ 19,720.

FORM 990, PART VI, SECTION A, LINE 7A:

Name of the organization TENNESSEE PERFORMING ARTS CENTER (TPAC)

MANAGEMENT CORPORATION

Employer identification number 58-1320590

THE FOLLOWING ORGANIZATIONS AND INDIVIDUALS HAVE THE ABILITY TO APPOINT

TPAC'S GOVERNING BODY:

THE TENNESSEE PERFORMING ARTS FOUNDATION - 8 POSITIONS

THE TENNESSEE GOVERNOR - 5 POSITIONS

TENNESSEE'S EDUCATION COMMISSIONER - 1 POSITION

THE TENNESSEE ARTS COMMISSION - 5 POSITIONS

THE TENNESSEE PERFORMING ARTS CENTER MANAGEMENT CORPORATION - 6 POSITIONS

FORM 990, PART VI, SECTION B, LINE 11B:

UPON COMPLETION OF FORM 990 BY THE EXTERNAL AUDITORS FOR TENNESSEE

PERFORMING ARTS CENTER MANAGEMENT CORPORATION, IT WILL BE REVIEWED BY

EITHER THE CFO OR DESIGNATED FINANCE DEPARTMENT STAFF MEMBERS AND THEN A

REVIEW MEETING IS HELD THAT INCLUDES THE TPAC CEO, CFO, KEY FINANCE

DEPARTMENT STAFF, EXTERNAL AUDIT TAX PREPARER, AUDIT COMMITTEE CHAIR AND/OR

BOARD TREASURER. APPROPRIATE CHANGES MAY BE MADE AT ANY POINT IN THE

REVIEW PROCESS PRIOR TO FILING FORM 990 WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

PRIOR TO MARCH, 2020, COPIES OF THE CONFLICT OF INTEREST AND

CONFIDENTIALITY POLICIES FOR THE BOARD OF DIRECTORS WERE DISTRIBUTED TO NEW

BOARD MEMBERS DURING AN IN-PERSON ORIENTATION AND INCLUDED IN THE PRINTED

MATERIALS PROVIDED AT EACH IN-PERSON BOARD MEETING WITH VIRTUAL AS AN

OPTION. EACH FISCAL YEAR, ALL BOARD OF DIRECTORS WERE ASKED TO SIGN THE

CONFLICT OF INTEREST POLICY, AND THOSE PAPER FORMS WERE KEPT ON FILE. IN

RESPONSE TO COVID-19, TPAC BEGAN HOLDING VIRTUAL BOARD MEETINGS IN MARCH OF

2020. FROM THAT POINT FORWARD, THE POLICIES WERE DISTRIBUTED ELECTRONICALLY

VIA EMAIL. DIRECTORS WERE ASKED TO ELECTRONICALLY ACCEPT THE POLICIES AND

Name of the organization TENNESSEE PERFORMING ARTS CENTER (TPAC)

MANAGEMENT CORPORATION

Employer identification number 58-1320590

TO DISCLOSE ANY CONFLICTS OF INTEREST VIA A DIGITAL SURVEY. DIGITAL COPIES
OF THESE SURVEY RESPONSES ARE KEPT ON FILE.

FORM 990, PART VI, SECTION B, LINE 15:

TPAC'S BOARD OF DIRECTORS HIRES THE ORGANIZATION'S CEO AND NEGOTIATES

SUBSEQUENT EMPLOYMENT CONTRACTS. THE BOARD CHAIRMAN'S PROCESS FOR

DETERMINING COMPENSATION FOR THE CEO IS BASED ON MULTIPLE CRITERIA:

HISTORICAL SALARY RANGE FOR THE POSITION, SALARY SURVEY INFORMATION

COMPILED ANNUALLY BY A RESEARCH FIRM FOR OUR SPECIFIC INDUSTRY (PACC
PEFORMING ARTS CENTER CONSORTIUM) AND AVAILABLE BUDGETARY RESTRAINTS.

OTHER OFFICER COMPENSATION IS HANDLED SIMILARLY BY THE CEO. ALSO, TPAC HAS

BEGUN TO USE SEARCH FIRMS WHEN RECRUITING FOR EXECUTIVE LEVEL POSITIONS;

THE FIRMS HAVE BEEN HELPFUL WHEN DETERMINING, CONFIRMING OR RE-ASSESSING

SALARY RANGES.

