## Form **990-EZ**

Department of the Treasury Internal Revenue Service

## **Short Form**

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)

Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form
990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the
end of the year may use this form.

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

OMB No. 1545-1150

Open to Public Inspection

			ar year	ear, or tax year beginning , 2007, and ending				, 20				
В		Check if applicable:  Address change  Name change  PA		C Name of organization			D Employ	Employer identification number				
H							01	0868312				
닠		•	print or	Number and street (or P.O. box, if mail is not delivered to	box, if mail is not delivered to street address) Room/suit							
/	Initial retu		type. See	1320 McChesney Ave		, rioemi sante	( 615		554-7414			
H	Terminatio		Specific	City or town, state or country, and ZIP + 4		L			NAME OF TAXABLE PARTY.			
H	Amended Applicatio		Instruc-	Water St. Water Statement Principles of Control of			F Group	romanne promise and the				
므			tions.	Nashville, TN 37216-2731				er				
	• Section	on 501(c)(3) (		ations and 4947(a)(1) nonexempt charitable trusts m	ust attach	1			✓ Cash ☐ Accrual			
			a con	npleted Schedule A (Form 990 or 990-EZ).		Other	(specify) I	<u> </u>				
						H Chec	k ▶ □	if the o	ganization			
			7 (COMMENT)	eatrecompany.org			t required t		, And			
J	Organiz	zation type (c	check or	nly one)— 🗹 501(c) ( 3 ) ◀ (insert no.) 🔲 4947(a)(1)	or 527	Sche	dule B (For	m 990,	990-EZ, or 990-PF).			
				n is not a section 509(a)(3) supporting organization and		eints are nor	mally <b>not</b> n	nore tha	on \$25 000. A return is			
	not requ	ired, but if the	e organi	zation chooses to file a return, be sure to file a complete	return.	cipis are noi	many not n	nore the	11 ψ25,000. Α return is			
				ne 9 to determine gross receipts; if \$100,000 or more, file I		ead of Form	990-F7	▶ \$	· · · · · · · · · · · · · · · · · · ·			
	art I			nses, and Changes in Net Assets or Fund					etructions )			
_			0.5550				58		7900.75			
	1				* * *			1				
	2			evenue including government fees and contracts				2	28927.91			
	3		Membership dues and assessments				[	3				
	4	Investment	2 (0.00)					4				
	5a	Gross amo	ount fro	m sale of assets other than inventory	5a			-				
	b	Less: cost	or other	er basis and sales expenses	5b			1				
m	С	Gain or (loss	s) from s	sale of assets other than inventory. Subtract line 5b from	m line 5a (att	tach schedul	e) L	5c	W 1000			
Ž	6	Special eve	nts and	activities (attach schedule). If any amount is from g	ıaming, che	eck here	íП					
Revenue	а							-				
æ		reported or	100	-								
	Ь			nses other than fundraising expenses	6b			1				
	c	The state of the s						6c				
	7a	Gross sales of inventory, less returns and allowances						00				
				1 1/2				ŀ				
	b	Less: cost										
	C	Gross prot	it or (io	ss) from sales of inventory. Subtract line 7b from	line 7a			7c				
	8	Other rever					)	8	20000 00			
			8 1500	dd lines 1, 2, 3, 4, 5c, 6c, 7c, and 8				9	36828.66			
	10	Grants and	l simila	r amounts paid (attach schedule)				10				
46	11	Benefits pa	Benefits paid to or for members				11					
Še	12	Salaries, of	Salaries, other compensation, and employee benefits					12	300			
Expenses	13	Professiona	Professional fees and other payments to independent contractors					13	17549.50			
×	14	Occupancy	Occupancy, rent, utilities, and maintenance					14	2824.53			
Ш	15	Printing, pu	ublication	ons, postage, and shipping				15	3312.73			
	16	Other expe	enses (d	describe production expenses		2004/2004/2004	)	16	14231.75			
	17	Total expe	enses.	Add lines 10 through 16			>	17	38218.51			
2	18	Excess or	(deficit)	for the year. Subtract line 17 from line 9				18	-1389.85			
Se	19			d balances at beginning of year (from line 27,								
Net Assets		end-of-vea	f-year figure reported on prior year's return)			(induct agre		19	-1984.94			
et	20	Other chan	aes in	net assets or fund balances (attach explanation)				20	0			
Z	21	Net assets	or fund	d balances at end of year. Combine lines 18 thro	ugh 20			21	-3374.79			
P	art II	Balance S	Sheets	-If Total assets on line 25, column (B) are \$250	,000 or mo	re, file Forr	n 990 ins		f Form 990-EZ.			
	***			ee page 60 of the instructions.)			ginning of ye		(B) End of year			
22	2 Cash	n, savings, a					<del> </del>	78 22	6448.21			
23						•		0 23	0			
24	L Otho	ar accete (de	ecriba		7 1 1			0 24	0			
25	Tota	er assets (describe >)				EQF 1	78 25	6448.21				
26	Tota	u assets     . Uliobilities /	docaril					72 26				
27	Net	ii iiabiliities ( assets or fi	uescrit und ba	ne ► lances (line 27 of column (B) must agree with lin	)		-1984.9		9823.00			
:				Import or oblamin (D) must agree with in	0 211		-1304.	24 21	-3374.79			

