For	" 9	90	Return of Organization Exempt Fr Under section 501(c), 527, or 4947(a)(1) of the Internal Rever benefit trust or private foundatior	nue Code		OMB No. 1545-0047
		of the Treasury enue Service	The organization may have to use a copy of this return to satis	•	eportina requirements.	Open to Public Inspection
					UN 30, 2011	
B	Check if applicabl	C Name of	forganization AND BUSINESS COUNCIL OF GREATER		D Employer identifica	ation number
	Addre	NASH	VILLE, INC.			
	Name Chang	Doing B	usiness As		20-32	55129
	Initial return Termin ated		and street (or P.O. box if mail is not delivered to street address) Ro COMMERCE STREET 10	oom/suite D O	E Telephone number (615)	743-3055
	Amen	City or t	own, state or country, and ZIP + 4		G Gross receipts \$	454,230.
	Applic tion		VILLE, TN 37201-1802	04.0400.0000.0000.0000.0000.0000.000	H(a) Is this a group ret	
	pendi	F Name a	nd address of principal officer: CONNIE VALENTINE		for affiliates?	Yes X No
			AS C ABOVE		H(b) Are all affiliates inclu	
			X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) or	527		st. (see instructions)
			ABCNASHVILLE.ORG	1	H(c) Group exemption	
	NAME AND ADDRESS OF TAXABLE PARTY OF TAX	NO QUE NAME AND A DESCRIPTION OF THE OWNER OWNE	X Corporation Trust Association Other	L Year of	of formation: 2005 M	State of legal domicile: ${f TN}$
Pa	art I	Summary			TNECC COINCT	
Governance	1	GREATER	e the organization's mission or most significant activities: ARTS & NASHVILLE DRIVES COLLABORATION BET	rween	ARTS AND BU	SINESS
ern			$x \mathrel{\blacktriangleright}$ if the organization discontinued its operations or disposed	d of more		
200	1					30
ంర			lependent voting members of the governing body (Part VI, line 1b) \ldots			30
Activities				0		
ivit				275		
Act			d business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated	business taxable income from Form 990-T, line 34	·····		0.
					Prior Year 281,481.	Current Year 196,836.
ne			and grants (Part VIII, line 1h)	1	5,985.	257,094.
Revenue	1	•	ce revenue (Part VIII, line 2g)		0.	257,094.
Be			come (Part VIII, column (A), lines 3, 4, and 7d)		18,027.	300.
			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		305,493.	454,230.
-			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0.	454,250.
			nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
			to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10)		193,196.	196,121.
ses	15		undraising fees (Part IX, column (A), line 11e)	·····	0.	0.
Expenses	h		ing expenses (Part IX, column (D), line 25) \blacktriangleright 23,898	8.		
Ĕ	17		es (Part IX, column (A), lines 11a-11d, 11f-24f)		123,066.	236,788.
			s. Add lines 13-17 (must equal Part IX, column (A), line 25)		316,262.	432,909.
		,	expenses. Subtract line 18 from line 12		-10,769.	21,321.
or					ginning of Current Year	End of Year
ets - lanc	20	Total assets (F	Part X, line 16)		39,681.	61,002.
Ass Ba	21		(Part X, line 26)		0.	0.
Net Assets or Fund Balances	22		fund balances. Subtract line 21 from line 20		39,681.	61,002.
	art II	Signature				
			I declare that I have examined this return, including accompanying schedules a . Declaration of preparer (other than officer) is based on all information of whicl			knowledge and belief, it is
	,					
Sig	n		e of officer		Date	
Her	re		IE VALENTINE, PRESIDENT & CEO			
-		Type or p	print name and title		NEXT STREET, ST	
Pai	d	Print/Type pre DAVID			Date Check X if 3/30/12 self-employed	PTIN
	parer	Firm's name	KRAFTCPAS PLLC		Firm's EIN	· · · · · · · · · · · · · · · · · · ·

•									
Use Only	Firm's address 👞	555 GREA	T CIRCLE ROAD E, TN 37228						
	Phone no.	615-2	242-7	351					
May the IRS discuss this return with the preparer shown above? (see instructions)								Yes	No No
									90 (2010)
S	EE SCHEDU	JLE O FOR	ORGANIZATION	MISSION	STATEMENT	CONTINU	JATION	1	

