### 990

Department of the Treasury

Internal Revenue Service

### Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except 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 2006

Open to Public Inspection

For the 2006 calendar year, or tax year beginning July 1 2006, and ending June 30 20 07 D Employer Identification number C Name of organization Piease B Check if applicable: Nashville State Community College Foundation 62 1567873 Address change isbei o print or Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Name change 120 White Bridge Road (615) 353-3301 Initial return Specific City or town, state or country, and ZIP + 4 Final return Other (specify) Nashville, TN 37209-4515 Amended return H and I are not applicable to section 527 organizations. Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable Application pending trusts must attach a completed Schedule A (Form 990 or 990-EZ). H(b) If "Yes," enter number of affiliates ▶ ..... G Website: ► http://www.nscc.edu/foundation/index.html H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.) J Organization type (check only one) ► \( \sqrt{501(c) (3)} \) < (insert no.) \( \sqrt{4947(a)(1)} \) or \( \sqrt{527} \) H(d) is this a separate return filed by an K Check here ▶ if the organization is not a 509(a)(3) supporting organization and its gross organization covered by a group ruling?  $\square$  Yes  $\square$  No receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return. Group Exemption Number ▶ Check ▶ ☐ if the organization is not required Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ to attach Sch. B (Form 990, 990-EZ, or 990-PF). Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.) Contributions, gifts, grants, and similar amounts received: 1a 238,701.98 1b b Direct public support (not included on line 1a) . . . . 1c c Indirect public support (not included on line 1a) . . . d Government contributions (grants) (not included on line 1a) e Total (add lines 1a through 1d) (cash \$\_\_\_\_238,596.22 noncash \$\_\_\_ 1e 238,701.98 2 Program service revenue including government fees and contracts (from Part VII, line 93) 3 Membership dues and assessments . . . . . . . . . 4 7,485.88 Interest on savings and temporary cash investments 5 3,026.97 Dividends and interest from securities . . . . 6a 6b b Less: rental expenses . . . . 6с c Net rental income or (loss). Subtract line 6b from line 6a . Other investment income (describe ▶ 7 (B) Other (A) Securities 8a Gross amount from sales of assets other 352,413.72 8a than inventory . . . . . . . . . 334,332.33 8ь b Less: cost or other basis and sales expenses. 18,081.39 8c c Gain or (loss) (attach schedule) . . . 8d 18,081.39 d Net gain or (loss). Combine line 8c, columns (A) and (B) . . . . . . . . . . . . . . 9 Special events and activities (attach schedule). If any amount is from gaming, check here 🕨 🗌 a Gross revenue (not including \$ 69,435.29 of contributions reported on line 1b) . . . . . . . . . . . . 9a 76,633.80 b Less: direct expenses other than fundralsing expenses . 9b 0.00 9c c Net income or (loss) from special events. Subtract line 9b from line 9a 10a Gross sales of inventory, less returns and allowances . . 10c c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a 11 11 Other revenue (from Part VII, line 103) Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 12 267,296.22 12 130,963.46 13 Program services (from line 44, column (B)) . . . 13 10,887.56 14 Management and general (from line 44, column (C)) 14 8,441.00 15 Fundraising (from line 44, column (D)) . . . . 15 16 16 Payments to affiliates (attach schedule) . . . Total expenses. Add lines 16 and 44, column (A) 150,292.02 17 17 18 117,004.20 18 Excess or (deficit) for the year. Subtract line 17 from line 12 Assets 19 605,042.64 19 Net assets or fund balances at beginning of year (from line 73, column (A)). 28,661.44 20 20 Other changes in net assets or fund balances (attach explanation). 750,708.28 Net assets or fund balances at end of year. Combine lines 18, 19, and 20

Form 990 (2006)

Form 990 Part I 8 a - 8 c

**Publically Traded Securities** 

Total Gross Sales Price 352,413.72

Total Cost or Other Basis 334,332.33

Expenses of Sale

Gain (Loss) 18,081.39

Part I, Line 9

SPECIAL EVENTS

SPECIAL EVENT	GOLF TOURNAMENT	FEBRUARY BANQUET	PHOTOGRAPHY AUCTION	TOTAL
GROSS RECEIPTS	34,643.00	100,554.09	10,872.00	146,069.09
LESS CONTRIBUTIONS	17,303.73	46,988.80	5,142.76	69,435.29
LESS DIRECT EXPENSE	17,339.27	53,565.29	5,729.24	76,633.80
NET INCOME OR (LOSS)	0.00	0.00	0.00	0.00

