Form 990

OMB No. 1545-0047

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)

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

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	For the	e 2014 calen	idar year, or tax year be	eginning 7/01	, 2014, and	d ending	6/30		0015
В		applicable:	C	3 1701	, 2014, 411	a enaing		ran lalamat	, 2015 fication number
	Add	dress change	NASHVILLE YOUT	H FOR CHRIST, IN	_				
	Nan	ne change	P. O. BOX 3300	27	C			0984	
		al return	NASHVILLE, TN				E Teleph		
	\vdash	return/terminated	III - MUSIC MEDICAL WINES				(61	5) 32	20-7050
	H	ended return					Y.		
	-		F Name and address of prin	cipal officer: LAURA FOR	F.W A N	Transmi	G Gross r		
	Ш	and the postering	Same As C Above		CDIMIN		ls this a group retur		
ī	Tax-ex	kempt status	X 501(c)(3) 501(c)		40477-1711	l son	Are all subordinates If 'No,' attach a list.	(see inst	ructions) Yes No
J			W.NASHVILLEYFC.		4947(a)(1) or	527			
K		of organization:			1.		Group exemption no	2000000	
1	art I	Summar	Section Sectio	Association Other	L Year	of formation:	Ms	state of le	gal domicile:
1.00	1 B	Briefly descri	be the organization's m	iccion or most significant	A STATE OF THE STA				
152	, ,	TOWARD R	PINCINC MIDDLE	ission or most significant a	ctivities: PROG	RAMS AN	D SPECIAL	EVE	NTS GEARED
Governance	7	TO HILLIAD D	TITIOTING LITUDIE	SCHOOL AND HITT	VI HOLDI ZIIII	THE VIEW IN	INACHITT		CIID T CIII A AID
'n	1 7	COLLEGE	STUDENTS.	CAL CHRISTIAN CH	OKCH, INCLU	DDING PE	COGRAMS FO	R TE	EN_MOMS_AND
Ve	2 0	heck this bo	if the organiza	ition discontinued its opera	ations or disposed	of more th	250/ of its		
Ö	3 N	lumber of vo	ting members of the go	verning body (Part VI. line	(la)			net ass	
م در	4 N	lumber of inc	dependent voting memb	ers of the governing body	(Part VI, line 1b)			4	12
Activities &	5 T	otal number	of individuals employed	in calendar year 2014 (P.	art V. line 2a)			5	<u>12</u>
÷.	6 1	otal number	of volunteers (estimate	if necessary)				6	0
Ă		otal unrelate	d business revenue from	m Part VIII, column (C), lir	ne 12			7a	0.
-	b N	let unrelated	business taxable incom	ne from Form 990-T, line 3	4			7b	0.
	8 C	ontributions	and areats (Dort VIII II				Prior Year		Current Year
re	9 P	rogram con	and grants (Part VIII, III	ne 1h)					162,745.
Revenue	10 In	vestment in	ce revenue (Part VIII, II	ine 2g)					***
Re	11 0	ther revenue	(Part VIII, column (A)	(A), lines 3, 4, and 7d) lines 5, 6d, 8c, 9c, 10c, a					20.
	12 To	otal revenue	- add lines 8 through	11 (must equal Part VIII, c	na rre)				35,751.
_	13 G	rants and sir	milar amounts paid (Par	rt IX, column (A), lines 1-3	Olumn (A), line 12	2)			198,516.
	14 B	enefits naid	to or for members (Pari	t IX, column (A), line 4))				9,174.
	15 S	alaries othe	r compensation omploy	yee benefits (Part IX, colur	(0) 1: = 10				120
es	16 - D								121,569.
ens	100 11			(, column (A), line 11e)					
Expenses	b lo		ing expenses (Part IX, o						
-	17 0	ther expense	es (Part IX, column (A),	lines 11a-11d, 11f-24e)					39,634.
	18 To	otal expense	s. Add lines 13-17 (mus	st equal Part IX, column (A	A), line 25)				170,377.
	19 R	evenue less	expenses. Subtract line	18 from line 12					28,139.
ts or		A				Beg	inning of Current	Year	End of Year
Net Assets Fund Baland	20 To	otal assets (F	Part X, line 16)				87,5	38.	116,086.
Mot	21 To					17000100000000000000000000000000000000	1,4	97.	1,906.
_	3 7/10 / ASS			line 21 from line 20			86,04	41.	114,180.
		Signature							
Unde	er penalties	of perjury, I dec	lare that I have examined this re	eturn, including accompanying sche on all information of which preparer	edules and statements.	and to the best	of my knowledge a	nd belief,	it is true, correct, and
32/0/		I.	/ (other than officer) is based o	an information of which preparer	nas any knowledge.				
٥.		Signature	e of officer						
Sig	jn						Date		
He	re		A FOREMAN print name and title.			Tr	easurer		
_		· · · · · · · · · · · · · · · · · · ·	eparer's name	Propagar's signature	Dete			1	
_		the second second	Vacabout Seattle	Preparer's signature	Date		Check		IN
Pai		BRAD SI		BRAD SMITH, CPA	A		self-employed	P	00361015
	eparer e Only	Firm's name	SMILEY CPAS	TODODO DE COM				c 1505-0	
03	Comy	Firm's addres		ESBORO RD STE 100)		Firm's EIN ►	46-4	1555241
N.A	AL - 150	L III		N 37067-5078	LOW MANDE WAS A		Phone no.	(615)	794-8881
May	the IRS	alscuss this	return with the prepare	er shown above? (see inst	ructions)				X Yes No