orm	ARTS AND BUSINESS COUNCIL OF GREATER 990 (2010) NASHVILLE, INC. 20-3255129 Page
	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	ARTS & BUSINESS COUNCIL OF GREATER NASHVILLE SUPPORTS AND PROMOTES THE
	ARTS BY DRIVING COLLABORATION BETWEEN ARTS AND BUSINESS THAT
	CONTRIBUTE TO THE CREATIVE VITALITY AND PROSPERITY OF GREATER
	NASHVILLE. ABC'S PROGRAMS AND EVENTS DEMONSTRATE THE IMPORTANCE OF
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?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 240, 576. including grants of \$) (Revenue \$ 224, 813
	CONNECTING ARTS & BUSINESS:
	ABC FACILITATES DIALOG AND CONNECTIONS AMONG ARTS AND BUSINESS TO
	CREATE MUTUALLY BENEFICIAL PARTNERSHIPS. THIS INCLUDES THE ANNUAL
	BOWTIE AWARDS, WHICH RECOGNIZE OUTSTANDING BUSINESS SUPPORT OF THE ART
	FOR COMPANIES THAT SUPPORT ARTS EDUCATION, MAKE A SIGNIFICANT ARTS
	IMPACT, AND CREATE AN OUTSTANDING WORK ENVIRONMENT. IN ADDITION, THROUGH ABC UNTIED, ABC HAS BROUGHT TOGETHER A GROUP OF ARTS SUPPORTER
	WHO WANT TO CONNECT WITH ARTISTS, PROFESSIONALS AND BUSINESSES AND
	BECOME MORE INTIMATELY INVOLVED IN SHAPING THE CITY'S DYNAMIC, GROWING
	CREATIVE SCENE. IN 2011, AS PART OF ITS ROLE AS A CONNECTOR OF ARTS
	AND BUSINESS, ABC SERVED AS THE FISCAL SPONSOR FOR THE ORGANIZATION
	THAT PRESENTED THE NATIONAL FOLK FESTIVAL IN PARTNERSHIP WITH OTHER
4b	(Code:) (Expenses \$ 71,183 • including grants of \$) (Revenue \$ 13,946
40	SERVING AND EDUCATING THE CREATIVE COMMUNITY:
	ABC CREATES KEY OPPORTUNITIES, PROVIDES DIRECT SERVICE, AND EDUCATES
	INDIVIDUAL ARTISTS, CREATIVE PROFESSIONALS, AND ARTS ORGANIZATIONS TO
	MASTER THE BUSINESS OF ART. THE KEY PROGRAM IN THIS AREA IS THE
	VOLUNTEER LAWYERS AND PROFESSIONALS FOR THE ARTS WHICH PROVIDES PRO
	BONO LEGAL AND BUSINESS ASSISTANCE TO LOW-INCOME ARTISTS AND EMERGING
	NONPROFIT ARTS ORGANIZATIONS FOR ALL DISCIPLINES. THIS PROGRAM
	GENERATES AN ESTIMATED \$250,000 IN PRO BONO SERVICES EACH YEAR. IN
	ADDITION, ABC PRESENTS SEVERAL EDUCATIONAL OPPORTUNITIES INCLUDING
	MONTHLY SEMINARS, AS WELL AS CREATIVE CAPITAL, AN INTENSIVE
	WEEKEND-LONG PROFESSIONAL DEVELOPMENT WORKSHOP THAT TEACHES ARTISTS
	SELF-MANAGEMENT, STRATEGIC PLANNING, FUNDRAISING, AND PROMOTION.
4c	(Code:) (Expenses \$38,980. including grants of \$) (Revenue \$18,635
	INSPIRING WORKPLACE CREATIVITY:
	ABC INSPIRES WORKPLACE CREATIVITY TO TEACH BUSINESSES THE VALUE OF THE
	ARTS AND HOW TO REALIZE TANGIBLE BOTTOM-LINE AND WORK ENVIRONMENT
	BENEFITS. ABC PRESENTS EVENTS THROUGHOUT THE YEAR THAT PROVIDE
	OPPORTUNITIES FOR COMPANIES AND THEIR EMPLOYEES TO CELEBRATE, RECOGNIZ
	AND DISPLAY THEIR CREATIVITY. THESE INCLUDE THE MUSIC CITY CORPORATE
	BAND CHALLENGE, WHERE COMPANIES' BANDS COMPETE AGAINST OTHER NASHVILLE
	BUSINESSES FOR A FUN TEAM-BUILDING EXPERIENCE, AND ARTWORKS WHICH SHOWCASES THE ARTISTIC TALENTS OF EMPLOYEES TO INSPIRE CREATIVITY AND
	CAMARADERIE. IN ADDITION, ABC'S ARTS-BASED LEARNING FOR BUSINESS
	PROGRAM CREATES OPPORTUNITIES FOR BUSINESSES TO TAP INTO THE CREATIVE
	POTENTIAL OF THEIR EMPLOYEES THROUGH INNOVATIVE LEARNING EXPERIENCES.
	Other program services. (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 350,739.
32002 2-21-	Form 990 (20 SEE SCHEDULE O FOR CONTINUATION(S)
2-21-1	¹⁰ SEE SCHEDULE O FOR CONTINUATION(S) 2
00	330 781331 10569-10569 2010.05070 ARTS AND BUSINESS COUNCIL O 10569-1

Form	aan	(2010)
FOUL	990	(2010)

Part IV Checklist of Required Schedules

ARTS AND BUSINESS COUNCIL OF GREATER NASHVILLE, INC.

			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
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		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21; serve as a custodian 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		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
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	446		x
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ь	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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
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, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			х
15	and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		
15	or entity located outside the United States? 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 assistance to individuals	15		
	located outside the United States? 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	17		х
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		X
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
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		<u> </u>
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Form **990** (2010)

032003 12-21-10

Form 990 (2010)

ARTS AND BUSINESS COUNCIL OF GREATER NASHVILLE, INC.

Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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		Х
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			
	Schedule K. If "No", go to line 25	24a		Х
b	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
28	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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
с	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	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	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		Х
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 I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
а	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			
36	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 11 and 19?		<u> </u>	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form **990** (2010)

032004 12-21-10

Form 990	(2010)
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ARTS AND BUSINESS COUNCIL OF GREATER NASHVILLE, INC.

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20-3255129 Page	÷5
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Pa	Check if Schedule O contains a response to any question in this Part V										
				Yes	No						
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 0		103							
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		1								
с	Did the organization comply with backup withholding rules for reportable payments to vendors and r		1								
	(gambling) winnings to prize winners?		1c	X							
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 0									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ms?	2b	X							
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions)										
	3a Did the organization have unrelated business gross income of \$1,000 or more during the year?										
	· · · · · · · · · · · · · · · · · · ·		3b								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	•									
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X						
b	If "Yes," enter the name of the foreign country:										
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial		-		v						
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		XX						
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b								
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		<u> </u>						
08	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the any contributions that were not tax deductible?	-	6a		x						
h	any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contribut		Ua		<u> </u>						
D D	were not tax deductible?		6b								
7	Organizations that may receive deductible contributions under section 170(c).										
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices provided to the payor?	7a	Х							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Х							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w										
	to file Form 8282?		7c		Х						
d	d If "Yes," indicate the number of Forms 8282 filed during the year 7d										
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contract?	7e		Х						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contraction	ract?	7f		X						
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g								
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h								
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D				v						
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during the year?	8		X						
9	Sponsoring organizations maintaining donor advised funds.		9a		x						
a b	Did the organization make any taxable distributions under section 4966?		9a 9b		X						
10	Section 501(c)(7) organizations. Enter:		90								
a	Initiation fees and capital contributions included on Part VIII, line 12	10a									
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b									
11	Section 501(c)(12) organizations. Enter:										
	Gross income from members or shareholders	11a									
	Gross income from other sources (Do not net amounts due or paid to other sources against		1								
	amounts due or received from them.)	11b									
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	12b									
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	13b									
	Enter the amount of reserves on hand	13c			v						
	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 in Schedul	e U	14b								

Form **990** (2010)

032005 12-21-10

ARTS AND BUSINESS COUNCIL OF GREATER NASHVILLE, INC.