Part I, Line 20

Explanation of other changes in Net Assets

Increase in Market Value of Investements

\$ 28,661.44

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.  irants paid from donor advised funds (attach schedule)  ash \$		(A) Total	(B) Program	(C) Management	(D) F
ash \$ noncash \$)			services	and general	(D) Fundraising
this amount includes foreign grants, check here 🕨 📖	00-	٥	0		
	22a				
Other grants and allocations (attach schedule) ash \$					
this amount includes foreign grants, check here	22b	130,963.46	130,963.46		
Specific assistance to individuals (attach					
chedule)	23	0	0		<b>计中等转换模</b>
Benefits paid to or for members (attach		_			2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
chedule)	24	0	0		
Compensation of current officers, directors,					
	252	ام	0	٥	o
•	238				
•		ļ			
	25b	0	0	0	0
persons described in section 4958(c)(3)(B) (attach schedule)	25c	0	0	0	0
Salaries and wages of employees not included				•	
•	26		- U		
Pension plan contributions not included on ines 25a, b, and c	27	0	0	0	
Employee benefits not included on lines		ام	0	,	.
			0	0	8,000.00
	-	0	0	0	(
5	32	0	0	0	(
•	33	638.80	0	197.80	441.00
• •	34	0	0	0	(
•	35	0	0	0	
<del>-</del>	36	0	0	0	
Equipment rental and maintenance	37	0	0		<del></del>
Printing and publications	38				<del></del>
Travel	39				
Conferences, conventions, and meetings					
Interest					<del></del>
	42	U		0	1
Dad Dala Pourance	40-	436 24	٨	126 24	1
Dankina Frances					<del></del>
		+		<del></del>	<del></del>
	1 <del></del>			<del></del>	<del></del>
			<del></del>		
	-			<del></del>	<del></del>
myestilen Management 1 000	43g	0,020.00			
Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	150,292.02	130,963.46	10,887.56	8,441.0
ny joint costs from a combined educational campaig s," enter (i) the aggregate amount of these joint cos	n and fu	; (ii) the	e amount allocated	to Program service	► ☐ Yes ☑ N
	rey employees, etc. listed in Part V-A (attach schedule)  Compensation of former officers, directors, sey employees, etc. listed in Part V-B (attach schedule)  Compensation and the distributions, not included above, to isquiffed pasons (as defined under section 4856(N)) and pasons described in section 4856(N) (attach schedule)  Salaries and wages of employees not included on lines 25a, b, and c  Pension plan contributions not included on lines 25a, b, and c  Employee benefits not included on lines 25a – 27  Payroll taxes  Professional fundraising fees  Accounting fees  Legal fees  Supplies  Telephone  Postage and shipping  Occupancy  Equipment rental and maintenance  Printing and publications  Travel  Conferences, conventions, and meetings .  Interest  Depreciation, depletion, etc. (attach schedule)  Other expenses not covered above (itemize):  Bad Debt Expense  Banking Expenses  Corporate Annual Return Fee  Secretary of State Filing Fee - Upper Cumberland  Investment Management Fees  Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)–(D), carry these totals to lines 13–15)  Costs. Check  if you are following SOF by joint costs from a combined educational campaig	tely employees, etc. listed in Part V-A (attach schedule)  Compensation of former officers, directors, the expension of former officers, directors, dincors, directors, directors, directors, directors, directors, dir	tey employees, etc. listed in Part V-A (attach chedule)  Compensation of former officers, directors, tey employees, etc. listed in Part V-B (attach chedule)  Compensation and the distributions not included above, to disquiffied persons (as defined under section 4588(x)(3)B (attach schedule)  Salaries and wages of employees not included on lines 25a, b, and c  Pension plan contributions not included on lines 25a, b, and c  Pension plan contributions not included on lines 25a, b, and c  Pension plan contributions not included on lines 25a, b, and c  Pension plan contributions and lines 25a a - 27  Payroll taxes  Professional fundraising fees  Accounting fees  Legal fees  Supplies  Accounting fees  Legal fees  Supplies  Postage and shipping  Docupancy  Equipment rental and maintenance  Printing and publications  Travel  Conferences, conventions, and meetings  Interest  Depreciation, depletion, etc. (attach schedule)  Other expenses not covered above (itemize):  Bad Debt Expense  Banking Expenses  Lagal fee - Upper Cumberland  IRS Filling Fee - Upper Cumberland  Legal functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)–(D), carry these totals to lines  13–15)  Costs. Check  If you are following SOP 98-2. yield the aggregate amount of these joint costs \$; (ii) the costs from a combined educational campaign and fundraising solicitatios, enter (i) the aggregate amount of these joint costs \$; (ii) the costs from a combined educational campaign and fundraising solicitatios, enter (i) the aggregate amount of these joint costs \$; (ii) the costs from a combined educational campaign and fundraising solicitatios, enter (i) the aggregate amount of these joint costs \$	ey employees, etc. listed in Part V-A (attach chedule)  Compensation of former officers, directors, sey employees, etc. listed in Part V-B (attach chedule)  Drypersation and drie distributions, rot included about, to be publicated and lines 25a, b, and c  Pension plan contributions not included on lines 25a, b, and c  Pension plan contributions not included on lines 25a, b, and c  Pension plan contributions not included on lines 25a, b, and c  Pension plan contributions not included on lines 25a, b, and c  Pension plan contributions not included on lines 25a, b, and c  Pension plan contributions and included on lines 25a, b, and c  Pension plan contributions and lines 25a a 27  Payroll taxes  Professional fundraising fees  Accounting fees  30 8,000.00  30 8,000.00  30 00  22 0 0 0  31 0 0 0  32 0 0 0  33 538.80  30 0 0  Cocupancy  36 0 0 0  Printing and publications  Travel  Depreciation, depletion, etc. (attach schedule)  Other expenses not covered above (iternize):  Banking Expense  Banking Expenses  Corporate Annual Return Fee  Secretary of State Filling Fee - Upper Cumberland  Investment Management Fees  Add Innes 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13a-15)  Costs. Check ▶ ☐ if you are following SOP 98-2.  y fenter (i) the aggregate amount of these joint costs \$ (ii) the amount allocated size of the costs from a combined educational campaign and fundraising solicitation reported in (B) Pr., *enter (i) the aggregate amount of these joint costs \$ (ii) the amount allocated size and the costs from a combined educational campaign and fundraising solicitation reported in (B) Pr., *enter (i) the aggregate amount of these joint costs \$	ey employees, etc. listed in Part V-A (attach chedule)  25a 0 0 0 0  25b 0 0 0 0  25b 0 0 0 0  25c 0 0 0 0 0  25c 0 0 0 0  25c 0 0 0 0

