CHANGE IN ACCOUNTING PERIOD

Form **990**

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

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

OMB No. 1545-0047 2003

Open to Public Inspection

Depa Inter	artment o	of the Treasury enue Service	ber The organization may have	nefit trust or private found to use a copy of this return to	lation) satisfy state	reporting requirements.	J	Open to Public Inspection		
			ar year, or tax year beginning 8/01		5/31/0			•		
В	Check if	applicable.	lease C Name of organization				D Emp	loyer ID number		
	Addres	cc change	se IRS bel or				58	-1440788		
	Name		int or NASHVILLE CITY	BALLET			E Tele	phone number		
	Initial r	return ty	ype. Number and street (or P.O. box if ma	ail is not delivered to street addr	ess)	Room/suite	61	5-297-2966		
	Final r	Cluiii	See 3630 REDMON STR	EET			F Acco	ounting method: Casl		
X	Amend	dod roturn I .	city or town, state or country, and ZI	P + 4			X Accru	ual Other (specify)		
	Applica	ation pending ti		TN 3720	9		•			
			Section 501(c)(3) organizations and 4947(a	a)(1) nonexempt charitable	H and I	are not applicable to se	ction 527 org	ganizations.		
			trusts must attach a completed Schedule	A (Form 990 or 990-EZ).	H(a)	Is this a group return for	affiliates?	Yes X No		
G	Websit	e: WWW	.NASHVILLEBALLET.COM		H(b)	If "Yes," enter number of	f affiliates	•		
J	Organia	zation type		_	H(c)	Are all affiliates included	?	Yes No		
	(check	only one)	X 501(c) (3) ∢ (insert no.)	4947(a)(1) or 527		(If "No," att. a list. See ir	nstr.)			
K	Check I	here 🕨 📗	if the organization's gross receipts are norm	ally not more than \$25,000	H(d)	Is this a separate return	filed by an			
	The org	ganization need	d not file a return with the IRS; but if the orga	anization received a		organization covered by	a group rulin	ng? Yes X No		
	Form 9	90 Package in	the mail, it should file a return without finance	cial data. Some states	1 (Group Exemption Nu	mber 🕨			
	require	a complete r	return.		_	Check ▶ 📗 if the	e organizati	ion is not required		
<u>L</u>	Gross r	receipts: Add li	nes 6b, 8b, 9b, and 10b to line 12	2,496,249	9	to attach Sch. B (For	m 990, 990)-EZ, or 990-PF).		
_P	art I	Reveni	ue, Expenses, and Changes in Ne	et Assets or Fund Ba	alances	(See page 18 of	the instr	ructions.)		
	1	Contributions	, gifts, grants, and similar amounts received:							
	а	Direct public	support		1a	1,422,761	<u>L</u>			
	b	Indirect public	c support		1b					
	С	Government	contributions (grants)		1c	206,500	2			
	d	Total (add lin	contributions (grants) nes 1a through 1c) (cash \$1,62	29,261 noncash \$)	1d	1,629,261		
	2	Program serv	vice revenue including government fees and	2	803,735					
	3	Membership	dues and assessments	and assessments						
	4						4	9,224		
	5	Dividends and	d interest from securities				5	6,179		
	6a	Gross rents			6a		_			
	b		expenses		6b					
	С	Net rental inc	come or (loss) (subtract line 6b from line 6a)				6c			
R e	7	Other investn	ment income (describe)	 		7			
V	8a	Gross amoun	nt from sales of assets other	(A) Securities		(B) Other	_			
e n		than inventor	·		8a	15 60	_			
u e	b		other basis and sales expenses		8b	15,689				
	С	` ,) (attach schedule)		8c	-15,689	_	15 600		
	d		loss) (combine line 8c, columns (A) and (B))			EE STMT 1	8d	-15,689		
	9	•	ts and activities (attach schedule). If any amo		here					
	а		ue (not including \$	of	ا م					
	١.				9a		_			
	b		expenses other than fundraising expenses		9b		- 0-			
	C 40a		or (loss) from special events (subtract line 9b		I		9c			
	10a	Less: cost of	of inventory, less returns and allowances		10a 10b		_			
	b		or (loss) from sales of inventory (attach sched				10c			
	11							47,850		
	12		ie (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c,					2,480,560		
_			· // /: 44 / (D))				4.0	1,634,339		
E X	13 14	-						260,196		
р е	15		and general (from line 44, column (C))				1 4- 1	137,477		
n s		٠,	· · · · · · · · · · · · · · · · · · ·				40	<u> </u>		
		ayın c ıns io					10			
е	16 17	Total avnone	, , , , , , , , , , , , , , , , , , , ,				17	2,032.012		
e s_	17		ses (add lines 16 and 44, column (A))					2,032,012 448,548		
e s A	17 18	Excess or (de	ses (add lines 16 and 44, column (A)) eficit) for the year (subtract line 17 from line	12)			18	448,548		
e s_	17	Excess or (de Net assets or	ses (add lines 16 and 44, column (A))	12) e 73, column (A))			18 19			