FORM 990, PART VI, SECTION C, LINE 19:

TPAC'S GOVERNING DOCUMENTS ARE AVAILABLE FOR PUBLIC INSPECTION. PURSUANT

TO TENN CODE ANN SECTION 8-44-107, THE ACTIVITIES OF THE BOARD ARE OPEN TO

THE PUBLIC AS IF IT WERE A GOVERNMENTAL AGENCY. SEE BELOW:

8-44-107. BOARD OF DIRECTORS OF PERFORMING ARTS CENTER MANAGEMENT

CORPORATION - THE BOARD OF DIRECTORS OF THE TENNESSEE PERFORMING ARTS

CENTER MANAGEMENT CORPORATION SHALL BE SUBJECT TO, AND SHALL IN ALL

RESPECTS COMPLY WITH, ALL OF THE PROVISIONS MADE APPLICABLE TO GOVERNING

BODIES BY THIS CHAPTER [OPEN MEETINGS LAW].

TPAC'S AUDITED FINANCIAL STATEMENTS ARE AVAILABLE AT WWW.GIVINGMATTERS.ORG.

Schedule O (Form 990) 2021	Page 2
Name of the organization TENNESSEE PERFORMING ARTS CENTER (TPAC) MANAGEMENT CORPORATION	Employer identification number 58-1320590
TPAC'S CONFLICT OF INTEREST POLICY IS NOT MADE AVAILABLE TO	O THE PUBLIC.
FORM 990, PART XII, LINE 2C	
THE OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS AND	THE
SELECTION PROCESS OF AN INDEPENDENT ACCOUNTANT THAT AUDITE	D THE
FINANCIAL STATEMENTS HAS NOT CHANGED FROM THE PRIOR YEAR.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

• Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Open to Public Inspection ► Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service Name of the organization

TENNESSEE PERFORMING ARTS CENTER (TPAC) MANAGEMENT CORPORATION

Employer identification number 58-1320590

OMB No. 1545-0047

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controll entity

organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	1	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
TENNESSEE PERFORMING ARTS FOUNDATION -	ENDOWMENT MGMT TO PROVIDE						
23-7272205, 505 DEADERICK STREET, NASHVILLE,	INCOME TO HELP DEFRAY THE						
TN 37243	OPERATING COSTS OF TPAC	TENNESSEE	501(C)(3)	509(A)(3)	N/A		X
NASHVILLE INSTITUTE FOR THE ARTS -							
58-1387884, 505 DEADERICK STREET, NASHVILLE,							
TN 37243		TENNESSEE	501(C)(3)	509(A)(3)	N/A		X

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

Schedule R (Form 990) 2021

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling Predominant income Share of total Share of Diographics Code		Diegrapartianata		Code V-UBI	General c	Percentage		
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No	<u> </u>
	1										
	1										
	1										
	1										
	1			1					1		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		tion b)(13) rolled tity?
		country						Yes	No

1a

Yes No

Schedule R (Form 990) 2021

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)				. 1b		X			
c Gift, grant, or capital contribution from related organization(s)					Х				
d Loans or loan guarantees to or for related organization(s)						X			
e Loans or loan guarantees by related organization(s)						Х			
f Dividends from related organization(s)						X			
g Sale of assets to related organization(s)				1g		X			
h Purchase of assets from related organization(s)				1h		X			
i Exchange of assets with related organization(s)									
j Lease of facilities, equipment, or other assets to related organization(s)				. 1j		X			
k Lease of facilities, equipment, or other assets from related organization(s)				1k		X			
Performance of services or membership or fundraising solicitations for related organization(s)									
m Performance of services or membership or fundraising solicitations by related organization(s)									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
· · · · · · · · · · · · · · · · · ·					Х				
p Reimbursement paid to related organization(s) for expenses				. 1p		X			
q Reimbursement paid by related organization(s) for expenses						X			
r Other transfer of cash or property to related organization(s)				. 1r		X			
s Other transfer of cash or property from related organization(s)						X			
2 If the answer to any of the above is "Yes," see the instructions for information on w	ho must complete th	is line, including covered	relationships and transaction thresholds.						
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	involved					
(1) TENNESSEE PERFORMING ARTS FOUNDATION	С	841,265.	CASH						
(2) TENNESSEE PERFORMING ARTS FOUNDATION	0	0.							
(3)									
(4)									
(5)									
(6)									
132163 11-17-21			Schedu	le R (For	n 990)	2021			

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionat allocatio	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) Percentage ownership

Schedule R (Form 990) 2021