### Part II, Line 22 b Schedule

Class of activty	Grantees Name and Address	Number of Individuals/ Relationship	Aggregate Dollar Amount
Scholarships	Nashville State Technical Community College 120 White Bridge Road Nashville, Tn 37209	192	82,985.00
CITE Departmental Support (Ford Grant to pay salaries and operating expenses of the department)	Nashville State Technical Community College 120 White Bridge Road Nashville, Tn 37209	Center for Information Technology Department of College	40,000.00
Development Department Support (To pay Rotary Club membership for the purpose of identifying potential donors and board members		Development office of the college	108.33
Development Office/Presidents Office College discretionary Funds granted to the college to be used at the college's discretion in supporting the programs of the college.	Nashville State Technical Community College 120 White Bridge Road Nashville, Tn 37209	Various Department of the college	7,774.37
In-kind donations given to the College	Nashville State Technical Community College 120 White Bridge Road Nashville, Tn 37209	Library Books	95.76

Part III	Statement of Prog	gram Service Accom	plishments <i>(See the</i>	instructions.)

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.

Wh	nat is the organization's primary exempt purpose? > Support of Nashville State Community College	Program Service
All of	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) (anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for
	192 semester scholarships were awarded to students of Nashville State Community College.	others.)
4	out of the state o	
	(Grants and allocations \$ 82,985.00) If this amount includes foreign grants, check here ▶ □	82,985.00
b	An allocation was made to Nashville State Community College to be used at the President's/Development Office's	
	discretion. The allowance was used to fund college meetings and events \$1,344.19, Institutional Memberships of	
	the college \$3,586, chamber of commerce partnership initiative \$2,000, sponsorship of a boy scouts explorer	
	troop \$36.00, purchase of a libary book \$20.00, a \$25.00 gift card for a doorprize for the TYCAT conference,	
	\$500.00 to purchase a campus memorial bench in honor of a deceased faculty member and \$263.18 for	
	framing of donor plaques. (Unspent allocations to the college are not carried forward.)	
	(Grants and allocations \$ 10,000.00) If this amount includes foreign grants, check here ▶ □	7,774.37
C	A grant was given to the College to pay for a rotary club membership for the college development officer. The	
	membership objective was to identify prospects for trustees and donors from the business community.	
	(Grants and allocations \$ 108.33) If this amount includes foreign grants, check here ▶ □	108.33
	A grant of \$40,000 in support of the Nashville State Community College - Center for Information Technologies	100.33
a	Education (CITE) from the Ford Motor Company was given to the CITE department of the college.	
	Landadon (Viris) nom de l'ald moter company was given to the orie department of the contege.	
	(Grants and allocations \$ 40,000.00) If this amount includes foreign grants, check here ▶	40,000.00
е	Other program services (attach schedule)	
	(Grants and allocations \$ 95.76) If this amount includes foreign grants, check here ▶ [	95.76
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	130,963.46
_		

100 20 000

Nashville State Community College Foundation 62-1567873 Part III - Other Program Services