For	m 990 (2014) NASHVILLE YOUTH FOR CHRIST, INC	62-0984130	Page 2
Pa	rt III Statement of Program Service Accomplishments	02 0301130	r age Z
	Check if Schedule O contains a response or note to any line in this Part III		П
	Briefly describe the organization's mission: PROGRAMS AND SPECIAL EVENTS GEARED TOWARD BRINGING MIDDLE SCHOOL STUDENTS IN NASHVILLE TO CHRIST AND CONNECTING THEM TO A LOCAL INCLUDING PROCRAMS FOR THEM MOMES AND CONNECTING THEM TO A LOCAL	OL AND HIGH SCHOO	L
	INCLUDING PROGRAMS FOR IEEN MOMS AND COLLEGE STUDENTS.		/
2	Did the organization undertake any significant program services during the year which were not listed on the Form 990 or 990-EZ?	prior Yes	X No
-	res, describe these new services on Schedule Q.	and a t-saturday transfer to	A NO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program If 'Yes,' describe these changes on Schedule O.		X No
4	Describe the organization's program service accomplishments for each of its three largest program services Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocat and revenue, if any, for each program service reported.	ervices, as measured by exions to others, the total exp	penses. penses,
4 a	(Code:) (Expenses \$165, 305. including grants of \$ 9.174.)	(Revenue \$	
	Nashville Youth for Christ: through its Campus Life Teen Momes	City Tife3)
	Juvenile Justice ministries, reaches young people everywhere w	orking together:	
	the focal church and other likeminded partners to raise in life	long followers of	<u> </u>
	Desus who lead by their godliness in lifestyle, devotion to the	Word of Cod and	
	prayer, passion for sharing the love of Christ, and commitment	to social involve	ement.
4 b	(Code:) (Expenses \$ including grants of \$)	(Revenue \$)
		CAL SACRET SERVICE SER	
Tours of			
4 c	(Code:) (Expenses \$ including grants of \$)	(Revenue \$)
12			
3			
- 3			
9			
9			
2.5			
2			
	01-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$		
Sec. 22.11.100	Total program service expenses ► 165,305.)	
ВАА	TEEA0102L 05/28/14	Form 99	90 (2014)

792	V5644 5 9 76 90 97 95		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A.	. 1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3		3	1	Х
4		4		X
5		5		X
6		6		X
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.			
8		7		Х
-	complete Schedule D, Part III.	8		Х
9	for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.	10		
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a	Х	
	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.	11 Ь		Х
}	c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
j	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.	11 d		Х
1	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
1	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	11 f		Х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII.	12a		Х
	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
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
ŀ	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		X
	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,' complete Schedule G, Part III.	19		X
20 a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H			X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2014) NASHVILLE YOUTH FOR CHRIST, INC
Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		X
22	2 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.			
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	22		X
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of	23		X
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		Х
	c Did the organization maintain an excrew account other than a refunding occrew at any live of the control of t	240		
	any tax-exempt bonds?	24c		
	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I.	25b		Х
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes', complete Schedule L, Part II.	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
9	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
9	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	25,000 miles and 420,000 miles and contributions: If it is, complete Schedule ivi	29		X
30	contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
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 L	33		Х
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
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	X
Ł	olf '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		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38		Х
BAA		Form	990 (2	2014)

Form 990 (2014) NASHVILLE YOUTH FOR CHRIST, INC Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V....