20-3255129 Page 6

Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	"No" r	espon	se							
	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 to any question in this Part VI			X							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 30										
b	Enter the number of voting members included in line 1a, above, who are independent										
2											
	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 or trustees, or key employees to a management company or other person?										
4											
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X X							
6	Does the organization have members or stockholders?										
7a	a Does the organization have members, stockholders, or other persons who may elect one or more members of the										
	governing body?										
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	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 in 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	Does the organization have local chapters, branches, or affiliates?	10a		Х							
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with those of the organization?										
11a	a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?										
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.										
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х								
b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise										
	to conflicts?	12b	Х								
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	in Schedule O how this is done	12c	X								
13	Does the organization have a written whistleblower policy?	13	X								
14	Does 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?		v								
	The organization's CEO, Executive Director, or top management official	15a	X								
b	Other officers or key employees of the organization	15b	X								
40	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)										
102	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40-		Х							
	taxable entity during the year?	16a									
D	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	104									
Sec	exempt status with respect to such arrangements?	16b									
<u>3ec</u> 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 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for									
10	public inspection. Indicate how you make these available. Check all that apply.	101									
	Own website I Another's website I Down request										
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, ar	nd fina	ncial								
	statements available to the public.	a ma									
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization o	ion: 🕨	•								
	CONNIE F. VALENTINE - $615-743-3055$										
	211 COMMERCE ST., SUITE 100, NASHVILLE, TN 37201										
		Form	990 (2010)							
032006				. /							

6

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

Check if Schedule O contains a response to any guestion in this Part VII

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

Χ

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 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)	(B)	<u></u>		(0				(D)	(E)	(F)
Name and Title	Average hours per	(cl	Posit (check all th				oly)	Reportable compensation	Reportable compensation	Estimated amount of
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
H. LEE BARFIELD, II	2 00								0	~
DIRECTOR	3.00	X						0.	0.	0.
JOSEPH BARKER	2 00	.							^	0
DIRECTOR	3.00	X						0.	0.	0.
LEE BEAMAN	2 00	.							^	0
DIRECTOR	3.00	X						0.	0.	0.
MICHAEL BRESSMAN	2 00	37							•	0
DIRECTOR	3.00	X					<u> </u>	0.	0.	0.
RAMON CISNEROS	2 00								0	0
DIRECTOR	3.00	X					<u> </u>	0.	0.	0.
RONALD CORBIN	2 00	- -							0	0
DIRECTOR	3.00	X					<u> </u>	0.	0.	0.
ELIZABETH COURTNEY SECRETARY	3.00	x						0.	0.	0.
MIKE CURB	5.00	⊢					-	0.	0.	0.
DIRECTOR	3.00	x						0.	0.	0.
MARTY DICKENS	5.00		-		<u> </u>	-	-	0.	0.	0.
DIRECTOR	3.00	x						0.	0.	0.
TIM DUBOIS		<u> </u>	-		-		-		0.	<u></u>
DIRECTOR	3.00	x						0.	0.	0.
LAURIE ESKIND										
DIRECTOR	3.00	x						0.	0.	0.
ROBERT FISHER										
DIRECTOR	3.00	x						0.	Ο.	0.
HOWARD GENTRY										
DIRECTOR	3.00	x						0.	Ο.	0.
KIM HAWKINS										
DIRECTOR	3.00	x						0.	Ο.	0.
KATE HERMAN		1								
DIRECTOR	3.00	Х						0.	0.	0.
MARTHA INGRAM										
DIRECTOR	3.00	X						0.	0.	0.
ROBERT MCCABE										
DIRECTOR	3.00	X						0.	0.	0.
032007 12-21-10										Form 990 (2010)

032007 12-21-10

Form 990 (2010)