Part II

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations

Statement of

	Functional Expenses and section 4947	'(a)(1) non	exempt charitable trusts bu	ut 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	(C) Management	(D) Fundraising
				services	and general	
22	Grants and allocations (attach schedule)) 22				
23	Specific assistance to individuals	23				
	Benefits paid to or for members					
	Compensation of officers, directors, etc.					
	Other salaries and wages		786,141	593,301	154,233	38,607
27	Pension plan contributions	27				
28	Other employee benefits	28	62,577		6,752	1,690
	Payroll taxes	1 20 1	89,119	59,896	23,373	5,850
30	Professional fundraising fees	30	53,978			53 , 978
31	Accounting fees	31				
32	Legal fees	32				
33	Supplies	33	64,185		7,218	16,055
34	Telephone	34	52,080	40,016	10,004	2,060
35	Postage and shipping	35	60 504	45 500	10 155	2 020
36	Occupancy	36	60,784	45,588	12,157	3,039
	Equipment rental and maintenance		17,045 72,345	3,409 72,345	12,784	852
38	Printing and publications	38	35,642	35,272		370
39 40	Travel	39 40	33,042	33,272		370
	Conferences, conventions, and meetings	41	36,408	27,306	7,282	1,820
	Depreciation, depletion, etc. (attach schedule)		97,224	72,918	19,445	4,861
	Other expenses not covered above (itemize): a	43a	3,,221	72/320	17,113	1,001
	SEE STATEMENT 2	43b	604,484	589,241	6,948	8,295
		43c				
	l	43d				
е)	43e				
44	Total functional expenses (add lines 22 - 43). Organizations					
	completing columns (B)-(D), carry these totals to lines 13-15	44	2,032,012	1,634,339	260,196	137,477
	nt Costs. Check ▶ ☐ if you are following SOP 98-2.					
Are	any joint costs from a combined educational campaign and	I fundrais	ing solicitation reported	I in (B) Program service	s?	Yes X No
	res," enter (i) the aggregate amount of these joint costs \$;
	the amount allocated to Management and general \$			unt allocated to Fundraising		
	Part III Statement of Program Service Acc	omplis	shments (See pag	ge 25 of the instruc	tions.)	Program Service
	at is the organization's primary exempt purpose? SEE STATEMENT 3					Expenses
	organizations must describe their exempt purpose achievement	 ents in a	clear and concise mar	oner State the number		(Required for 501(c)(3) & (4) orgs., & 4947(a)(1)
of o	clients served, publications issued, etc. Discuss achievement	ts that are	e not measurable. (Sed	ction 501(c)(3) and (4)		trústs; but optional for
	anizations and 4947(a)(1) nonexempt charitable trusts must SEE STATEMENT 4	also ente	er the amount of grants	s and allocations to othe	ers.)	others.)
а	DEE DIRIEMENT 4					
			(Grants and all	ocations \$		1,634,339
b			•	φ		
			(Grants and all	ocations \$)	
С			,		,	
			(Grants and all	ocations \$)	
d						
			(Grants and all	ocations \$)	
	Other program services (attach schedule)		(Grants and all)	
	Total of Program Service Expenses (should equal line 44	1, column	(B), Program services)	<u></u>	1,634,339 Form 990 (2003)
DAA						

Form 990 (2003)