	1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	h Foliar the number of Forms W 20 included to 11.	0	(T-)	88
	c Did the organization comply with backup withholding rules for reachthill	2		
		1 c	EIEES	No. of the last
	2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	5		
	bit at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to a file (see instruction)	-	Elem	71
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	MESSAL.	Х
	the start filed a Form 990-1 for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		**
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account?	4 a		Х
	bit les, either the name of the foreign country:	1000		770
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR)			
	a was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	bild any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c if Yes, to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the averaged	-		
	by a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Χ
702	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).	UB	574	
	a 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?	7 a		X
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	-	Λ
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		\dashv	**
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 c		X
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			V
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 e		X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 f	\dashv	Λ
	h If the organization received a contribution of care hoats airplanes or other vehicles and the	7 g		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	7 h		
	organization have excess business holdings at any time during the year?	8	300-31	
9	Sponsoring organizations maintaining donor advised funds.			= - 1
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a	MINES N	
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b	_	
10	Section 501(c)(7) organizations. Enter:	4		25 %
	a 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 10b			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b		320	100
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
9	a 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.			No.
1	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	299		
	Enter the amount of recovers on hand	N. P.		
	Enter the amount of reserves on hand		THE P	
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
AA		14b	20 /	
- 45	TEEAUTOSE 05/28/14	Form 9	WIII (')	TIMA

Form 990 (2014) NASHVILLE YOUTH FOR CHRIST, INC 62-0984130 Page 6 Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI..... Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 12 **b** Enter the number of voting members included in line 1a, above, who are independent 12 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 X Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 5 Did the organization become aware during the year of a significant diversion of the organization's assets?..... X 5 6 Did the organization have members or stockholders?.... 6 X 7 a 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? 7 a 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?.... 7 b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... 8 a X b Each committee with authority to act on behalf of the governing body?..... X 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 in Schedule O..... X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Did the organization have local chapters, branches, or affiliates? X b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?.... 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 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 c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done 12 c 13 Did the organization have a written whistleblower policy?..... 13 X 14 Did the organization have a written document retention and destruction policy?.... X 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? a The organization's CEO, Executive Director, or top management official..... X 15 a **b** Other officers or key employees of the organization..... X 15h If 'Yes' to line 15a or 15b, describe the process in 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?.... X 16a 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?.... 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website Own website Upon request Other (explain in Schedule O)

the public during the tax year.

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to

See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records: LAURA FOREMAN 1210 BRADLEY DRIVE FRANKLIN TN 37069 615-591-6957

Form 990	(2014)	NASHVILLE	YOUTH	FOR	CHPICT	TNC	
	(/	TATACTIA TUTT	TOUTH	L CIL	INKINI	1 1/11	

62-0984130

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title		(C)								
		tha	Position (do not check more than one box, unless persor is both an officer and a director/trustee)				on	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JOHN FOREMAN	0									
Board Member	0	X						0.	0.	0.
(2) SAM BUMPUS	0	1	à.							<u> </u>
Chairman	0	X						0.	0.	0.
(3) BETTY BORTH	0									0.
Board Member	0	X						0.	0.	0.
(4) RON SHEPHERD	40									
Executive Direc	0	X						27,900.	0.	0.
(5) TODD SNEED	00			-						
Secretary	0	X						0.	0.	0.
(6) STUART BROWN	00									
Board Member	0	X						0.	0.	0.
_(7)_KEN_HARMS	0									
Board Member	0	Χ						0.	0.	0.
_(8) JOE_HUTTS	0	200,000								
BOARD MEMBER	0	X						0.	0.	0.
(9) ROBERT OGLE	0	3032								
Vice-Chair	0	X		_				0.	0.	0.
(10) SCOTT SCHUMPERT	0									
BOARD MEMBER	0	X	-	_		_	4	0.	0.	0.
(11) CRAIG STANLEY	0									
Board Member	0		-	Х		_	+	0.	0.	0.
(12) LAURA FOREMAN	0			,,					Ltex	
Treasurer (13)	0	-	-	X			+	0.	0.	0.
(13)										
(14)										
DAA		_	-	_	_	_	_			