**Program Services Continued** 

Program Services Expenses

In-kind donation of books granted to college library

95.76

Par	rt IV	Balance Sheets (See the instructions.	.)				
		Where required, attached schedules and amounts column should be for end-of-year amounts only.	within t	he description	(A) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing				45	
	46	Savings and temporary cash investments ,			145,340.86	46	233,752.07
	47a	Accounts receivable	47a	1,255.00			
	b	Less: allowance for doubtful accounts .	47b	0	50.00	47c	1,255.00
				The age paids	l.	DA L	
	48a	Pledges receivable	48a	10,077.44	44 500 00	40	0.004.00
	b	Less: allowance for doubtful accounts .	48b	116.42	11,522.96	-	9,961.02
	49	Grants receivable				49	
	50a	Receivables from current and former officers				50-	
		key employees (attach schedule)				50a	
	b	Receivables from other disqualified persons (				50b	
		4958(f)(1)) and persons described in section 495	8(c)(3)(	B) (attach schedule)		30D	
	51a	Other notes and loans receivable (attach	leas!				
Assets		schedule)	51a				
SS	b	Less: allowance for doubtful accounts .	51b			51c	
~	52			• • • • •		52	
	53			· · · · · · · · · · · · · · · · · · ·	451,074.98	53 54a	515,818.42
		Investments—publicly-traded securities		Cost FMV	431,074.38	54b	513,610.42
	l.	Investments—other securities (attach sched	ule)	► ☐ Cost ☐ FMV		340	
	55a	Investments—land, buildings, and	55a			, :	
	١.	equipment: basis	- CO		1		
	þ	Less: accumulated depreciation (attach	55b			55c	
		schedule)	300			56	
	56	Investments—other (attach schedule)	   57a	<i>.</i>			
		Land, buildings, and equipment: basis .	10.0		†		
	٥	Less: accumulated depreciation (attach	57b			57c	
	-0	schedule)		te -	<u> </u>		
	58	(describe ►	53111101	. )		58	
	59	Total assets (must equal line 74). Add lines	45 th	rough 58	607,988.80	+	760,786.51
	60	Accounts payable and accrued expenses .			2,946.16	60	3,323.23
	61	Grants payable				61	
	62	Deferred revenue				62	6,755.00
ຫຼ	63	Loans from officers, directors, trustees, an					
Liabilities	65	schedule)				63	
졅	642	Tax-exempt bond liabilities (attach schedule				64a	
Ĕ		Mortgages and other notes payable (attach				64b	
	65	Other liabilities (describe				65	
		·					
	66_	Total liabilities. Add lines 60 through 65 .		<u> </u>	2,946.16	66	10,078.23
	Oro	anizations that follow SFAS 117, check here	▶ ☑	and complete lines			
ı,		67 through 69 and lines 73 and 74.		•			
ĕ	67	Unrestricted			193,515.18	67	254,059.54
lan	68	Temporarily restricted				68	
Ba	69	Permanently restricted			411,527.4	69	496,648.74
Б	Orc	ganizations that do not follow SFAS 117, chec	k here	e ▶ 🔲 and			
3	1	complete lines 70 through 74.					
ō	70	Capital stock, trust principal, or current fun	ds			70	
ş	71	Paid-in or capital surplus, or land, building,	and e	quipment fund .		71	
SSE	72	Retained earnings, endowment, accumulate				72	
ď	73	Total net assets or fund balances. Add lin	nes 67	through 69 or lines	1		
Net Assets or Fund Balances	1	70 through 72. (Column (A) must equal line	19 ar	nd column (B) must			=
	1	equal line 21)	· · .		605,042.6	$\rightarrow$	750,708.28
	74	Total liabilities and net assets/fund balance	ces. Ac	id lines 66 and 73	607,988.8	0 74	760,786.51

Pai	rt IV-A	Reconciliation of Revenue per Audi instructions.)	ted Financial Statem	ents With Reve	enue pe	r Return	(See	the
а	Total rev	enue, gains, and other support per audite	ed financial statements			а		n/a
b		included on line a but not on Part I, line		· · · · · · · · · · · · · · · · · · ·	• •			
1		alized gains on Investments		b1-∐				
2		services and use of facilities		b2				
3		es of prior year grants		b3		\$ i		
4		pecify):						
		-		b4				
	Add lines	s b1 through b4				Ь		
C		line b from line a				С		
ď		included on Part I, line 12, but not on lin						
1	investme	ent expenses not included on Part I, line (	6b	d1				
2	Other (sp	pecify):						
				d2				
_	Add line:	s d1 and d2				d		
e Pa	rt IV-B		dited Financial Staten	nents With Exr	enses i	e   per Retu		
а		penses and losses per audited financial s				а	<u> </u>	n/a
b	-	s included on line a but not on Part I, line						
1	Donated	services and use of facilities		b1 [	_			
2		ar adjustments reported on Part I, line 20		b2				
3	Losses r	eported on Part I, line 20		b3				
4	Other (s	pecify):						
				b4				
	Add line	s b1 through b4				ь		
С	Subtract	line b from line a				С		
d		s included on Part I, line 17, but not on lir						
1		ent expenses not included on Part I, line		d1				
2	Other (s	pecify):	•••••	l l				
				d2				
_	Add line	s d1 and d2				d		
Pa	rt V-A	Current Officers, Directors, Trustees				e	r dire	otor trictor
		or key employee at any time during the year	ar even if they were not	compensated.) (S	ee the in	structions.	,, une	ctor, trustee,
		(A) Name and address	(B) Title and average hours per	(C) Compensation (if not paid, enter	(D) Contribut benefit pl	tions to employe	e (E) E	xpense account other allowances
loc	y Hatch S	kanska USA Building Inc.	week devoted to position	-0)	comper	isation plans	-	
	<b>*</b>	s Blvd., Suite 400, Nashville, TN 37215	Chair, <1	o			اه	0
-		randt, Nashville Area Chamber of Commerce	D-1 011- 4	† <del>-</del>			<del>-</del>	
		e Street, Suite 100, Nashville, TN 37201	Prior Chair, <1	O			0	0
		Nashville State Community College	Trustee - Ex-Officio, <1				1	
		dge Road, Nashville, TN 37209	indsiee - Ex-cincio, < i	o	1		0	0
		Nashville State Community College	Treasurer - Ex-Officio.				$\top$	
		dge Road, Nashville, TN 37209	<1	0			0	0
Jer	nny Newma	n, Nashville State Community College	Secretary - Ex-Officio,					
120	White Bri	dge Road, Nashville, TN 37209	<1	0			0	0
Sil	as Deane,	Logic Media Group	Trustee, <1				$\neg$	
32	12 West En	d Avenue, Suite 301, Nashville, TN 37203		0			0	0
Chi	ris Ferrell,	Nashville Scene	Trustee, <1				-	
		ue South, Nashville, TN 37204		0			0	0
		ornerstone Financial Credit Union	Trustee, <1					
		nue South, Nashville, TN 37212	ļ	0			0	
		e) Andrews, Nashville Electric Service	Trustee, <1	*	}			
		Street, Nashville, TN 37246	<del> </del>	0	<u> </u>		0	
		Porter, Miller & Martin PLLC	Trustee, <1					
16	こじんいけわ 人い	anua Morth Machvilla TN 37219	1	1 0	1.0		O i	