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

49 Grants receivable 50 Receivables from officers, directors, trustees, and key employees (attach schedule) 50 Sta Other notes and loans receivable (attach schedule) 51a Other notes and loans receivable (attach schedule) 51b 51c t 52 Inventories for sale or use 53 Prepaid expenses and deferred charges 549 550 550 551 551 552 553 553 553 554 555 555 555 555 555 556 557 557 557 557		Note:	Where required, attached schedules and amounts within	the descr	iption	(A)		(B)
46 Savings and temporary cash investments	_	AE.	Onely ware interest branches				AE.	
47a Accounts receivable b Less: allowance for doubtful accounts 47b			•			303,000	 	170/110
b Less: allowance for doubtful accounts		70	Davings and temporary dash investments				70	
b Less: allowance for doubtful accounts		47a	Accounts receivable	47a	47,372			
48a Pledges receivable 48a 645,547 b Less: allowence for doubtful accounts 48b 15,000 668,200 48c 630,547 49 Grants receivable 49 Grants receivable 49 670					, -	28,142	47c	47,372
b Loss: allowance for doubtful accounts		_				•		•
b Loss: allowance for doubtful accounts		48a	Pledges receivable	48a	645,547			
49 Grants receivable 50 Receivables from officers, directors, trustees, and key employees (attach schedule) 51 Cher notes and Grant receivable (attach schedule) 5 Sta 5 Prepatit expenses and deterred charges 5 SEE STMT 5		b		48b		668,200	48c	630,547
S Receivables from officers, directors, frustees, and key employees (attach schedule) S 151 Officer notes and loans receivable (attach schedule) D Less: allowance for doubtful accounts SEE STMT 5		49	Cranta receivable		_		49	
State Commonstrate State Stat		50						
s 51	Α		/- ((1 1 - 1 1 - 1				50	
b Less: allowance for doubtful accounts	s	51a						
b Less: allowance for doubtful accounts	s		schedule)	51a				
t 5 2 Inventories for sale or use	е	b	Less: allowance for doubtful accounts	51b			51c	
Section Sec	t						52	12,105
55a Investments-land, buildings, and equipment: basis b Less: accumulated depreciation (attach schedule) 55b 55a 55a 55b 55c 55c 55b 55c 55	s	53	Prepaid expenses and deferred charges			36,457	53	13,768
S5a Investments-land, buildings, and equipment: basis S5b		54	Investments-securities SEE STMT	5 ▶	Cost X FMV		54	61,179
b Less: accumulated depreciation (attach schedule)		55a	Investments-land, buildings, and					
b Less: accumulated depreciation (attach schedule) 56 Investments-other (attach schedule) 57a Land, buildings, and equipment: basis b Less: accumulated depreciation (attach schedule) 57b Sept. 1,871,099 57c 1,822,330 58 Other assets (describe ► SEE STMT 6 57b 899,178 1,871,099 57c 1,822,330 58 Other assets (describe ► SEE STMT 7) 20,996 58 18,196 59 Total assets (add lines 45 through 59) (must equal line 74) 2,942,454 59 3,081,613 1 60 Accounts payable and accrued expenses 157,800 60 145,257 61 Grants payable 62 Deferred revenue SEE STMT 8 9,795 62 182,651 1 64a Tax-exempt bond liabilities (attach schedule) 63 Loans from officers, directors, trustees, and key employees (attach schedule) 64a Tax-exempt bond liabilities (attach schedule) 65 Other liabilities (describe ►) 65 66 Total liabilities (add lines 60 through 65) 1,266,297 66 956,908 Organizations that follow SFAS 117, check here ► X and complete lines 67 through 69 and lines 73 and 74. NF 67 Unrestricted 937,957 67 1,432,979 68 Temporarily restricted 99 Permanently restricted 69 Permanently restricted 7738,200 68 630,547 69 Permanently restricted 77 and 74. 70 Capital stock, trust principal, or current funds 70 complete lines 70 through 74. 71 Paick-in or capital surplus, or land, building, and equipment fund 71 and 72 relations complete lines 70 through 74. 71 Paick-in or capital surplus, or land, building, and equipment fund 71 relation or capital surplus, or land, building, and equipment fund 71 relation or capital surplus, or land, building, and equipment fund 72 relation or complete lines 70 through 72 relations complete lines 90 column (8) must equal line 21) 1,676,157 73 2,124,705			equipment: basis	55a				
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56 Investments-other (attach schedule) 57a 2,721,508 57b Land, buildings, and equipment: basis 57b S7b S99,178 1,871,099 57c 1,822,330 58 Other assets (describe ▶ SEE STMT 7) 20,996 58 18,196 59 Total assets (add lines 45 through 58) (must equal line 74) 2,942,454 59 3,081,613 157,800 60 145,257 61 61 62 Deferred revenue SEE STMT 8 9,795 62 182,651 63 Loans from officers, directors, trustees, and key employees (attach schedule) 64a Lare-exempt bond liabilities (attach schedule) 65 Cher liabilities (attach schedule) SEE WORKSHEET 1,098,702 64b 629,000 65 66 Total liabilities (add lines 60 through 65) 1,266,297 66 956,908 67 through 69 and lines 73 and 74. 70 1,432,979 68 Temporarily restricted 99 Permanently restricted 99 Permanently restricted 69 Permanently restricted 69 Permanently restricted 738,200 68 630,547 68 Temporarily restricted 70 Corganizations that do not follow SFAS 117, check here ▶ and complete lines 70 Capital stock, trust principal, or current funds 70 Capital stock, trust principal, or current funds 72 Retained earnings, endowment, accumulated income, or other funds 72 Capital stock, trust principal, or current funds 73 Capital stock, trust principal, or current funds 74 Paid-in or capital surplus, or land, building, and equipment fund 74 Paid-in or capital surplus, or land, building, and equipment fund 74 Paid-in or capital surplus, or land, building, and equipment fund 75 Paid-i			schedule)	55b			55c	
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58 Other assets (describe ► SEE STMT 7) 59 Total assets (add lines 45 through 58) (must equal line 74) 59 Total assets (add lines 45 through 58) (must equal line 74) 60 Accounts payable and accrued expenses 61 Grants payable 62 Deferred revenue SEE STMT 8 9,795 62 182,651 63 Loans from officers, directors, trustees, and key employees (attach schedule) 64 Tax-exempt bond liabilities (attach schedule) 65 Other liabilities (describe ►) 66 Total liabilities (describe ►) 67 Unrestricted 69 Permanently restricted 69 Permanently restricted 738,200 68 630,547 69 Permanently restricted 70 Capital stock, trust principal, or current funds 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 71 Paid-in or capital surplus, or land, building, and equipment fund 71 Paid-in or capital surplus, or land, building, and equipment fund 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 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) 1,676,157 73 2,124,705		b						
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Comparizations that follow SFAS 117, check here		58	Other assets (describe SEE STMT 7)	_	20,996	58	18,196
Comparizations that follow SFAS 117, check here								
61 Grants payable 62 Deferred revenue SEE STMT 8 9,795 62 182,651 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) 65 65 Other liabilities (add lines 60 through 65) 65 Corganizations that follow SFAS 117, check here		59					59	
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i 63	_	62	Deferred revenue		SEE STMT 8	9,795	62	182,651
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S 66 Total liabilities (add lines 60 through 65)	i				E WORKSHEET	1,098,702	1 1	629,000
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NF 67 Unrestricted 937,957 67 1,432,979 68 Temporarily restricted 738,200 68 630,547 69 Permanently restricted 69 G1,179 Organizations that do not follow SFAS 117, check here □ 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) 1,676,157 73 2,124,705		Orga	-	ina compie	ie iines			
e u t n d 68 Temporarily restricted 738,200 68 630,547 69 Permanently restricted 69 Permanently restricted 69 Permanently restricted 69 Corganizations that do not follow SFAS 117, check here □ and complete lines 70 through 74. 70 Capital stock, trust principal, or current funds 70 Paid-in or capital surplus, or land, building, and equipment fund 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 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) 738,200 68 630,547 738,200 68 630,547 738,200 68 630,547 749 759 769 769 770 770 770 770 770 770 770 770 770 77	NE	67	<u> </u>			937 957	67	1 432 979
69 Permanently restricted Corganizations that do not follow SFAS 117, check here □ and complete lines 70 through 74. Capital stock, trust principal, or current funds 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 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) 1,676,157 73 2,124,705							1	630 547
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column (A) must equal line 19; column (B) must equal line 21)	Ое		` ` `	g., OO OI IIII				
74 Total liabilities and net assets / fund balances (add lines 66 and 73) 2,942,454 74 3,081,613	r s		5	line 21)		1,676,157	73	2,124,705
		74				2,942,454	74	3,081,613

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.