ARTS AND BUSINESS COUNCIL OF GREATER

20 2255120

Form 990 (2010) NASHVILLI	≤, INC.								20-325	5129	Pag	je 8
Part VII Section A. Officers, Directors, Tru	istees, Key Ei	mplo	oyee	s, a	nd I	High	est	Compensated Employ	ees (continued)			
(A) Name and title	(B) Average hours per		(C) Position (check all that apply)					(D) Reportable compensation	(E) Reportable compensation		(F) timated	
	week (describe hours for related organizations in Schedule O)	stee or director	Institutional trustee	Officer		Highest compensated		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	com fr orga and	other pensatio om the anization d related anization	on n d
MIKE MILOM										+		
DIRECTOR	3.00	X						0.	0	•		0.
THOMAS NEGRI	2 00								0			~
DIRECTOR	3.00	X						0.	0	•		0.
LAURENCE PAPEL	2 00							0	0			^
CHAIRMAN SHARON REAVIS	3.00	X						0.	0	•		0.
DIRECTOR	3.00	x						0.	0			Ο.
CAROLYN SCHOTT	5.00							0.	0	•		0.
DIRECTOR	3.00	x						0.	0			Ο.
BO SPESSARD										-		
DIRECTOR	3.00	x						0.	0	•		Ο.
BOB SULLIVAN												
DIRECTOR	3.00	X						0.	0	•		0.
EARL SWENSSON												_
DIRECTOR	3.00	X						0.	0	•		0.
VAN TUCKER	2 00								0			~
DIRECTOR	3.00					Ļ		0.	0			<u>0.</u> 0.
1b Sub-total								0.	126,141	-		0.
c Total from continuation sheets to Part VI								0.	126,141			0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but n								•		•		0.
compensation from the organization		1036	iiste	u ai	0000		10 10					0
											Yes I	No
3 Did the organization list any former officer,	director or tru	istee	, ke	v em	nplo	vee,	or h	nighest compensated er	nployee on			
line 1a? If "Yes," complete Schedule J for s	uch individual							· ·		3		Х
4 For any individual listed on line 1a, is the su	im of reportab											
and related organizations greater than \$150	0,000? If "Yes,	" со	mple	ete S	Sche	edule	e J f	for such individual		4		X
5 Did any person listed on line 1a receive or a					-			•				
rendered to the organization? If "Yes," com	plete Schedul	e J f	or si	ich	pers	son .				5		Х
Section B. Independent Contractors						<u> </u>			<u> </u>	<u> </u>		
1 Complete this table for your five highest co the organization. NONE	mpensated in	debe	ende	ent C	Onu	acio	JISI	that received more than	\$100,000 of comper	Isation	rom	
(A)								(B)		(C	;)	
Name and business	address							Description of s	ervices	Comper		
							$ \rightarrow$					
							\rightarrow					
							\neg					
				_	_							
2 Total number of independent contractors (i		not li	mite	d to	tho I	se li: N	stec	above) who received m	nore than			
\$100,000 in compensation from the organiz SEE PART VII, SECTION		TI	JUZ	\T]	101	N S	SHI	EETS		Form	990 (20)10)
										1 01111		

032008 12-21-10

Form 990 (2010)

ARTS AND BUSINESS COUNCIL OF GREATER

NASHVILLE, INC.

20-3255129

Image: Second	Form 990 (2010) NASHVIL	LE, INC.								20-325	2123
(A) Name and title (B) (everage week (C) (everage transformed and that apply) week (C) (everage transformed and that apply) transform related organizations (W2/1099-MISC) (B) (Pepotable organizations (W2/1099-MISC) (B) (W2/1099-MISC) (B) (W2/1099-MISC) (B) (W2/1099-MISC) TIOR URNESS 3.00 X 0. 0. 0. TIOR URNESS 3.00 X 0. 0. 0. TIOR URNESS 3.00 X 0. 0. 0. DIRECTOR 3.00 X 0. 69.046. 0. DIRECTOR VLA 0. 0. 0. 0.	Part VII Section A. Officers, Directors,	Trustees, Key E	mplo	oyee	s, a	nd H	ligh	est	Compensated Employ	ees (continued)	
week week <th< td=""><td>(A)</td><td>Average hours</td><td>(cl</td><td></td><td>Posi</td><td>ition</td><td></td><td>ly)</td><td>Reportable compensation</td><td>Reportable compensation</td><td>Estimated amount of</td></th<>	(A)	Average hours	(cl		Posi	ition		ly)	Reportable compensation	Reportable compensation	Estimated amount of
DIRECTOR 3.00 X 0. 0. 0. 0. MING WARG 3.00 X 0. 0. 0. 0. TED WELCH 3.00 X 0. 0. 0. 0. DIRECTOR 3.00 X 0. 0. 0. 0. PRESIDENT 5 CBO 50.00 X 0. 57,095. 0 DIRECTOR VLPA 0. 0. 0. 0. 0. Income 0. 0. 0. 0. 0. 0. Incom 0. 0. 0. 0. 0. 0. 0. Incom 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.			Individual trustee or director	Institutional trustee	Offlicer	Key em ployee	Highest compensated employee	Former	the organization	organizations	compensation from the organization
MING NANG 3.00 X 0. 0. 0. 0 DIRECTOR 3.00 X 0. 0. 0. 0 DIRECTOR 3.00 X 0. 0. 0. 0 SHIRLEY ZETFLIN 3.00 X 0. 0. 0. 0 DIRECTOR 3.00 X 0. 0. 0. 0 SHIRLEY ZETFLIN 3.00 X 0. 0. 0. 0 DIRECTOR 3.00 X 0. 0. 0. 0 CONNET F. VALENTINE PRESIDENT 4 CB0 0. 69,046. 0 CASEY SUMMAR 0. 0. 57,095. 0 0 DIRECTOR VLPA 50.00 X 0. 57,095. 0 Image: Construction of the second		3.00	x						0.	0.	0.
TED WELCH 3.00 X 0. 0. 0 DIRECTOR 3.00 X 0. 0. 0. ONNIE F. VALENTINE 0. 0. 0. 0. RESIDENT & CEO 50.00 X 0. 69,046. 0 CASEY SUMMAR 50.00 X 0. 57,095. 0 Image: Construction of the state of											
DIRECTOR 3.00 X 0. 0. 0. 0 SHIELEY ZEITLIN 3.00 X 0. 0. 0. 0 DIRECTOR 3.00 X 0. 69,046. 0 CONNIE F. VALENTINE 50.00 X 0. 57,095. 0 PRESIDENT & CRO 50.00 X 0. 57,095. 0 DIRECTOR VLFA 50.00 X 0. 57,095. 0 Image: State of the stat		3.00	X						0.	0.	0.
SHIRLEY ZEITLIN 3.00 X 0.0.0.0.0 DIRRCTOR 3.00 X 0.69,046.0 CASEY SUMMAR 0.57,095.0 DIRRCTOR VLFA 50.00 X 0.57,095.0 Image: Strain of the strain of th		2 00	37								0
DIRECTOR 3.00 X 0.		3.00	×.						0.	0.	0.
CONNER F. VALENTINE 50.00 X 0. 69,046. 0 PRESIDENT & CEO 50.00 X 0. 57,095. 0 DIRECTOR VLPA 50.00 X 0. 57,095. 0 Image: Construction of the		3.00	x						0.	0.	0.
CASEY SUMAR 50.00 X 0.57,095.0 INCOMENT INCOMENT INCOMENT INCOMENT INCOMENT INCOMENT INCOMENT											
DIRECTOR VLPA 50.00 X 0. 57,095. 0		50.00			Х				0.	69,046.	0.
					37						0
	Total to Part VII. Soction A line 10									126,141.	