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' compléte 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 and related organizations greater than \$150,000? If 'Yes' complete Schedule J for

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
2	Total number of independent contractors (including but not limited to those lis	ted above) who received more than	

\$100,000 of compensation from the organization ▶ 0

X

X

X

4

5

Form 990 (2014) NASHVILLE YOUTH FOR CHRIST, INC 62-0984130 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII..... (A) (B) (D) Total revenue Related or Unrelated Revenue exempt business excluded from tax function revenue under sections revenue 512-514 ts, Grants Amounts 1 a Federated campaigns 1 a **b** Membership dues..... 1 b c Fundraising events..... Gifts, 1 c 37,450 d Related organizations..... Similar 1 d e Government grants (contributions) Contributions, 1e f All other contributions, gifts, grants, and similar amounts not included above . . . annudhamman. and Other 1 f 125,295 g Noncash contributions included in lines 1a-1f: h Total. Add lines 1a-1f 162,745 Program Service Revenue **Business Code** f All other program service revenue... g Total. Add lines 2a-2f Investment income (including dividends, interest and other similar amounts)..... 20 20 Income from investment of tax-exempt bond proceeds... Royalties..... (i) Real (ii) Personal 6a Gross rents...... b Less: rental expenses c Rental income or (loss) . . . d Net rental income or (loss). (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss)...... d Net gain or (loss) 8 a Gross income from fundraising events Revenue (not including.. \$_ 37,450. of contributions reported on line 1c). See Part IV, line 18..... a 61,993 b Less: direct expenses..... b 26,242 c Net income or (loss) from fundraising events..... 35,751 7,549. 9 a Gross income from gaming activities. See Part IV, line 19..... a b Less: direct expenses b c Net income or (loss) from gaming activities..... 10a Gross sales of inventory, less returns and allowances..... a b Less: cost of goods sold..... b c Net income or (loss) from sales of inventory Miscellaneous Revenue

BAA

11a

C

d All other revenue..... e Total. Add lines 11a-11d

Total revenue. See instructions.....

TEEA0109L 11/13/14

20

Form 990 (2014)

7,549

0

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do 6b,	Check if Schedule O contains a r not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	9,174.		general expenses	expenses
2		3,114.	9,174.		
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		4		
5	Compensation of current officers, directors, trustees, and key employees	27 222	artiti		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	27,900.	27,900.	0.	0
7	Other selection and weeks	0.	0.	0.	0
8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	85,030.	85,030.	8	
9	Other employee benefits		many Was all		
10	Payroll taxes	8,639.	8,639.		
11	Fees for services (non-employees):	0,033.	0,039.		
ě	Management				
ŀ	Legal		Demost?		
	: Accounting	845.	845.		
(Lobbying	4	043.		
6	Professional fundraising services. See Part IV, line 17	N 90 E	The Assessment of the Control of the		
	Investment management fees	A Va			
	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	4			
13	Office expenses	710			
14	Information technology.	748.	748.		
15	Royalties.	The second secon			
16	Occupancy				
17	Travel	2 600			
	Payments of travel or entertainment expenses for any federal, state, or local public officials.	3,690.	3,690.		
19 20	Conferences, conventions, and meetings				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,796.	3,796.		
	Insurance	5,049.	5,049.		
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.).	3,015.	3,049.		
а	CITY_LIFE	11,409.	11,409.		
	CAMPUS LIFE	4,968.	4,968.		
	CHARTER FEES	3,408.	-,,,,,,,,	3,408.	
	TRAINING	2,832.	2,832.	07100.	
	All other expenses	2,889.	1,225.	1,664.	
25	Total functional expenses. Add lines 1 through 24e	170,377.	165,305.	5,072.	0.
	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				
AA	SOP 98-2 (ASC 958-720)	TEEA0110L 05/28		- I	Form 990 (2014)