, ,	NASHVILLE CITY					440788				Page 4
			•				-	-		
			•				ents	with Ex	penses	oer
		of th	e instructions.)	_						
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Donated service	es and use				(2) Prior year adjust	ments				
of facilities	\$ 33 , 476				reported on line	20,				
Recoveries of p	orior				Form 990 <u>\$</u>					
year grants	\$				(3) Losses reported	on line 20,				
Other (specify):	_				-					
				·	(4) Other (specify):	dee deve	10			
	·		10 14	5 5		4 -				
Add amounts o	on lines (1) through (4)	D	49,10	33	· · · · · · · · · · · -			h	4	9,165
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		d		_				d		
rotar revenue p	per line 12, Form 990			∣ e	e i otal expenses	oer line 17. Form 990				
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	t of Officers. Directors	e s. T	2,480,56		(line c plus line	d)	ensate	e e	2,03	2,012
rt V List	t of Officers, Directors				(line c plus line	d)	ensated			2,012
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rt V List	t of Officers, Directors			Emp (B	(line c plus line c plus line c plus line c	d)one even if not compe	(D) emplo		je 27 of	kpense and other
rt V List	t of Officers, Directors nstructions.) (A) Name and address			Emp (B)	(line c plus line c loyees (List each) Title and average s per week devoted to	(C) Compensation (If not paid, enter -0)	(D) emplo	Contrib. to	je 27 of	kpense and other
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If "Yes," attach schedule-see page 28 of the instructions.

Pa	ort 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		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
	If "Yes," attach a conformed copy of the changes.			
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
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		X
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		X
b	If "Yes," enter the name of the organization			
	and check whether it is exempt or nonexempt.			
81a	Enter direct and indirect political expenditures. See line 81 instructions [81a			
b	Did the organization file Form 1120-POL for this year?	81b		X
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	X	
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 33,476			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions			
0.5	or gifts were not tax deductible? 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	84b		
85	* * * * * * * * * * * * * * * * * * * *	85a		
b		85b		
	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.			
С	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			
q	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	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? N/A	85h		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12			
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			
b	Gross income from other sources. (Do not net amounts due or paid to other			
	sources against amounts due or received from them.)			
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		X
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	004		x
_	a statement explaining each transaction Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under	89b		
С				Λ
d	sections 4912, 4955, and 4958 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 NONE			
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions.) 90b			50
91	The books are in care of ▶ PAUL KAINE Telephone no. ▶ 615-	297	-29	66
	Located at ▶ 3620 REDMON STREET NASHVILLE, TN ZIP+4 ▶ 37209-48	27		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here			
	and enter the amount of tax-exempt interest received or accrued during the tax year		-	

Part VII	Analysis of Income-Pr	oducing Activities (See pag	<u>e 33 of the i</u>	nstructions.)			
Note: Enter	gross amounts unless otherwise		Unrelate	d business incom	e Exclude	d by sec. 51:	2, 513, or 514	(E) Related or
indicated.			(A) siness code	(B) Amount	(C) Exclusion		(D) nount	
93 Program	service revenue:	Bus	sinèss code	Amount	Exclusion code	Am Am	nount	exempt function income
•	KET SALES							535,222
	OOLS & WORKSHOPS							257,538
	R FEES							10,975
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							20/3/3
d								
e	-/h.A Parit and an artis							
i Medicare	e/Medicaid payments							
	d contracts from government agen-							
94 Member	ship dues and assessments						2 22 4	
95 Interest	on savings and temporary cash inv	restments			14		9,224	
	Is and interest from securities				14		6,179	
97 Net renta	al income or (loss) from real estate	:						
a debt-fina	inced property							
b not debt	-financed property							
98 Net renta	al income or (loss) from personal p	roperty						
	vestment income							
100 Gain or	(loss) from sales of assets other th	an inventory						-15,689
	me or (loss) from special events							-
102 Gross pi	rofit or (loss) from sales of inventor	v						
	venue: a	' ····· -						
	CELLANEOUS							47,850
								17,030
e	() () () () () () ()						15 402	93E 90 <i>E</i>
	(add columns (B), (D), and (E))				0		15,403	835,896
	dd line 104, columns (B), (D), and						··· • <u> </u>	851,299
	5 plus line 1d, Part I, should equal t				- /0			
Part VIII	Relationship of Activit							
Line No.	Explain how each activity for whi	ich income is reported in c	olumn (E) d	of Part VII contr	ributed important	ly to the ac	ccomplishmen	t
	of the organization's exempt pur							
	ALL REVENUE IS	GENERATED TO	COVER	COSTS	INCURRED	BY		
	PRODUCTIONS.							
Part IX	Information Regarding	Taxable Subsidiaries	and Di	sregarded	Entities (See	page 3	4 of the ins	structions.)
,	(A)	(B)		(C)		(D)		(E)
	dress, and EIN of corporation, ship, or disregarded entity	Percentage of ownership interest	l N	lature of activiti	es	Total inc	ome	End-of-year assets
	I/A	%						400010
	-,	%						
		%						
		70						
Don't V	Information Departing 7	Transfers Associates	didle D	larga mal. Da	nofit Control	-1- (0		
Part X	Information Regarding 1							
` ,	the organization, during the year, r		•		•	al benefit c	contract?	Yes X No
(b) Did	the organization, during the year, p	pay premiums, directly or in	ndirectly, or	n a personal be	nefit contract?			Yes X No
Note: If "Y	es" to (b) , file Form 8870 and Form	m 4720 (see instructions).						
	Under penalties of perjury, I declare t							•
Please	and belief, it is true, correct, and com	plete. Declaration of preparer (other than o	fficer) is based or	all information of	which prepar	rer has any kno	wledge.
Sign								
_	Signature of officer						Date	
Here								
	Type or print name and title.							
	Preparer's		Da	ate	Check if	Pren	arer's SSN or F	PTIN (See Gen. Instr. W)
Paid	signature		"		self- employed	_ I '	015647	,
Preparer's		ANKENSHIP CPA	GROTT	P, PJ.T.C	Simpleyou F			<u>45-0491842</u>
•	10	9 WESTPARK DR			20		 , 	
Use Only	if self-employed),	A MEDILAKY DK	TANE.	SULTE 4	30		Phone	