Form 990 V-A

### CURRENT OFFICERS, DIRECTORS AND KEY EMPLOYEES

Name and Address	Title and average hours per week devoted to position	Compensation	Contributions to employee bene- plans & deferred compensation plans	fit account and	
<b>Dr. George Van Allen</b> , Nashville State Community College 120 White Bridge Road, Nashville, TN 37209	Trustee - Ex-Officio <1		0	0	0
Scott Byers, ProSys Information Systems 840 Crescent Centre Drive, Suite 160, Franklin, TN 37067	Trustee <1		0	0	0
Bob Grohovsky, Microsoft Corporation 501 Corporate Centre Drive, Suite 520, Franklin, TN 37067	Trustee <1		0	0	0
Bob Clement 4420 East Brookfield Drive, Nashville, TN 37205	Trustee <1		0	0	0
Arthur Keith, Gaylord Opryland Resort & Convention Center 2800 Opryland Drive, Nashville, TN 37214	Trustee <1		0	0	0
Jim Knight, 6210 Hillsboro Road, Nashville, TN 37215	Trustee <1		0	0	0
Heather MacDonald, Dye, Van Mol & Lawrence 209 7 <sup>th</sup> Avenue North, Nashville, TN 37219	Trustee <1		0	0	0
David McNeel, Director, CITE 120 White Bridge Road, Nashville, TN 37209	Trustee <1		0	0	0
Jose Mena, EDS 333 Commerce Street, Nashville, TN 37201	Trustee <1		0	0	0

Form 990 V-A

### CURRENT OFFICERS, DIRECTORS AND KEY EMPLOYEES

Name and Address	Title and average hours per week devoted to position	Compensation	Contributions temployee bene plans & deferre compensation	efit accoun ed other	t and
Rita Mitchell, First Tennessee	Trustee		plans 0	0	O
2525 West End Avenue, Suite 300, Nashville, TN 37203	<1				
David (Dave) Mullendore, Tennessee Bank & Trust	Trustee		0	0	0
4007 Hillsboro Rd., Nashville, TN 37215	<1		J	J	U
Leslie Newman, Department of Commerce & Insurance	Trustee		0	0	0
500 James Robertson Pkwy, Nashville, TN 37243-1162	<1				
Marian Ott	Trustee		0	0	0
408 West Hillwood Drive, Nashville, TN 37205	<1			v	J
	<b>-</b> .		_		
Randy Rayburn	Trustee		0	0	0
2001 Belcourt Avenue, Nashville, TN 37212	<1				
Sydney Rogers, Alignment Nashville	Trustee		0	0	0
211 Commerce Street, Suite 100, Nashville, TN 37201	<1				
	<b>.</b>				
Dr. Ellen Weed, Nashville State Community College	Trustee <1		0	0	0
120 White Bridge Road, Nashville, TN 37209	<b>\1</b>				
Jason Dean, CPA, Crowe Chizek and Company LLC	Trustee		0	0	0
105 Continental Place, Suite 200, Brentwood, TN 37027-1529	<1				
Richard (Rich) Ford, The Sage Group	Trustee		0	0	0
5300 Maryland Way, Ste. 103, Brentwood, TN 37027	<1				