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	000	(_0.0)

ARTS AND BUSINESS COUNCIL OF GREATER NASHVILLE, INC.

20-3255129 Page	20-	255129	Page S
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Form	1 990 (2	2010) NASHV		С.			20-3255	129 Page 9
	rt VIII				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributi All other contributions, gifts, grant similar amounts not included abov Noncash contributions included in lines	1b 1c 1d ons) 1e s, and If	2,510. 28,050. 166,276.				
ãĞ	h	Total. Add lines 1a-1f		►	196,836.			
Program Service Revenue	b c d e f	NATIONAL FOLK & BOWTIE AWARDS ARTS IMMERSION EDUCATION/SEMIN ADMINISTRATIVE All other program service rever Total. Add lines 2a-2f	ARS FEES	Business Code 900099 900099 900099 900099 900099 900099	160,500. 50,163. 11,100. 2,223. 623. 32,485. 257,094.	160,500. 50,163. 11,100. 2,223. 623. 32,485.		
	3	Investment income (including						
	4 5	other similar amounts) Income from investment of tax Royalties	exempt bond p	oroceeds 🕨				
	b c	Gross Rents Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
		Net rental income or (loss) Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		Less: cost or other basis and sales expenses						
		Gain or (loss) Net gain or (loss)						
Other Revenue		Gross income from fundraising including \$ contributions reported on line	events (not of 1c). See					
the	b	Part IV, line 18 Less: direct expenses						
°		Net income or (loss) from fund		►				
		Gross income from gaming ac Part IV, line 19	tivities. See a					
		Less: direct expenses						
	10 a	Net income or (loss) from gam Gross sales of inventory, less in and allowances	returns a					
		Less: cost of goods sold Net income or (loss) from sales						
F	C	Miscellaneous Revenue		Business Code				
F	11 a b	MISCELLANEOUS R	EVENUE	900099	300.	300.		
	с							
		All other revenue						
		Total. Add lines 11a-11d Total revenue. See instructions.			300. 454,230.	257,394.	0.	0.
	12	Intal revenue See instructions			474 / 10.	27/ 194.		4 U .

10

Form 990 (2010)	NASHVI	LLE,	IN
Part IX	Statement of	Functional	Expen	ses

ARTS AND BUSINESS COUNCIL OF GREATER NASHVILLE, INC.

20-3255129 Page 10

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and		expenses	general expenses	expenses
'	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
2	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
0	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	130,000.	91,000.	26,000.	13,000
6	Compensation not included above, to disqualified	-	-		-
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	66,121.	46,285.	13,224.	6,612
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
0	Payroll taxes				
1	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	3,250.		3,250.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	F				
2	Advertising and promotion	1,957.	1,957.	0.4 5	400
3	Office expenses	5,342.	4,074.	845.	423
4	Information technology				
5	Royalties	19,936.	13,955.	3,987.	1 00/
6		19,930.	15,955.	5,907.	1,994
7	Travel				
8	Payments of travel or entertainment expenses				
~	for any federal, state, or local public officials	6,686.		6,686.	
9 0		0,000.		0,000.	
1	Interest Payments to affiliates				
2	Depreciation, depletion, and amortization				
23	Insurance	796.	557.	239.	
4	Other expenses. Itemize expenses not covered				
-	above. (List miscellaneous expenses in line 24f. If line				
	24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)				
а	NATIONAL FOLK & ROOT FE	130,723.	130,723.	0.	0
b	BOWTIE AWARDS	23,943.	23,943.	0.	0
c	CORPORATE BAND CHALLENG	15,979.	15,979.	0.	0
d	PROGRAMS	10,113.	7,079.	2,023.	1,011
e	MISCELLANEOUS	5,892.	4,125.	1,178.	589
f	All other expenses	12,171.	11,062.	840.	269
5	Total functional expenses. Add lines 1 through 24f	432,909.	350,739.	58,272.	23,898
6	Joint costs. Check here 🕨 🛄 if following SOP				
	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising				

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11

ARTS	AND	BUSINESS	COUNCIL	OF	GREATER
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Form 990 (2010) Part X Balance Sheet

NASHVILLE, INC.

				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		39,681.	1	61,002.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, di			-	
	5	-				
		employees, and highest compensated employee	-		5	
	6	of Schedule L Receivables from other disgualified persons (as			5	
	0					
s		4958(f)(1)), persons described in section 4958(c	•			
		employers and sponsoring organizations of sect		6		
	-	employees' beneficiary organizations (see instru			6	
sse	7	Notes and loans receivable, net			7	
Ä	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges	1 1		9	
	10a	Land, buildings, and equipment: cost or other	40-			
		basis. Complete Part VI of Schedule D			10-	
		Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 1		12		
	13	Investments - program-related. See Part IV, line		13		
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11	39,681.	15 16	61,002.	
	16 17	Total assets. Add lines 1 through 15 (must equa		55,001.	17	01,002.
		Accounts payable and accrued expenses			17	
	18 19	Grants payable			19	
		Deferred revenue			20	
	20	Tax-exempt bond liabilities				
Liabilities	21	Escrow or custodial account liability. Complete I			21	
ilio	22	Payables to current and former officers, director highest compensated employees, and disqualifi				
Lia					22	
	23	Secured mortgages and notes payable to unrela	ated third parties		22	
	23 24	Unsecured notes and loans payable to unrelated			<u>23</u> 24	
	24 25	Other liabilities. Complete Part X of Schedule D			24 25	
	25 26			0.	25 26	0.
	20	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check he	are X and complete		20	
s		lines 27 through 29, and lines 33 and 34.				
S	27	Unrestricted net assets		39,681.	27	61,002.
alar	28	Temporarily restricted net assets		28		
Ë	29				29	
ŭ	20	Organizations that do not follow SFAS 117, cl			20	
г Г		complete lines 30 through 34.				
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30		
sse	31	Paid-in or capital surplus, or land, building, or ec			31	
ř۹	32	Retained earnings, endowment, accumulated in			32	
ž	33	Total net assets or fund balances		39,681.	33	61,002.
	34	Total liabilities and net assets/fund balances	39,681.	34	61,002.	