SCHEDULE A (Form 990 or 990-EZ) 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.)

OMB No. 1545-0047 2003

Department of the Treasury Internal Revenue Service

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

Employer identification number Name of the organization NASHVILLE CITY BALLET 58-1440788 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.") (d) Contributions to (e) Expense (a) Name and address of each employee paid more (b) Title and average hours (c) Compensation employee ben. plans & account and other than \$50,000 per week devoted to position deferred compensation allowances NONE Total number of other employees paid over \$50,000 Compensation of the Five Highest Paid Independent Contractors for Professional Services Part II (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

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

Schedule A (Form 990 or 990-EZ) 2003

professional services

Pa	art II	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	atte	ing the year, has the organization attempted to influence national, state, or local legislation, including any empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid nourred in connection with the lobbying activities * (Must equal amounts on line 38,			
		t VI-A, or line i of Part VI-B.)	1		x
		panizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other	-		
	_	anizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of			
	_	lobbying activities.			
2		ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any			
		stantial 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			
		ner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the			
	tran	sactions.)			
а	Sale	e, exchange, or leasing of property?	2a		х
b		ding of money or other extension of credit?	2b		Х
С		nishing of goods, services, or facilities?	2c		Х
d		rment of compensation (or payment or reimbursement of expiration if more than \$1,000)? SEE PART V, FORM 990	2d	Х	
е	Tra	nsfer of any part of its income or assets?	2e		х
3a	Do	you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how			
		determine that recipients qualify to receive payments.) SEE STMT 11	3a	x	
3b		you have a section 403(b) annuity plan for your employees?	3b		Х
4		you maintain any separate account for participating donors where donors have the right to provide advice			
	on 1	the use or distribution of funds?	4		X
Pa	art I	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
The	orgar	nization is not a private foundation because it is: (Please check only ONE applicable box.)			
5	Н	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6	Н	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7	Н	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8	Н	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9	Ш	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	X	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	Ц	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	Ш	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)) Line r	numbei	· _
		(a) Name(s) of supported organization(s)	from a	bove	
14	П	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 instruction					
Cale	ndar 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.)	1,493,225	1,936,578	1,519,522	858,211	5,807,536
<u>16</u>	Membership fees received					0
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	904,396	891,585	850,497	751,451	3,397,929
18	Gross income from interest, dividends,					
	amounts received from payment 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	5,090	646	2,119	3,308	11,163
19	Net income from unrelated business					_
	activities not included in line 18					0
20	Tax revenues levied for the organization's					
	benefits and either paid to it or expended on					
	its behalf					0
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					0
22	Other income. Attach a schedule. Do not include gain or (loss) from					
	sale of capital assets STMT 12	51,145				
23	Total of lines 15 through 22		2,868,121			
24	Line 23 minus line 17			1,558,984		5,984,597
25	Enter 1% of line 23	24,539	28,681		16,511	
26	Organizations described on lines 10 or				26a	119,692
b	Prepare a list for your records to show the			`		
	governmental unit or publicly supported or					106 600
	amount shown in line 26a. Do not file this	-	Enter the total of all the	ese excess amounts		196,630
	Total support for section 509(a)(1) test: Er	. , ,			▶ <u>26c</u>	5,984,597
d	Add: Amounts from column (e) for lines:	18 11,1	19	106 630		202 601
		22 165, 8		196,630	26d	373,691
	Public support (line 26c minus line 26d tot					5,610,906
	Public support percentage (line 26e (nu					93.7558 %
27	Organizations described on line 12:			I 17 that were received	•	
	person," prepare a list for your records to			in each year from, each	h "disqualified person."	NT / 7
	Do not file this list with your return. En				(4000)	N/A
		001)				
b	For any amount included in line 17 that w		•		•	
	show the name of, and amount received for	•	_	• •		
	(Include in the list organizations described	_			-	-
	the difference between the amount receive	ed and the larger amoul	nt described in (1) or (2), enter the sum of the	se differences (the exce	
	amounts) for each year:	204)	(0000)		(4000)	N/A
		001)	(2000)		(1999)	
С	()	15			► 1 I	1
_		20			27c	
d		and line 27	d total		27d	
e						
f	Total support for section 509(a)(2) test: Er					
g	• • • •		, , , , , , , , , , , , , , , , , , , ,			%
<u>h</u>				· · · · · · · · · · · · · · · · · · ·	▶ 27h	%
28	Unusual Grants: For an organization des	cribed in line 10, 11, or	12 that received any u	nusuai grants during 19	99 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.