Ottti	990-22 (2007)							
	t III Statement of Program Service Accomp		of the instruction	ns.)	/Dogs	Expensalired for		/(3)
Wha	t is the organization's primary exempt purpose? the	eatre arts organization				(4) orga		
Desc	cribe what was achieved in carrying out the organiza cribe the services provided, the number of persons ben	tion's exempt purposes. In	a clear and conci mation for each pr	se manner, ogram title.		4947(a)(1 nal for of		
28	Theatre productions-Over 2000 people attended mainstag	e productions last year, over	75 artists participat	ed. Final				
]	production of 2007 was The Wiz, featuring a 75% African-	American cast and crew. All j	productions featured	l multi-				
	ethnic casts and a combination of professional and amate		ž.					
(	Grants \$ 0) If this amount inclu	o ) ii tiilo atrioditt motadoo toroign giarto, onoott tielo , , , , ,						0.00
29 .	Youth programming-Produced one youth show, featuring							
-	Held Broadway Song & Dance camp, with 20 youth partic	ipating, 25% of which were of	n tuli scholarship.					
-					200		¢200	0.00
(	Grants \$ 0) If this amount inclu	ides foreign grants, check	here ,	ngod in	29a		\$2.30	0.00
30 .	Educational workshops: Presented 12 workshops led by lo	nigeu in						
1=	age from elementary age to seniors. Over 75 community	members participated.						
-	O t this amount inclu	udes foreign grants, check	here	<b>▶</b> □	30a		\$147	5.00
		des foreign grants, check	nere , ,		1			
		des foreign grants, check	here	. ▶ □	31a			
	Total program service expenses. Add lines 28a th				32			770
	rt IV List of Officers, Directors, Trustees, and Key I	Employees (List each one eve	n if not compensate	d. See page 6	of th	e instruc	tions.)	
		(B) Title and average	(C) Compensation	(D) Contribution	ons to	(E) E	xpense	e
	(A) Name and address	hours per week devoted to position	(If not paid, enter -0)					
Cat	hy Street							
13	20 McChesney Ave, Nashville, TN 37216	Artistic Director	\$300		0			0
Isa	ac Connor							_
91	7 Preston Court, Antioch, TN 37013	Board President	0		0			0
	Street	B			^			0
	20 McChesney Ave, Nashville, TN 37216	Board Secretary	0		U		_	0
	gie Fann	Development Director			^			0
-	04 Anita Drive, Old Hickory, TN 37138		l Instruction V			1	Vac	No
Ρá	ort V Other Information (Note the statement	MM 4				$\top$	100	
33	Did the organization make a change in its activities	es or methods of conduction	ng activities? If "Y	es," attach	a	33		V
	detailed statement of each change					-		
34	Were any changes made to the organizing or gov	erning documents but not	reported to the in	15? II Tes,		34		~
	attach a conformed copy of the changes	t not						
35	If the organization had income from business activities, reported on Form 990-T, attach a statement explaining	vour reason for not reporting	the income on Form	990-T.		1	1	
	a Did the organization have unrelated business gros	ss income of \$1 000 or mo	re or 6033(e) notic	e. reporting	and			
•	proxy tax requirements?		35a		~			
1	If "Yes," has it filed a tax return on Form 990-T f	or this year?				35b		
36	Was there a liquidation, dissolution, termination,	or substantial contraction	during the year? If	"Yes," atta	ch a			
10 TO	statement					36		0
37	a Enter amount of political expenditures, direct or inc	direct, as described in the ir	nstructions. > 37	a		<b>⊢</b> .		.,
	b Did the organization file Form 1120-POL for this	year?		* * * *		37b		-
38	a Did the organization borrow from, or make any lo	ans to, any officer, director	, trustee, or key e	mployee <b>or</b> v	were	00-		.,
	any such loans made in a prior year and still unp	paid at the start of the period	od covered by this	return? .	* *	38a		<b>—</b>
	b If "Yes," attach the schedule specified in the lin	ne 38 instructions and ente	er the amount	<b>.</b>				
	involved		38	טע	28a \$31,450.00  29a \$2900.00  29a \$2900.00  29a \$2900.00  31a  31a  32  32  36ee page 61 of the instructions.)  31a  (E) Expense account and other allowances  0   10  10  10  10  11  11  11  11  11			
39			20	a				
	a Initiation fees and capital contributions included	on line 9		9b		$\dashv$		
-	<b>b</b> Gross receipts, included on line 9, for public use	OF CIUD TACIILLES		,		- 004	\	<u> </u>

VIIII	000 LL (	2007)	200		10 10 10 10			1000 0000		190 C
Par	t V	Other Information (Note the statement requirement in G	eneral Instruc	tion V.	(Conti	nued)				
l0a	501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶									
b		(3) and (4) organizations. Did the organization engage in any section 4 r did it become aware of an excess benefit transaction from a prior					40b	Yes	No	
	the ye	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958								
		amount of tax on line 40c reimbursed by the organization					I			
е	transa	ganizations. At any time during the tax year, was the organization ction?					. [	40e		~
41	List th	e states with which a copy of this return is filed. ► Tennessee								
42a	The b	ooks are in care of ► Cathy Street		Tele	phone n	5	54-741	4		
	Locat	Located at ► 1320 McChesney Ave., Nashville, TN						7216-	2731	
c 43	account)?  If "Yes," enter the name of the foreign country:   See the instructions for exceptions and filing requirements for Form TD F 90-22.1.  At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country:   Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year   43									✓ ► □
Plea Sigi Her	n	Under penalties of perjury, I declare that I have examined this return, including a and belief, it is true, correct, and complete. Declaration of preparer (other than Signature of officer  Type or print name and title.								
Paid Prop	- 1	Preparer's signature	Date	Check if self- employe		Preparer'	s SSN or	PTIN (S	ee Gen.	inst, X)
_	arer's Only	Firm's name (or yours if self-employed), address, and 2IP + 4	EIN Phone no	<b>&gt;</b>	1					
				7-11-1-1			For	m <b>99</b> (	)-EZ	(2007)