

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2003

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

Open to Public InspectionDepartment of the Treasury
Internal Revenue Service

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

A For the 2003 calendar year, or tax year beginning July 1, 2003, and ending June 30, 2004**B Check if applicable:**

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization**Project For Neighborhood Aftercare, Inc.**Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1130 8th Avenue South, Suite 117City or town, state or country, and ZIP + 4
Nashville, TN 37203**D Employer identification number****62 : 1710735****E Telephone number****(615) 312-7040****F Accounting method:**

- ☐ Cash ☒ Accrual
☐ Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

H and I are not applicable to section 527 organizations.**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes," enter number of affiliates ▶**H(c)** Are all affiliates included? ☐ Yes ☐ No

(If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No**I Group Exemption Number ▶****G Website:** ▶ N/A**J Organization type** (check only one) ▶ ☒ 501(c) (3) (insert no) ☐ 4947(a)(1) or ☐ 527**K Check here** ▶ ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.****M Check** ▶ ☐ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).**L Gross receipts** Add lines 6b, 8b, 9b, and 10b to line 12 ▶**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 18 of the instructions.)

1	Contributions, gifts, grants, and similar amounts received				
a	Direct public support	1a		12,840	
b	Indirect public support	1b			
c	Government contributions (grants)	1c		762,827	
d	Total (add lines 1a through 1c) (cash \$ noncash \$)	1d			775,667
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2			21,740
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4			1,110
5	Dividends and interest from securities	5			
6a	Gross rents	6a			
b	Less: rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe ▶)	7			
8a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
b	Less: cost or other basis and sales expenses	8a			
c	Gain or (loss) (attach schedule)	8b		1,578	
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c		(1,578)	
8d					(1,578)
9	Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>				
a	Gross revenue (not including \$ of contributions reported on line 1a)	9a			
b	Less: direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11			1,655
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			798,594
13	Program services (from line 44, column (B))	13			705,041
14	Management and general (from line 44, column (C))	14			48,086
15	Fundraising (from line 44, column (D))	15			14,370
16	Payments to affiliates (attach schedule)	16			
17	Total expenses (add lines 16 and 44, column (A))	17			767,497
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18			31,097
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19			184,945
20	Other changes in net assets or fund balances (attach explanation)	20			
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21			216,042

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Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule).	24			
25	Compensation of officers, directors, etc.	25			
26	Other salaries and wages	26	577,384	540,464	27,620
27	Pension plan contributions	27	2,600	1,339	936
28	Other employee benefits	28	6,032	3,106	2,172
29	Payroll taxes	29	44,170	41,357	2,105
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33	33,189	31,720	1,102
34	Telephone	34	12,724	9,161	2,672
35	Postage and shipping	35			
36	Occupancy	36	5,280	2,745	1,901
37	Equipment rental and maintenance	37			
38	Printing and publications	38	680	605	56
39	Travel	39	2,349	1,757	447
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule)	42	8,757	4,554	3,152
43	Other expenses not covered above (itemize): a Stmt. 1	43a	74,332	68,233	5,923
b	_____	43b			
c	_____	43c			
d	_____	43d			
e	_____	43e			
44	Total functional expenses (add lines 22 through 43). <i>Organizations completing columns (B)-(D), carry these totals to lines 13-15.</i>	44	767,497	705,041	48,086

Joint Costs. Check ☐ if you are following SOP 98-2.Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;

(iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)

What is the organization's primary exempt purpose? <input type="checkbox"/> See Statement 2		Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)
a	After-School Program in Metro Schools located in Nashville & Davidson County for children in kindergarten through eighth grade.	
	(Grants and allocations \$ _____)	705,041
b	_____	
	(Grants and allocations \$ _____)	
c	_____	
	(Grants and allocations \$ _____)	
d	_____	
	(Grants and allocations \$ _____)	
e	Other program services (attach schedule) (Grants and allocations \$ _____)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services).	705,041

Part IV Balance Sheets (See page 25 of the instructions.)