Schedule A (Form 990 or 990-EZ) 2003 NASHVILLE CITY BALLET 58-1440788 Page 4 **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 29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, Yes No other governing instrument, or in a resolution of its governing body? 29 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? 30 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? 31 If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) Does the organization maintain the following: a Records indicating the racial composition of the student body, faculty, and administrative staff? 32a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 32b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 32c d Copies of all material used by the organization or on its behalf to solicit contributions? 32d If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: 33 Students' rights or privileges? 33a 33b Admissions policies? Employment of faculty or administrative staff? 33c Scholarships or other financial assistance? 33d Educational policies? 33e 33f Athletic programs? **h** Other extracurricular activities? 33h If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) 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.

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

	hedule A (Form 990 or 990-EZ) 2003 N	ASHVILLE CI	TY BALLET			58-	<u>144(</u>	<u> </u>		Page 5
F	Part VI-A Lobbying Expend (To be completed				-		ctions N/A	.)		
Ch	eck a if the organization belon							d contro	ol" provisions app	olv.
<u> </u>		Lobbying Expend			, 0 0 0 1 0	(a) Affiliated gr			(b) To be complet for ALL electing	ted ng
_	, , ,	ires" means amounts p							organizations	รั
	Total lobbying expenditures to influence				36					
	Total lobbying expenditures to influence				37					
38	Total lobbying expenditures (add lines 36	and 37)			38					
	Other exempt purpose expenditures				39					
	Total exempt purpose expenditures (add				40					
41	Lobbying nontaxable amount. Enter the		=							
	If the amount on line 40 is-		ontaxable amount is-	\neg						
	Not over \$500,000		on line 40	I .						
	Over \$500,000 but not over \$1,000,000	•	of the excess over \$500,00	1						
	Over \$1,000,000 but not over \$1,500,000			l l	41					
	Over \$1,500,000 but not over \$17,000,000		of the excess over \$1,500,0							
40	Over \$17,000,000				42					
	Grassroots nontaxable amount (enter 25				42					
	Subtract line 42 from line 36. Enter -0- if Subtract line 41 from line 38. Enter -0- if				44					
44	Subtract line 41 from line 36. Enter -0- ii	iiile 41 is more trian iiri	e 30		44					
	Caution: If there is an amount on either	line 43 or line 44 your	must file Form 4720							
_	Caution: If there is all amount on cline.		ging Period Under	r Section	501(h)				
	(Some organizations t		1(h) election do not hav		•	•	nns hel	ΟW		
	`		rough 50 on page 11 of	•				• • • • • • • • • • • • • • • • • • • •		
								_		
			Lobbying Exp	enditures D	uring 4	-Year Averaç	jing Pe	eriod		
	Calendar year (or	(a)	(b)	(c)		(d)		(e)	
	fiscal year beginning in)	2003	2002	200)1	2	2000		Total	
<u>45</u>	Lobbying nontaxable amount									
46	Lobbying ceiling amount (150% of									
_	line 45(e))									
<u>47</u>	Total lobbying expenditures									
	Grassroots nontaxable amount									
49	Grassroots ceiling amount (150% of									
_	line 48(e))									
۲0	Consequents labely in a sum on distance									
	Grassroots lobbying expenditures Part VI-B Lobbying Activity	by Nanalactina	Public Charities							
ı	(For reporting only	•		ata Part \/	Ί_Δ\ (Saa nana 1	12 of	tha ind	etructione)	N/A
	ring the year, did the organization attempt					bee page		uie iiis	structions.)	14/17
	empt to influence public opinion on a legis	·	•	•	ıy		Yes	No	Amount	
and	Voluntoors									
k	- · · · · · · · · · · · · · · · · · · ·		s reported on lines c thi							
	Madia advantias assauta									
e	B 10 0 10 1 1 1 1	t statements								
f										
ç			s, or a legislative body							
ŀ										
i										
	If "Yes" to any of the above, also attac									

SCHE	dule A (FOIII			THE CITT DATES	30-1440700		Г	age c
Pa	art VII	_	_		s and Relationships With Noncharitabl	е		
 51	Did the ren			ee page 12 of the instructions	h any other organization described in section			
J 1				organizations) or in section 527, re				
а				oncharitable exempt organization of			Yes	No
	(i) Cash			· •		51a(i)		Х
	(ii) Other					a(ii)		X
b								
	(i) Sales	or exchanges of assets	s with a nond	charitable exempt organization		b(i)		Х
	(ii) Purch	nases of assets from a	noncharitable	exempt organization		b(ii)		X
	(iii) Renta	al of facilities, equipmen	t, or other as	sets		b(iii)		Х
	(iv) Reim	bursement arrangement	ts			b(iv)		X
	(v) Loan	s or loan guarantees				b(v)		X
						b(vi)		X
C	•		-			С		X
d				_	(b) should always show the fair market value of the			
	-	-	-		on received less than fair market value in any			
			, snow in con	umn (d) the value of the goods, othe				
	(a) Line no.	(b) Amount involved	Name o	(c) If noncharitable exempt organization	(d) Description of transfers, transactions, and sharing	arrangem	ante	
	LINC NO.	7 triodite involved	Traine c	in Honoriantable exempt organization	Description of transfers, transactions, and sharing	arrangem	J1110	
N	/A							
	,							
	1. (1	· · · · · · · · · · · · · · · · · · ·		91				
52a				with, or related to, one or more tax-		. 🗆 .	es X	7 N.
h		mplete the following sch		ian section 501(c)(3)) or in section :	527?	r	25 <u> </u> 2	z NO
	11 165, 601	(a)	ledule.	(b)	(c)			
		Name of organization		Type of organization	Description of relationship			
_	N/A	Traine of organization		Type of organization	Description of relationship			
	,							