A	- 2

Table The total number of officers, directors, and trustees permitted to vote on organization business at board meetings  b Are any officers directors, trustees, or key employees listed in Form 990. Part V.A. or highest compensated employees listed in Schedula A, Part I, or highest compensated professional and other independent contractors listed in Schedula A, Part I, or highest compensated professional and other independent contractors listed in Schedula A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II, or highest compensated professional and other independent contractors listed in Schedule A, Part II, or highest compensated or professional and other independent contractors listed in Schedule A, Part II, or highest compensation from any other organizations, whether tax exempt or texable, that are related to the organization? See the instructions for the definition of 'related organization."  If 'Yes,' attach a statement that includes the information described in the instructions.  If 'Yes,' artach a statement that includes the information described in the instructions.  If 'Yes,' artach a statement that includes the information of the benefits in the propriate column. See the instructions of the definition of 'related organization."  If Yes,' artach a defined and the way of the compensation or other benefits in the appropriate column. See the instructions of the profession of the profession and th	Part	V-A Current Officers, Directors, Trustees	, and Key Employed	es (continued)	·····	Yes	s No
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II. An II-B, related to each other through family or business relationships? If Yes,* attach a statement that identifies the individuals and explains the relationships? If Yes,* attach a statement that identifies the individuals and explains the relationships? If Yes,* attach a statement that identifies the individuals and explains the relationships?  C Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated professional and other independent contractors listed in Schedule A, Part II, or highest compensation from any other organizations, whether tax exempt or taxable, that are related to the organizations? See the instructions for the definition of "related organization".  If Yes,* attach a statement that includes the information described in the instructions.  If Yes,* attach a statement that includes the information described in the instructions.  If Yes,* attach a conformation (See the instructions.)    Part V-B    Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (is any tomer officer, director), ruite, or, fey employee received compensation or the benefits in the appropriate column. See the instructions.)    Was here any changes made in the organizing or governing documents but not reported to the IRS?		- NAME OF THE PARTY OF THE PART					
employees listed in Schedule A, Part II. or highest compensated professional and other Independent contractors listed in Schedule A, Part II. A or III.8, related to each other through family or business relationships? If "Yes," attach a statement that Identifies the Individuals and explains the relationship(s).  C Do any Officers, directors, trustees, or key employees listed in Schedule A, Part II. A or II.8, receive compensation from any other organizations, whether tax evering to resuble, that are related to the organization from any other organizations, whether tax evering to resuble, that are related to the organization from any other organizations. If Yes, attach a statement that includes the information described in the instructions of the definition of "feelated organization."  If Yes, "statch a statement that includes the information described in the instructions of Diose the organization have a written conflict of interest policy."  If Yes, "statch a statement that includes the information described in the instructions of the person below and enter the amount of compensation or other benefits (described below) during the year, sit that person below and enter the amount of compensation or other benefits (described below) during the year, sit that person below and enter the amount of compensation or other benefits in the appropriate column. See the Instructions.)  (A) Name and address  (B) Loans and Advences  (G) Compensation or Other Benefits (described below) during the year, sit that person below and enter the amount of compensation or other benefits (described below) during the year, sit that detailed statement of each change.  Yes No  10 Under Information (See the Instructions.)  Yes No  11 Yes, "attach a conformation organization organization or organization and a statement organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," attach a conformation organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," attach a conform		war and the second of the seco					
compensated employees listed in Schedule A. Part I, or highest compensated professional and other independent contractors listed in Schedule A. Part II. Ar or II-S, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization."  If "Yes," attach a statement that includes the information described in the instructions.  I Dees the organization have a written conflict of interest policy?  PORTIVE Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (if any former officer, director, frustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits (described below) during the year, list and the person below and enter the amount of compensation or other benefits (described below) during the year, list and the person below and enter the amount of compensation or other benefits (described below) during the year, list and the person below and enter the amount of compensation or other benefits (described below) during the year is constituted by the person below and enter the amount of compensation or other benefits (described below) during the year, list and the person below and enter the amount of compensation with a statewide or conducting activities? If "Yes," attach a detailed statement make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement make a change in its activities or methods of conducting activities? If "Yes," attach a conformed copy of the changes.  750 Did the organization make a change in its activities or methods of conducting activities? If "Yes," att		employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business					
Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (if any former officer, director, trustee, or key employee received compensation or other benefits (described voluming the year, list that person below and enter the amount of compensation or other benefits (described voluming the year, list that person below and enter the amount of compensation or other benefits (feron developed upon the year, list that person below and enter the amount of compensation or other benefits (feron developed upon the year).  (A) Name and address  (B) Loans and Advances  (C) Compensation (From the year) (From the year		compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization.".					
officer, director, trustee, or key employee received compensation or other benefits (acestribed below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the Instructions.)    A) Name and address   (B) Loans and Advances   (C) Compensation							former
None    Can be a comparate to the c		officer, director, trustee, or key employee re	celved compensation of	r other benefits (de its in the appropria	escribed below) during	the year,	list that
Part VI Other Information (See the instructions.)  Port		(A) Name and address	(B) Loans and Advances	(If not paid,	benefit plans & deferred	account ar	nd other
Part VI Other Information (See the instructions.)  Part VI Other Information (See the instructions.)  Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change.  Were any changes made in the organizing or governing documents but not reported to the IRS?  To Were any changes made in the organizing or governing documents but not reported to the IRS?  To Vi if "Yes," attach a conformed copy of the changes.  But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement  Soa 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?  Bi if "Yes," enter the name of the organization ➤ Nashville State Community College and check whether it is ✓ exempt or nonexempt organization?  To Nashville State Community College and check whether it is ✓ exempt or nonexempt organization organization?  To Nashville State Community College and check whether it is ✓ exempt or nonexempt organization?  To Nashville State Community College and check whether it is ✓ exempt or nonexempt organization?	None						
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Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	Par	VI Other Information (See the instruction	ns.)	<del></del> _		Ye	s No
Were any changes made in the organizing or governing documents but not reported to the IRS?	76				s? If "Yes," attach a		✓
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b If "Yes," has it filed a tax return on Form 990-T for this year?	78a	Did the organization have unrelated business gro		or more during	the year covered by		<b>✓</b>
Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	b	If "Yes," has it filed a tax return on Form 990-T	for this year?				
common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?  b If "Yes," enter the name of the organization ▶ Nashville State Community College  and check whether it is ✓ exempt or ☐ nonexempt  81a Enter direct and indirect political expenditures. (See line 81 instructions.)	79		or substantial contrac	tion during the y	ear? If "Yes," attach	79	<b>V</b>
b If "Yes," enter the name of the organization ▶ Nashville State Community College  and check whether it is ☑ exempt or ☐ nonexempt  81a Enter direct and indirect political expenditures. (See line 81 instructions.)		common membership, governing bodies, trust	tees, officers, etc., to	o any other exe	organization) through empt or nonexempt		
81a Enter direct and indirect political expenditures. (See line 81 instructions.) 81a 0	b	If "Yes," enter the name of the organization ▶.	Nashville State Commun	nity College	or D nonexempt		
<del></del>	81a b	Enter direct and indirect political expenditures. (	See line 81 instruction			- The state of the	

Form 990

V-A

CURRENT OFFICERS, DIRECTORS AND KEY EMPLOYEES

75 c

The following individuals are full-time employees of Nashville State Community College and serve as ex-officio (non-voting) trustees of the NSCC foundation.