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

		(A) Beginning of year		(B) End of year
Assets	45 Cash—non-interest-bearing	161,158	45	142,401
	46 Savings and temporary cash investments		46	
	47a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b	47c	
	48a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	51,176
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes and loans receivable (attach schedule).	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	4,335	53	3,447
	54 Investments—securities (attach schedule). <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55a Investments—land, buildings, and equipment: basis	55a		
	b Less accumulated depreciation (attach schedule).	55b	55c	
56 Investments—other (attach schedule)		56		
57a Land, buildings, and equipment: basis	57a	43,142		
b Less: accumulated depreciation (attach schedule).	57b	(21,454)		
58 Other assets (describe <input type="checkbox"/> Deposit)	441	58	400	
59 Total assets (add lines 45 through 58) (must equal line 74)	187,475	59	219,112	
Liabilities	60 Accounts payable and accrued expenses	704	60	999
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule).		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe <input type="checkbox"/> See Statement 4 - Attached)	1,826	65	2,071
66 Total liabilities (add lines 60 through 65)	2,530	66	3,070	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	184,945	67	215,102
	68 Temporarily restricted		68	340
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21).	184,945	73	216,042
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	187,475	74	219,112

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

Part IV-A **Reconciliation of Revenue per Audited
Financial Statements with Revenue per
Return (See page 27 of the instructions.)**

a	Total revenue, gains, and other support per audited financial statements . . . ▶	a	855,956
b	Amounts included on line a but not on line 12, Form 990.		
	(1) Net unrealized gains on investments . . . \$		
	(2) Donated services and use of facilities \$ 6,600		
	(3) Recoveries of prior year grants . . . \$		
	(4) Other (specify) See Statement 5		
	Attached \$ 49,184		
	Add amounts on lines (1) through (4) ▶	b	55,784
c	Line a minus line b . . . ▶	c	800,172
d	Amounts included on line 12, Form 990 but not on line a :		
	(1) Investment expenses not included on line 6b, Form 990 . . . \$		
	(2) Other (specify): Loss on disposal of fixed assets \$ (1,578)		
	Add amounts on lines (1) and (2) ▶	d	(1,578)
e	Total revenue per line 12, Form 990 (line c plus line d) . . . ▶	e	798,594

Part IV-B	Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
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a	Total expenses and losses per audited financial statements . . . ▶	a	823,281
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities \$ 6,600		
(2)	Prior year adjustments reported on line 20, Form 990 \$ _____		
(3)	Losses reported on line 20, Form 990 . . . \$ _____		
(4)	Other (specify) See Statement 7 Attached \$ 49,184		
	Add amounts on lines (1) through (4) ▶	b	55,784
c	Line a minus line b ▶	c	767,497
d	Amounts included on line 17, Form 990 but not on line a :		
(1)	Investment expenses not included on line 6b, Form 990. . . \$ _____		
(2)	Other (specify): _____ _____ \$ _____		
	Add amounts on lines (1) and (2) ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d)	e	767,497

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 of the instructions.)

[illegible]

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ☐ Yes ☒ No
If "Yes," attach schedule—see page 28 of the instructions

Part VI Other Information (See page 28 of the instructions.)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . .	76	✓
77	Were any changes made in the organizing or governing documents but not reported to the IRS? . . . If "Yes," attach a conformed copy of the changes	77	✓
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . .	78a	✓
b	If "Yes," has it filed a tax return on Form 990-T for this year? . . .	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	✓
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? . . .	80a	✓
b	If "Yes," enter the name of the organization ▶ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a	Enter direct and indirect political expenditures. See line 81 instructions . . . 81a 0		
b	Did the organization file Form 1120-POL for this year? . . .	81b	✓
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? . . .	82a	✓
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) . . . 82b 55,784		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications? . . .	83a	✓
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? . . .	83b	✓
84a	Did the organization solicit any contributions or gifts that were not tax deductible? . . .	84a	✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . .	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? . . .	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? . . . If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b	
c	Dues, assessments, and similar amounts from members . . . 85c		
d	Section 162(e) lobbying and political expenditures . . . 85d		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices . . . 85e		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) . . . 85f		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? . . .	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? . . .	85h	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 . . . 86a		
b	Gross receipts, included on line 12, for public use of club facilities. . . 86b		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders. . . 87a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . 87b		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX . . .	88	✓
89a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under section 4911 ▶ 0, section 4912 ▶ 0; section 4955 ▶ 0		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction. . .	89b	✓
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. . . ▶ 0		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization. . . ▶ 0		
90a	List the states with which a copy of this return is filed ▶ Tennessee		
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions.) 90b 123		
91	The books are in care of ▶ Sandy Johns, Director of Finance Telephone no ▶ (615) 312-7040 Located at ▶ 1130 8th Ave. South, Suite 117, Nashville, TN ZIP + 4 ▶ 37203		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 —Check here . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . ▶ 92		

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)**Note:** Enter gross amounts unless otherwise indicated.

		Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
		(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93	Program service revenue					
a	Registration Fees					21,740
b						
c						
d						
e						
f	Medicare/Medicaid payments					
g	Fees and contracts from government agencies					
94	Membership dues and assessments					1,110
95	Interest on savings and temporary cash investments					
96	Dividends and interest from securities					
97	Net rental income or (loss) from real estate:					
a	debt-financed property					
b	not debt-financed property					
98	Net rental income or (loss) from personal property					
99	Other investment income					
100	Gain or (loss) from sales of assets other than inventory					
101	Net income or (loss) from special events					
102	Gross profit or (loss) from sales of inventory					
103	Other revenue: a Miscellaneous					1,655
b						
c						
d						
e						
104	Subtotal (add columns (B), (D), and (E))					
105	Total (add line 104, columns (B), (D), and (E)).					24,505

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
1	See Statement 9 Attached

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No**Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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

Please Sign Here

Signature of officer: Sandy Johns Date: 8/2/04

Sandy Johns, Director of Finance

Date: 8/2/04 Check if self-employed ☐ Preparer's SSN or PTIN (See Gen. Inst. W)

rces, Inc. EIN 33-1040094

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2003

Name of the organization

Project For Neighborhood Aftercare

Employer identification number

62 1710735

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000 ▶				

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services ▶		

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

- 1** During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line I of Part VI-B)

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities

- 2** During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)

- a** Sale, exchange, or leasing of property
- b** Lending of money or other extension of credit?
- c** Furnishing of goods, services, or facilities?
- d** Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?
- e** Transfer of any part of its income or assets?

- 3a** Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments)

- b** Do you have a section 403(b) annuity plan for your employees?

- 4** Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5** ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6** ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7** ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8** ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9** ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ _____
- 10** ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a** ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b** ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12** ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13** ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14** ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.****Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) . ▶	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28).	686,206	835,370	714,712	426,914	2,663,202
16 Membership fees received	9,865	2,980			12,845
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 . . .	1,472	2,063	2,484		6,019
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	3				3
23 Total of lines 15 through 22.	697,546	840,413	717,196	426,914	2,682,069
24 Line 23 minus line 17.	697,546	840,413	717,196	426,914	2,682,069
25 Enter 1% of line 23	6,975	8,404	7,172	4,269	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24. . . . ▶					26a 53,641
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶					26b
c Total support for section 509(a)(1) test. Enter line 24, column (e) ▶					26c 2,682,069
d Add Amounts from column (e) for lines 18 6,019 19					26d 6,019
22 26b ▶					26e 2,676,050
e Public support (line 26c minus line 26d total) ▶					26f 99.78 %
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year (2002) (2001) (2000) (1999)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year. (2002) (2001) (2000) (1999)					
c Add Amounts from column (e) for lines 15 16					27c
17 20 21 ▶					27d
d Add Line 27a total and line 27b total ▶					27e
e Public support (line 27c total minus line 27d total). ▶					27f
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e). ▶					27g %
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)). ▶					27h %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). ▶					
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V**Private School Questionnaire** (See page 7 of the instructions.)(To be completed **ONLY** by schools that checked the box on line 6 in Part IV)

N/A

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)		
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities?		
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

 Check ☒ **a** if the organization belongs to an affiliated group. Check ☐ **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table—		
If the amount on line 40 is— The lobbying nontaxable amount is— Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000		41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38.	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45	Lobbying nontaxable amount.				
46	Lobbying ceiling amount (150% of line 45(e)).				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e)).				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers.			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? _____

a Transfers from the reporting organization to a noncharitable exempt organization of:

(i) Cash
(ii) Other assets

b Other transactions.

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

[illegible]

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☐ No

b If "Yes," complete the following schedule

[illegible]

FEDERAL STATEMENTS FOR 6/30/2004- #990
PROJECT FOR NEIGHBORHOOD AFTERCARE
EIN: #62-1710735

STATEMENT 1 – Form 990, Part 11, Line 43 – Other Functional Expenses

<u>Description</u>	<u>Total</u> <u>Expenses</u>	<u>Program</u> <u>Services</u>	<u>Mgt. &</u> <u>General</u>	<u>Fund-</u> <u>Raising</u>
Advertising	\$ 2,666	2,385	281	
Bank Charges	932		932	
Dues & Subscriptions	1,572	1,188	384	
Employee Screening	408	408		
Equipment (non-capital)	4,313	3,964	259	90
Field Trips	3,028	3,028		
Food	12,623	12,573	50	
Incentives/Awards	4,268	4,019	249	
Insurance	15,088	14,745	257	86
Licenses & Permits	430		430	
Miscellaneous	75	33	42	
Professional Fees	4,792	2,396	2,396	
Special Events	1,058	1,058		
Staff Training	2,098	1,806	292	
Storage	922	571	351	
Student Services	20,059	20,059		
Total	\$ <u>74,332</u>	<u>68,233</u>	<u>5,923</u>	<u>176</u>

STATEMENT 2 – Form 990, Part III-Stmt of Program Service Accomplishments

To develop a partnership of students, teachers, grandparents, and others in making schools neighborhood centers for a community of learning.