Part X Balance Sheet

		Check if Schedule O contains a response or note	to any i	ine in this Part X	**************************************		
_					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			83,681	. 1	95,870
	2	Savings and temporary cash investments		2	93,870		
	3	Pleages and grants receivable, net		3			
	4	Accounts receivable, net		4			
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated e Part II of Schedule L	1				
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), persons described in section 4958(c)(employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete		N P N N N N N N N N N N N N N N N N N N	annomile the	5	
15	7	Notes and loans receivable, net	CI AMBIT	or concount E		6	
Assets	8	Inventories for sale or use				7	
AS	9	Prepaid expenses and deferred charges				8	
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10.a	36,724.	W The second	9	
	ŀ	Less: accumulated depreciation	10 h	16,508.	2 255	1000	
	11	Investments - publicly traded securities	100	10,508.	3,857.	100000	20,216.
	12	Investments - other securities. See Part IV, line 11				11	
	13	Investments - program-related. See Part IV, line 11.		W		12	
	14	Intangible assets.	***************************************		13		
	15	Other assets. See Part IV, line 11.		14			
	16	Total assets. Add lines 1 through 15 (must equal line	3/1)	*******************	05 500	15	CARROL MARIE AND A CONTROL OF THE CO
	17	Accounts payable and accrued expenses	**************	87,538.	16	116,086.	
	18	Grants payable			17		
- 1	19	Deferred revenue		211111111		19	
-	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability. Complete Part IV	√ of Sc	hedule D		21	
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	ra dira	atom to the		22	
-	23	Secured mortgages and notes payable to unrelated this	ird part	ies		23	
	24		parties			24	
	25	Other liabilities (including federal income tax, payables and other liabilities not included on lines 17-24). Comp	to rela	ated third parties.		24	
	26	and other liabilities not included on lines 17-24). Comp	olete Pa	art X of Schedule D.	1,497.	25	1,906.
+	20	Total liabilities. Add lines 17 through 25			1,497.	26	1,906.
3		Organizations that follow SFAS 117 (ASC 958), check her lines 27 through 29, and lines 33 and 34.	e ►	and complete			
2	27	Unrestricted net assets					
a	28	Temporarily restricted net assets.				27	
n	29	Permanently restricted net assets.				28	
	23	Organizations that do not follow SFAS 117 (ASC 958), che				29	
Assets or Fund Balances		and complete lines 30 through 34.	ck nere	X			
0	30	Capital stock or trust principal, or current funds		Vision of the State of the Stat	20		
Set		Paid-in or capital surplus, or land, building, or equipme		30			
45	32	Retained earnings, endowment, accumulated income, or		06 044	31	11. 12.	
Net		Total net assets or fund balances			86,041.	32	114,180.
Ž		Total liabilities and net assets/fund balances			86,041.	33	114,180.
AA		The second ratio building second ratio			87,538.	34	116,086. Form 990 (2014)

For	m 990 (2014) NASHVILLE YOUTH FOR CHRIST, INC rt XI Reconciliation of Net Assets	2-0984130)	Р	age 1	
1 0	Check if Schedule O contains a response or note to an illustration					
1	Check if Schedule O contains a response or note to any line in this Part XI.				[
2	Total revenue (must equal Part VIII, column (A), line 12). Total expenses (must equal Part IX, column (A), line 35)	1	1	98,	516	
3	Total expenses (must equal Part IX, column (A), line 25). Revenue less expenses. Subtract line 2 from line 1	2	1/4	.70,:		
4	Net assets or fund balances at beginning of year (must asset Dark V. III. as	3		28,	139	
5	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4		86,0		
6	Net unrealized gains (losses) on investments. Donated services and use of facilities	. 5				
7	Donated services and use of facilities. Investment expenses	. 6				
8	Investment expenses Prior period adjustments	7				
9	Other changes in net assets or fund balances (explain in Schedule O).	. 8				
10	Net assets or fund balances at end of year Combine lines 3 through 0 (must as at Day V				0.	
Da		. 10	1	14,1	180	
Pal	Financial Statements and Reporting	P.				
	Check if Schedule O contains a response or note to any line in this Part XII					
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			Yes		
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X	
	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 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, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	rate	2 b		X	
·	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud review, or compilation of its financial statements and selection of an independent accountant?	it, 	2 c			
020	in Schedule O.			是规模		
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a		X	
	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required at or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	udit	3 b			
BAA			-	200 (201.4	

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