NAS	SHBAL						
Fo	orms		Mor	tgages and Ot	her Notes Payable		
	90 / 990-PF						2003
		For ca	alendar year 2003, or	tax year beginning	8/01/03 , and ending	5/31/04	
Nam	ne					Employer Ider	ntification Number
NT.	ACUNITIE CT	тv D7	\ T T TOTT			58-1440	700
	ASHVILLE CI	II DA	7PPET			56-1440	700
F	ORM 990, PA	RT I	, LINE 64B	- ADDITION	AL INFORMATION		
		Name	e of lender		Relationship to	disqualified person	
(1)	REGIONS BA	NK					
(2)	ROBERT E.	CLEME	INTS				
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
<u>(9)</u>							
<u>(10)</u>							
	Original amou	nt		Maturity			Interest
	borrowed		Date of loan	date	Repayment term	S	rate
(1)	1,079,	000	7/07/03	7/07/04	BALLOON AT MATUR	ITY	4.000
(2)	66,	000	12/06/01	12/07/03	24 MOS.\$2,282;PL	US BALLOON	9.500
(3)							
(4)							
(5)							
(6)							
(7)							
<u>(8)</u>							
(9)					+		
<u>(10)</u>							
			rovided by borrower		-	e of loan	
(1)	REAL ESTAT	'E			BUILDING PURCHASE		
(2)	NONE				OPERATING CAPITAL		
(3)							
<u>(4)</u>					+		
(5) (6)							
(6) (7)					1		
(7) (8)					1		
(<u>0)</u> (9)							
(10)							
						_	
	Consid	deration fu	rnished by lender		Balance due at beginning of year		nce due at d of year

(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)

Totals

1,079,000 19,702

1,098,702

629,000

629,000

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions.

Attach to your tax return.

OMB No. 1545-0172

2003 Attachment Sequence No.

67

Department of the Treasury Internal Revenue Service Name(s) shown on return

NASHVILLE CITY BALLET

Identifying number 58-1440788

	ess or activity to which this form relates NDIRECT DEPRECIATI	ON							
	rt I Election To Expen		erty Under Sect	ion 179					
	Note: If you have a	-	-		complet	e Part I.	•		
1	Maximum amount. See page 2 of t							1	100,000
2	Total cost of section 179 property p							2	-
3	Threshold cost of section 179 prop		to the test or					3	400,000
4	Reduction in limitation. Subtract line							4	-
5	Dollar limitation for tax year. Subtract line	e 4 from line 1. If zero or						5	
	(a) Description	n of property	(b) Cost (business us	e only)	(c) El	ected cost		
6									
7	Listed property. Enter the amount f	rom line 29			7				
8	Total elected cost of section 179 pr	operty. Add amounts	in column (c), lines 6	and 7				8	
9	Tentative deduction. Enter the sma							9	
10	Carryover of disallowed deduction f	rom line 13 of your 2	002 Form 4562					10	
11	Business income limitation. Enter th	ne smaller of busines	s income (not less tha	n zero) or line 5 (s	ee instru	ctions)		11	
12	Section 179 expense deduction. Ac							12	
13	Carryover of disallowed deduction t	o 2004. Add lines 9 a	and 10, less line 12	>	13				
Note	: Do not use Part II or Part III below	for listed property. In	stead, use Part V.						
_Pa	rt II Special Depreciati	on Allowance a	nd Other Depred	ciation (Do not	t includ	e listed	propert	y.)	
14	Special depreciation allowance for qualifi	ed prop. (other than liste	ed prop.) placed in service	e during the tax year	(see pg. 3	of the instr.)	14	
15	Property subject to section 168(f)(1) election (see page	4 of the instructions)					15	
16	Other depreciation (including ACRS							16	97,225
Pa	rt III MACRS Depreciat	ion (Do not inclu	ude listed propert	y.) (See page 4	4 of the	instruct	ions.)		
			Section	n A					
17	MACRS deductions for assets place	ed in service in tax y	ears beginning before	2003				17	0
18	If you are electing under section 16	88(i)(4) to group any a	assets placed in service	e during the tax					
	year into one or more general asse	t accounts, check he	re	<u></u>			<u>▶ </u>		
	Section B-As	ssets Placed in Serv	vice During 2003 Tax	Year Using the C	eneral I	Depreciation	on Syste	m	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for deprecia (business/investment only-see instruction	tion use period (d) Recovery period	(e) Con	vention	(f) Metho	od	(g) Depreciation deduction
<u>19a</u>	3-year property								
b	5-year property								
_с	7-year property								
d	10-year property								
е	15-year property								
f	20-year property								
g	25-year property			25 yrs.			S/L		
h	Residential rental			27.5 yrs.	N	IM	S/L		
	property			27.5 yrs.	I N	1M	S/L		
i	Nonresidential real			39 yrs.	I N	1M	S/L		
	property				l N	1M	S/L		
	Section C-Ass	ets Placed in Service	ce During 2003 Tax	rear Using the Alt	ernative	Deprecia	tion Syst	em	
<u>20a</u>	Class life	_					S/L		
	12-year			12 yrs.			S/L		
	40-year			40 yrs.	l N	1M	S/L		
_Pa	rt IV Summary (see pag		ctions)				-		
21	Listed property. Enter amount from							21	
22	Total. Add amounts from line 12, li	_							07.00-
	Enter here and on the appropriate			rporations-see instr				22	97,225
23	For assets shown above and place	_							
	enter the portion of the basis attribu	utable to section 263/	A costs		23				