Name	Nashville State Community College Job Title	<u>College</u> <u>Compensation</u>	Foundation Compensation
George H. Van Allen	President	165,600.00	0
Debra Bauer	Vice President of Finance & Administrative Services	103,712.14	0
Brent Young	Development Coordinator	60,419.24	0
Jenny Newman	Director of Development and Media Relations	35,418.18	0

100% of the salary and benefits are paid by the college. The positions would exist at the college without the existence of the foundation. They are ex-office to the board in order to provide information to the board and to insure that college efforts at fund raising are not competing with foundation efforts.

The following individual is a full-time employee of Nashville State Community College and serves as a voting trustee of the NSCC foundation.

	Name	Nashville State Community College Job Title	College	Foundation
1			Compensation	Compensation
Ellen Weed	,	Vice President of Academic Affairs	106,531.78	1

0

100% of the salary and benefits are paid by the college. The positions would exist at the college without the existence of the foundation.

Par	t VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		<b>√</b>
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.)			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	1	<b> </b>
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	1	<u> </u>
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	3200	√ RZEGIE
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		<u> </u>
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a walver for proxy tax owed for the prior year.			
С	Dues, assessments, and similar amounts from members			
d	Section 162(e) lobbying and political expenditures		t, = t, =	
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	. ,	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12		٠.	
b	Gross receipts, included on line 12, for public use of club facilities			
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.)	4.2.	<u>.</u>	
88a	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.	88a		<b>✓</b>
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b		1
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		1
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶0			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			1
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	_	<b>✓</b>
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		1
	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings			
00-	at any time during the year?	899		
	List the states with which a copy of this return is filed ▶	• • • • • •	• • • • • •	
	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)			0
91a	The books are in care of ▶ Debra Bauer  Located at ▶ 120 White Bridge Road, Nashville, Tn  Telephone no. ▶ (615)  ZIP + 4 ▶ 3720	9 <b>-4</b> 51	53-33 5	
ь	At any time during the calendar year, did the organization have an interest in or a signature or other authority		120	Т
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	s No
	account)?	911		<b>√</b>
	If "Yes," enter the name of the foreign country ►  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.	1		

Form 990 (2006)

Page 7

orm 990 (2006)				· <u> </u>		Page 8
Part VI Other Information (continued)					Yes	No
c At any time during the calendar year, did the or If "Yes," enter the name of the foreign country 192 Section 4947(a)(1) nonexempt charitable trusts for and enter the amount of tax-exempt interest recommendations.	►	n lieu of Form	1041—Check	here		.▶□
Part VII Analysis of Income-Producing Activ						
Note: Enter gross amounts unless otherwise	Unrelated bus	siness income	Excluded by secti	ion 512, 513, or 514	(E) Related	or
indicated.	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	exempt fu	nction
93 Program service revenue:	Dustress and	70700111	Excission code	ranodiit	incom	<u>—</u> —
a	<del></del>	· · ·	<del>                                     </del>			
b						
d			†			<del></del>
· e						
f Medicare/Medicaid payments						
g Fees and contracts from government agencies						
94 Membership dues and assessments		··			<del>                                     </del>	
95 Interest on savings and temporary cash investments	<del></del>		14	7,485.88	+	——
96 Dividends and Interest from securities			14	3,026.97		
97 Net rental income or (loss) from real estate:				· · · · · · · · · · · · · · · · · · ·		
a debt-financed property b not debt-financed property					<del>                                     </del>	
98 Net rental income or (loss) from personal property			<u> </u>			
99 Other investment income						
100 Gain or (loss) from sales of assets other than inventory			14	18,081.39		
101 Net income or (loss) from special events .						
102 Gross profit or (loss) from sales of inventory			<u> </u>		<u> </u>	
103 Other revenue: a	<u> </u>	_			<del> </del>	
b			·		<del> </del> -	
C					<del> </del>	
de					<del></del>	
104 Subtotal (add columns (B), (D), and (E)) .				28,594.24	†	
105 Total (add line 104, columns (B), (D), and (E)).				<b>•</b>		594.24
Note: Line 105 plus line 1e, Part I, should equal the	amount on line	12, Part I.				
Part VIII Relationship of Activities to the Acc						
Line No. Explain how each activity for which income of the organization's exempt purposes (other	is reported in col	lumn (E) of Part	VII contributed	importantly to the	accomplis	shment
of the organization's exempt purposes (offi	er than by providi	ng lunds for suc	n purposes).	<del></del>		
		• 15				
Part IX Information Regarding Taxable Subs		sregarded Ent	ities (See the	instructions.)		
(A) Name, address, and EIN of corporation,	(B) Percentage of	(C)		(D)	(E) End-of	-1/035
	nership interest	Nature of a	activities	Total income	8556	
	%			<del> </del>		
	%				-	
	%		:	<del>                                     </del>	<del> </del>	
Part X Information Regarding Transfers Associ		onal Benefit C		the instructions	٠	
(a) Did the organization, during the year, receive any funds, di	rectly or indirectly, to	pay premiums on	a personal benef	fit contract? .	☐ Yes	
(b) Did the organization, during the year, pay pren Note: If "Yes" to (b), file Form 8870 and Form 472			a personal be	enefit contract?	∐ Yes	∡ No

r	ents, royalties, and annuities described in question 107 above	?						/	
Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including and belief, it is true, correct, and complete. Declaration of preparer (other than Signature of officer  Debra Bauer, Treasurer  Type or print name and title	n officer) i	rying sci	hedules a i on all inf	nd statemer formation of Date	of which	to the best of preparer has a	any knowledg	- -
Paid	Preparer's signature	Date-	₹	Check is self- employe		Prepare	r's SSN or PTIN	(See Gen. Inst.	3
Preparer's Jse Only	Firm's name (or yours if self-employed), address, and ZIP + 4				EIN Phone no	<b>▶</b>	1		-
									-