Form **990** (2010)

12

ARTS	AND	BUSINESS	COUNCIL	OF

20-3255129	Page '	12
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Forn	1990 (2010) NASHVILLE, INC.	20-32551	.29	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)		454		
2	Total expenses (must equal Part IX, column (A), line 25)	2	432		
3	Revenue less expenses. Subtract line 2 from line 1	3		-	21.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u> </u>	, 6	81.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	61	.,0	02.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	<u></u>	<u></u>		
		-	`	Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	х	
b	Were the organization's financial statements audited by an independent accountant?	L	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			1
	review, or compilation of its financial statements and selection of an independent accountant?	L	2c		<u>X</u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	$\lfloor X floor$ Separate basis $\lfloor \ldots floor$ Consolidated basis $\lfloor \ldots floor$ Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	-			
	Act and OMB Circular A-133?	L	3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		
		F	⁼ orm 9	90 (2	2010)

GREATER

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	DULE A 90 or 990-EZ)	Pub	olic Charity St	tatus	and P	ublic	Supp	ort	┝	омв №. ⁻	1545-004	47
Department o Internal Reve	of the Treasury enue Service	-	te if the organization is 4947(a)(1) no tach to Form 990 or Fo	onexempt	charitabl	e trust.				Open to Inspe		ic
Name of	the organizati		D BUSINESS C	COUNCI	L OF	GREAT	'ER	E		dentificati		mber
Part I	Reason		LE, INC. ity Status (All organiz	rations mu	st complet	te this par	t) See ins	tructions	20)-3255	129	
			because it is: (For lines									
1		•	•	•	-	2	,).				
2	 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 											
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4	A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter th	he hospital	s nam	ie,
	city, and stat	e:										
5 📖			benefit of a college or un	niversity ov	wned or op	perated by	a govern	mental uni	t describe	ed in		
a \Box		(b)(1)(A)(iv). (Comple		4								
6 🗆 7 X			ent or governmental uni					r from the	accord r	ublic doco	ribad i	n
/ [2]		b)(1)(A)(vi). (Comple	eives a substantial part	or its supp	on nom a	governme		or from the	e general p		nbed i	r i
8			ection 170(b)(1)(A)(vi).	(Complete	Part II)							
9	-		eives: (1) more than 33		-	rom contri	ibutions. n	nembershi	p fees. an	id aross rea	eipts	from
	-	•	nctions - subject to certa						-	-		
	income and ι	unrelated business ta	axable income (less sect	tion 511 ta	x) from bu	isinesses a	acquired b	y the orga	anization a	after June 3	0, 197	'5.
	See section	509(a)(2). (Complete	e Part III.)									
10 🔛	-		perated exclusively to te	-	-			-				
11 📖			perated exclusively for the									or
			ations described in section				2). See see	ction 509(a)(3). Che	ck the box	that	
		••••••	organization and compl		-					Truck III. C		
- 🗆	a └── Type I		<i>,</i>	• •	e III - Func	-	-		d L	Type III - C		
e 📖			It the organization is not han one or more publicly									n
f			ten determination from t						5(a)(1) 01 3	Section 309	(a)(2).	
•	0	rganization, check th						5 111				
g		0	organization accepted ar					owing per	sons?			
			irectly controls, either al								Yes	No
	the gove	erning body of the su	ng body of the supported organization?									
	(ii) A family	member of a persor	r of a person described in (i) above?							. 11g(ii)		
			entity of a person described in (i) or (ii) above?							. 11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganization	(s).							
	e of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv) Is the o in col. (i) lis	sted in your	organizat	ion in col.	(vi) Is organizatio (i) organiz	on in col. I	(vii) Am sup		f
			above or IRC section	governing	document?	(i) of you	r support?	(i) organiz U.S				
			(see instructions))	Yes	No	Yes	No	Yes	No			
								1				
-												
Total												

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

Schedule A (Form 990 or 990-EZ) 2010

032021 12-21-10

14

ARTS AND BUSINESS COUNCIL OF GREATER

Schedule A (Form 990 or 990-EZ) 2010 NASHVILLE, INC.

20-3255129 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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	33,010.	78,532.	82,730.	281,481.	196,836.	672,589.
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	33,010.	78,532.	82,730.	281,481.	196,836.	672,589.
5	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)						6,931,
6	Public support. Subtract line 5 from line 4.						<u>6,931.</u> 665,658.
	tion B. Total Support						
-	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 4	33,010.	78,532.	82,730.	281,481.	196,836.	672,589.
-	Gross income from interest,	3370101	/0/0021	0277500	201/1010	190,000	07270000
8							
	dividends, payments received on						
	securities loans, rents, royalties						
•	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
	Total support. Add lines 7 through 10						672,589.
	Gross receipts from related activities,		/			12	
13	First five years. If the Form 990 is for	-	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
0	organization, check this box and stor	bhere					X
	ction C. Computation of Publ						
	Public support percentage for 2010 (14	%
	Public support percentage from 2009					15	%
16 a	33 1/3% support test - 2010. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2009. If the o						is box
	and stop here. The organization qual	lifies as a publicly s	supported organization	ation			▶∟
17a	10% -facts-and-circumstances tes	t - 2010.If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check tł	nis box and stop h	e re. Explain in Par	t IV how the organ	ization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶∟
b	10% -facts-and-circumstances tes	t - 2009. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets the	he "facts-and-circu	mstances" test, cl	neck this box and	stop here. Explain	in Part IV how the	
	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization	
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	nd see instruction	s >
						/=	ar 000 EZ) 0040

Schedule A (Form 990 or 990-EZ) 2010

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

(Complete only if you checked the box on line 9 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.)