58-1440788

Federal Statements

FYE: 5/31/2004

Statement 1 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Other

	Desc				Hov Rec			Whom Sold		
	Date Acquired	Date Sold		Sale Price		Cost & Expense		Deprec		Gain/ -Loss
FLOOR				P	URCHA	SE				
	6/29/01	12/31/03	\$		\$	22,152	\$	12,922	\$	-9,230
FLOOR				P	URCHA	SE				
	6/29/01	12/31/03				4,990		2,911		-2,079
FLOOR				P	URCHA	SE				
	7/23/01	12/31/03				4,734		354		-4,380
CLIENT LIST				P.	URCHA	SE				
	6/30/99	12/31/03	_			14,200	_	14,200		
TOTAL			\$		0 \$	46,076	\$_	30,387	\$_	-15,689

Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
EXPENSES				
ARTISTS FEES AND ROYALTIES	186,833	186,833		
MOUNTING EXPENSE	25,778	25,778		
SHOE AND TIGHT EXPENSE	26,031	26,031		
PROFESSIONAL EXPENSE	86,146	83,938	1,240	968
BALLET BOUTIQUE EXPENSE	14,662	14,662		
THEATER RENTAL & CREW EXP	126,498	126,498		
INSURANCE	21,511	16,133	4,302	1,076
LAYOUT DESIGN AND FILMS	85,029	84,111		918
AUDITION EXPENSE	6,279	6,279		
MISCELLANEOUS	12,368	5,629	1,406	5,333
SPECIAL EVENTS EXPENSE	13,349	13,349		
TOTAL	\$ 604,484	\$ 589,241	\$ 6,948	\$ 8,295

Statement 3 - Form 990, Part III - Organization's Primary Exempt Purpose

THE PURPOSE OF THE ORGANIZATION IS TO MAINTAIN A RESIDENT PROFESSIONAL BALLET COMPANY WITH AN AFFILIATED SCHOOL MANDATED TO EDUCATE AND ENTERTAIN.

Statement 4 - Form 990, Part III, Line a - Statement of Program Service Accomplishments

PROMOTE THE PURPOSE OF THE ORGANIZATION AND RELATED MANDATES WHILE ALSO COLLABORATING WITH OTHER ARTS ORGANIZATIONS WITH THE GOAL OF PROMOTING GENERAL INTERESTS IN THE FINE ARTS.

NASHBAL NASHVILLE CITY BALLET

58-1440788

Federal Statements

FYE: 5/31/2004

Statement 5 - Form 990, Part IV, Line 54 - Investments in Securities
--

Description	Beginning of Year	End of Year	Basis of Valuation
US AND STATE GOVERNMENT BENEFICIAL INTEREST IN ASSETS		61,179	MARKET
		61,179	

Statement 6 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description						
	Beginning of Year	Accum Deprec		End of Year		Accum Deprec
PROPERTY & EQUIPMENT						
	\$ 2,706,240	\$_	835,141	\$ 2,721,508	\$_	899,178
TOTAL	\$ 2,706,240	\$	835,141	\$ 2,721,508	\$_	899,178

Statement 7 - Form 990, Part IV, Line 58 - Other Assets

Description	E	Beginning of Year				
CONSORTIUM	\$	20,996	\$	18,196		
TOTAL	\$	20,996	\$	18,196		

Statement 8 - Form 990, Part IV, Line 62 - Deferred Revenue

Description			 Beginning of Year	_	End of Year	
DEFERRED	REVENUE	(PREPAID	TUITION)	\$ 9,795	\$	182,651
TOTA	AL			\$ 9,795	\$	182,651

Statement 9 - Form 990, Part IV-A - Other Revenue Included on Financial Statements

Description	 Amount
LOSS ON DISPOSAL OF ASSETS	\$ 15,689
TOTAL	\$ 15,689

<u>Statement 10 - Form 990, Part IV-B - Other Expenses Included on Financial Statements</u>

		Description	_	Amount
LOSS	ON DISPOSAL	F ASSETS	\$	15,689
	TOTAL		\$	15,689

NASHBAL NASHVILLE CITY BALLET

58-1440788 FYE: 5/31/2004

Federal Statements

Statement 11 - Schedule A, Part III, Line 4b - Explanation of Grant / Loan Qualifications

SEE CRITERIA ATTACHED

Statement 12 - Schedule A, Part IV-A, Line 22 - Other Income

Description	 2002	_	2001	_	2000	_	1999
MISCELLANEOUS	\$ 51,145	\$_	39,312	\$_	37,343	\$_	38,098
TOTAL	\$ 51,145	\$	39,312	\$	37,343	\$_	38,098

NASHBAL NASHVILLE CITY BALLET

58-1440788

Federal Statements

FYE: 5/31/2004

Form 990, Part I, Line 1a - Direct Public Support

Description		Cash	_	Noncash	Total		
NON-SCHEDULE B CONTRIBUTIONS OTHER CONTRIBUTIONS	\$	517,614 905,147	\$		\$	517,614 905,147	
TOTAL	\$	1,422,761	\$	0	\$	1,422,761	

Form 990, Part I, Line 1c - Government Contributions

Description		Cash		Noncash	Total		
GRANTS	\$	48,000	\$		\$	48,000	
OTHER CONTRIBUTIONS		158,500	_		_	158,500	
TOTAL	\$	206,500	\$_	0	\$_	206,500	

Schedule A, Part IV-A, Line 26b - Excess Gifts

 Total	_	Excess
\$ 248,871	\$	129,179
166,335		46,643
 140,500		20,808
\$ 555,706	\$	196,630
\$ \$	166,335 140,500	\$ 248,871 \$ 166,335 140,500