STATEMENT 3-Form 990, Part IV, Line 57-Land Buildings and Equipment

	<u>Cost</u> <u>Basis</u>	<u>Accum.</u> <u>Deprec.</u>	<u>Book</u> <u>Value</u>
Office Equipment & Furniture	\$6,677	\$3,559	\$ 3,118
Computer Equipment	36,465	17,895	18,570
	<u>\$43,142</u>	<u>\$21,454</u>	<u>\$21,688</u>

**FEDERAL STATEMENTS FOR 6/30/2004- #990
PROJECT FOR NEIGHBORHOOD AFTERCARE
EIN: #62-1710735**

STATEMENT 4 – Form 990, Part IV, Line 65 – Other Liabilities

Accrued Wages	\$1,869
Payroll Taxes Payable	<u>202</u>
	<u>\$2,071</u>

STATEMENT 5 – Form 990, Part IV-A, Line b(4) – Other Revenues

Donated Food	\$42,267
Donated Program Supplies	<u>6,917</u>
	<u>\$49,184</u>

STATEMENT 6 – Form 990, Part IV – A, Line d(2) – Other Revenues

Loss on disposal of assets	\$1,578
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STATEMENT 7 – Form 990, Part IV-B, Line b(1) – Other Expenses

Donated Food	\$42,267
Donated Program Supplies	<u>6,917</u>
	<u>\$49,184</u>

STATEMENT 8 – Form 990, Part V – List of Board of Directors

<u>Name& Address</u>	<u>Title& Avg. Hrs.</u>	<u>Comp.</u>	<u>Benefits</u>	<u>Expenses</u>
Sharon Travis 418 Prestwick Ct. Nashville, TN 37205	Board Chair	\$0	\$0	\$0
Lynn Morelock 2601 Bransford Ave. Nashville, TN 37204	Board Vice-Chair	0	0	0
Dr. Damon Cathey 1000 Cass St. Nashville, TN 37208	Board Member	0	0	0
Bill Moody 2991 McGavock Pike Nashville, TN 37214	Treasurer	0	0	0

**FEDERAL STATEMENTS FOR 6/30/2004- #990
PROJECT FOR NEIGHBORHOOD AFTERCARE
EIN: #62-1710735**

STATEMENT 8 – Form 990, Part V – List of Board of Directors (continued)

<u>Name& Address</u>	<u>Title& Avg. Hrs.</u>	<u>Comp.</u>	<u>Benefits</u>	<u>Expenses</u>
Marc Hill 225 Polk Ave. Nashville, TN 37203	Board Member	\$0	\$0	\$0
Todd Liebergen 400 Killean Ct. Nashville, TN 37209	Board Member	0	0	0
Matthew Covington 838 A S. 8 th Ct. Nashville, TN 37206	Board Member	0	0	0
Theresa Hibbert 1409 Calloway Court Nashville, TN 37221	Board Member	0	0	0
Diana Rutledge-Carter 225 Clipper Ct. Nashville, TN 37211	Board Member	0	0	0
LaRayne Hodge 4909 Stonemeade Dr. Nashville, TN 37221	Board Member & Site Director	11,275	0	0
Illia Moore 1130 8 th Ave. S. Nashville, TN 37203	Executive Director	46,000	1,300	0
Sandy Johns 1130 8 th Ave. S. Nashvill, TN 37203	Director of Finance	35,000	1,300	0

**FEDERAL STATEMENTS FOR 6/30/2004- #990
PROJECT FOR NEIGHBORHOOD AFTERCARE
EIN: #62-1710735**

**STATEMENT 9 – Form 990, Part VIII – Relationship of Activities-Exempt
Purposes**

<u>Line #</u>	<u>Explanation of Activities</u>
93a.	Registration fees are charged in order to offset the costs. These fees allow the Organization to develop a partnership of students, teachers, grandparents and parents in making schools' neighborhood centers of community learners in a cost effective manner.
95	Cash is deposited into interest bearing accounts until the money is spent on projects associated with the Organization's exempt purpose.
103a	This is miscellaneous income received from soccer tournament-small event. Money received is for benefit for exempt purpose.