Section A. Public Su				1	1	1	,
Calendar year (or fiscal year b	oeginning in) 🕨 🔄	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contribut							
membership fees rece							
include any "unusual g							
2 Gross receipts from ac merchandise sold or so formed, or facilities fur any activity that is rela organization's tax-exer	ervices per- nished in ted to the						
3 Gross receipts from ac are not an unrelated tr	tivities that						
iness under section 51							
4 Tax revenues levied fo ization's benefit and ei	r the organ-						
or expended on its bel	· ·						
5 The value of services of	or facilities						
furnished by a governr the organization witho							
6 Total. Add lines 1 thro							1
7a Amounts included on I	-						
3 received from disqua							
b Amounts included on lines 2 a from other than disqualified pe exceed the greater of \$5,000 c	ersons that or 1% of the						
amount on line 13 for the year c Add lines 7a and 7b							
8 Public support (Subtract li							<u> </u>
Section B. Total Sup							
Calendar year (or fiscal year b	eginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6							
10a Gross income from inte dividends, payments re securities loans, rents, and income from simila	erest, eceived on royalties						
b Unrelated business taxab							
(less section 511 taxes) fi acquired after June 30, 19							
c Add lines 10a and 10b							
11 Net income from unrela activities not included whether or not the bus regularly carried on	ated business in line 10b,						
12 Other income. Do not i or loss from the sale of assets (Explain in Part	f capital						
13 Total support (Add lines 9,							
14 First five years. If the	Form 990 is for the	e organization's	s first, second, thi	rd, fourth, or fifth f	tax year as a sectio	on 501(c)(3) organi	zation,
check this box and sto							▶□
Section C. Computat						, , , , , , , , , , , , , , , , , , , 	
15 Public support percent						15	%
16 Public support percent						16	%
17 Investment income pe						17	%
18 Investment income pe						18	<u>%</u>
19a 33 1/3% support test							
more than 33 1/3%, ch							
b 33 1/3% support test							
line 18 is not more that							
20 Private foundation. If	the organization d	id not check a	box on line 14, 19	a, or 19b, check t	this box and see in	structions	>
032023 12-21-10				1.6	Scl	nedule A (Form 99	90 or 990-EZ) 2010

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16

Schedul	eВ
(Form 990, 990 or 990-PF))-ЕZ ,

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

Name	of the	organization
1141110	01 010	or gameatori

ARTS AND BUSINESS COUNCIL OF GREATER

INC.

Employer identification number

20-3255129

Organization type (check one):

NASHVILLE,

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

□ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Employer identification number

Name of organization ARTS AND BUSINESS COUNCIL OF GREATER NASHVILLE, INC.

20-3255129

Part I Contributors (see instructions)

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$ <u>7,150.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
2		\$ <u>8,500.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
3		\$120,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
_5		\$7,685.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
023453 12-23-10		\$Schedule B (Form 9	990, <u>990-EZ, or 990-PF) (2</u> 010)

NASHVILLE, INC.

ARTS AND BUSINESS COUNCIL OF GREATER

Part II Noncash Property (see instructions)

Page of of Part II
Employer identification number

20-3255129

	990, 990-EZ, or 990-PF) (2010)			Page of of Part			
Name of organ				Employer identification number			
	ND BUSINESS COUNCIL OF	GREATER		20-3255129			
Part III	LE, INC. Exclusively religious, charitable, etc., ir	ndividual contributions to sec	tion 501(c)(7), (8), or (10)				
i uit iii	more than \$1,000 for the year. Complet: Part III, enter the total of <i>exclusively</i> religion \$1,000 or less for the year. (Enter this inf	e columns (a) through (e) and the second the second term of term of the second term of term o	ne following line entry. For ns of	r organizations completing			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
-							
-		(e) Transfer of g	 ift				
	Transferee's name, address, a	nd ZIP + 4	Relationship of tr	ansferor to transferee			
-							
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held			
Part I							
	(e) Transfer of gift						
-	Transferee's name, address, a		Relationship of th	ransferor to transferee			
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held			
	(e) Transfer of gift						
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tr	ransferor to transferee			
-							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held			
-							
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
-							
023454 12-23-10)		Schedule	e B (Form 990, 990-EZ, or 990-PF) (2010			

SCHEDULE O (Form 990 or 990-EZ)

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 990-EZ. OMB No. 1545-0047

Name of the organization ARTS AND BUSINESS COUNCIL OF GREATER NASHVILLE, INC.

Employer identification number 20-3255129

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THAT CONTRIBUTE TO THE CREATIVE VITALITY AND PROSPERITY OF GREATER

NASHVILLE. ABC HELPS ARTISTS AND ORGANIZATIONS MASTER THE BUSINESS OF

ARTS, INSPIRE WORKPLACE CREATIVITY, AND FACILITATE DIALOG AND

PARTNERSHIPS BETWEEN THE ARTS AND BUSINESS.

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

THE ARTS TO NASHVILLE AS A TOOL TO IMPROVE THE QUALITY OF LIFE, ENHANCE

EDUCATION, DRIVE ECONOMIC IMPACT, AND CREATE A CIVIL SOCIETY.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

NASHVILLE ORGANIZATIONS AND BUSINESSES.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS FIRST REVIEWED BY STAFF, THEN BY THE FINANCIAL COMMITTEE. THE FINAL DRAFT OF THE FORM 990 IS CIRCULATED TO THE ENTIRE BOARD FOR INPUT.

FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD AND STAFF LEADERSHIP MONITOR ALL TRANSACTIONS TO ENSURE COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY. IN ADDITION, ALL ABC BOARD MEMBERS ARE GIVEN A COPY OF THE POLICY AND REQUIRED TO SIGN AN ANNUAL ACKNOWLEDGEMENT STATING:

"I, _____, DO ACKNOWLEDGE THAT I RECEIVED A COPY OF THE CONFLICT OF

INTEREST POLICY OF THE ARTS & BUSINESS COUNCIL OF GREATER NASHVILLE

("POLICY"). I HAVE READ AND UNDERSTAND THE POLICY, AND DO AGREE TO COMPLY WITH THE POLICY.

 I
 UNDERSTAND
 THAT
 THE
 ARTS
 & BUSINESS
 COUNCIL
 OF
 GREATER
 NASHVILLE
 IS
 A

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2010)

 032211 01-24-11
 21

Schedule O (Form 990 or 990-EZ) (2010)	Page 2				
Name of the organization ARTS AND BUSINESS COUNCIL OF GREATER NASHVILLE, INC.	Employer identification number 20-3255129				
CHARITABLE ORGANIZATION, AND IN ORDER TO MAINTAIN ITS FED	CHARITABLE ORGANIZATION, AND IN ORDER TO MAINTAIN ITS FEDERAL TAX				
EXEMPTION, THE ARTS & BUSINESS COUNCIL OF GREATER NASHVIL	LE MUST ENGAGE				
PRIMARILY IN ACTIVITIES THAT ACCOMPLISH ONE OR MORE OF IT	S TAX-EXEMPT				
PURPOSES."					

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION IS SET BY THE ABC BOARD AFTER CONSIDERING ALL ASPECTS OF THE JOB DESCRIPTION, THE INDIVIDUALS' PERFORMANCE AND INDEPENDENT RESEARCH ON THE SALARIES OF SIMILAR POSITIONS AT COMPARABLE ORGANIZATIONS (DRAWN FROM PUBLICLY AVAILABLE INFORMATION ON FORM 990S AND OTHER DOCUMENTS). IN ORDER TO ASSURE THAT COMPENSATION REMAINS REASONABLE AFTER IT HAS BEEN SET, THE ABC BOARD ENGAGES IN PERIODIC REVIEWS OF UPDATED INFORMATION.

FORM 990, PART VI, SECTION C, LINE 19: ABC MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC BY POSTING THEM ON GIVINGMATTERS.ORG (AN AFFILIATE OF GUIDESTAR.ORG). ANY DOCUMENTS NOT FOUND ON THE ORGANIZATION'S PROFILE ARE AVAILABLE UPON REQUEST.

SALARY REIMBURSEMENT

THE ARTS AND BUSINESS COUNCIL REIMBURSES A RELATED ORGANIZATION FOR PERSONNEL COSTS (WAGES, PAYROLL TAXES AND BENEFITS) INCLUDING OFFICER COMPENSATION. WHILE ABC DOES NOT ISSUE W-2'S, THE FORM 990 REFLECTS THE ACTUAL EXPENSE PAID TO REIMBURSE THE RELATED ORGANIZATION FOR ITS EMPLOYEES.

032212 01-24-11

Form 8868 (Rev. 1-2011)					Page 2	
 If you are filing for an Additional (Not Automatic) 3-Month Example. 	xtension, o	complete only Part II and check this bo	ox	►	X	
Note. Only complete Part II if you have already been granted an						
• If you are filing for an Automatic 3-Month Extension, complete						
Part II Additional (Not Automatic) 3-Month E	Extensio	n of Time. Only file the original (no c	opies r	needed).		
Name of exempt organization			Emp	loyer identification	number	
Type or ARTS AND BUSINESS COUNCIL OF GREATER						
print NASHVILLE, INC. 20-3255129 File by the 20-3255129						
extended Number, street, and room or suite no. If a P.O. box, s		tions.				
due date for 211 COMMERCE STREET, NO. 10						
return. See City, town or post office, state, and ZIP code. For a finstructions	foreign add	tress, see instructions.				
NASHVILLE, TN 37201-1802						
Enter the Return code for the return that this application is for (fi	le a separa	te application for each return)			01	
	1				1	
Application	Return	Application			Return	
Is For	Code	Is For			Code	
Form 990	01	Farma 40.44 A			00	
Form 990-BL	02	Form 1041-A			08	
Form 990-EZ Form 990-PF	01	Form 4720 Form 5227			09 10	
Form 990-PF Form 990-T (sec. 401(a) or 408(a) trust)	04	Form 6069			10	
Form 990-T (trust other than above)	05	Form 8870			12	
STOP! Do not complete Part II if you were not already grante			elv file	d Form 8868	12	
CONNIE F. VALE			Siy inc			
• The books are in the care of > 211 COMMERCE S		UITE 100 - NASHVILLE	. т	N 37201		
Telephone No. ► 615-743-3055		FAX No. ►	, –			
 If the organization does not have an office or place of busines 	s in the Ur			►		
 If this is for a Group Return, enter the organization's four digit 					heck this	
box \blacktriangleright . If it is for part of the group, check this box \blacktriangleright						
4 I request an additional 3-month extension of time until		15, 2012				
5 For calendar year, or other tax year beginning	JUL 1	, 2010 , and ending	JUN	30, 2011		
6 If the tax year entered in line 5 is for less than 12 months,			Final r			
Change in accounting period						
7 State in detail why you need the extension						
AWAITING INFORMATION FROM THI	RD PA	RTIES				
				-		
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any				
nonrefundable credits. See instructions.			8a	\$	0.	
b If this application is for Form 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and estimated				
tax payments made. Include any prior year overpayment a	llowed as a	a credit and any amount paid			-	
previously with Form 8868.			8b	\$	0.	
c Balance due. Subtract line 8b from line 8a. Include your p	•	th this form, if required, by using			•	
EFTPS (Electronic Federal Tax Payment System). See inst			8c	\$	0.	
		d Verification				
Under penalties of perjury, I declare that I have examined this form, includit is true, correct, and complete, and that I am authorized to prepare this f		panying schedules and statements, and to the	e best o	t my knowledge and b	elief,	
Signature Title	CPA		Date			