Form 990 (2006)

#### **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 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

2006

OMB No. 1545-0047

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 State Community College Foundation 62 1567873 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 2 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 employee benefit plans & deferred compensation (c) Compensation account and other per week devoted to position than \$50,000 allowances None Total number of other employees paid over \$50,000 . Part II-A Compensation of the Five Highest Pald Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation Total number of others receiving over \$50,000 for professional services Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation Total number of other contractors receiving over \$50,000 for other services . . . . . . .

Par	Statements About Activities (See page 2 of the instructions.)	Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses pald or incurred in connection with the lobbying activities   \$	M. Su	<b>\</b>
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their familles, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)	4 ·	
а	Sale, exchange, or leasing of property?	-	1
b	Lending of money or other extension of credit?	-	/
С	Furnishing of goods, services, or facilities?		1
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	-	<u> </u>
9	Transfer of any part of its income or assets?	+	<b>✓</b>
3а	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	1	
b	Did the organization have a section 403(b) annuity plan for its employees?	-	/
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		1
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? .		1
<b>4a</b>	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		/
b	Did the organization make any taxable distributions under section 4966?		1
С	Did the organization make a distribution to a donor, donor advisor, or related person?	;	1
d	Enter the total number of donor advised funds owned at the end of the tax year		0
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year •		0
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts		0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year		0
	Cabadula A /Farma 000 a		

Form 990 Schedule A, Part III, Item 3a
Nashville Tech Foundation 621567873
Statement explaining how the organization determines who gets grants.

How Grant Recipients Are Selected:

Scholarships: General Scholarships

Students make application for scholarship through the financial aid office of the college. Both a federal financial aid application and a foundation application are completed. The scholarships are awarded to students who have a demonstrated federal need.

#### Presidential Scholarships

Students make application for scholarship through the financial aid office of the college. Students must score minimum of 23 on the ACT and have a high school GPA of 3.0 or above. The scholarships are awarded to students by the scholarship committee of the college.

#### **Dual Enrollment Scholarships**

Students make application for scholarship through the dual enrollment office of the college. Students must score minimum of 23 on the ACT and have a high school GPA of 3.0 or above. The scholarships are awarded to students by the scholarship committee of the college.

#### Endowed/Other Scholarships

Scholarship eligibility requirements are specified by the donor when the endowment is created. The financial aid office of the college awards the endowment scholarships based on the requirements specificed by the donor.

#### Other Grants:

Departments of the college can make application to the foundation for support for activities not funded through the state appropriation process. These requests are presented to the foundation allocations committee for consideration.

Occasionally, donors will restrict their contributions to a specific use by departments of the college. The funds are awarded to the department for the intended purpose after acceptance and approval of the gift and purpose restrictions by the trustees.

The foundation allocates up to \$10,000 per fiscal year to be used at the discretion of the President and development office for endeavors in support of the college. These funds support activities not funded through the state appropriations process and are used when there is not sufficient time to request a line item appropriation through the trustees.

Par	t IV	Reason for Non-Private	Foundation S	tatus (See pages 4 t	hrough 7 of	the instructi	ons.)			
cert	ify t	hat the organization is not a private	e foundation beca	ause it is: (Please check	only ONE appl	licable box.)				
5		A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).								
6		A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)								
7		A hospital or a cooperative hospital	al service organiz	ation. Section 170(b)(1)(A	4)(iii).					
8		A federal, state, or local government	nt or governmen	tal unit. Section 170(b)(1	)(A)(v).					
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶								
10		An organization operated for the be (Also complete the Support Sched		or university owned or op	erated by a go	vernmental uni	t. Section 170(b)(1)(A)(iv).			
11a		An organization that normally recel 170(b)(1)(A)(vi). (Also complete the		• • •	governmental	unit or from the	e general public. Section			
11b	Z	A community trust. Section 170(b)	(1)(A)(vi). (Also co	mplete the Support Sch	nedule in Part	IV-A.)				
12		An organization that normally receifrom activities related to its charitation gross investment income an organization after June 30, 1975.	ible, etc., function d unrelated busin	ns—subject to certain ex ness taxable income (les	ceptions, and ( is section 511	(2) no more the tax) from bus	an 331/3% of its support inesses acquired by the			
13		An organization that is not control requirements of section 509(a)(3).					nd otherwise meets the			
		☐ Type II ☐ Type II	□Type !	II-Functionally Integrate	ed 🗆	Type III-Othe	er			
		Provide the following info	mation about th	e supported organizati	ons. (See page	e 7 of the inst	ructions.)			
(a) Name(s) of supported organization(s)		(a) (b) (c) me(s) of supported organization(s) Employer Type of identification organization number (EIN) (described to the strong above or			(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support			
					Yes	No				
Tota	<u>l .                                    </u>	<u> </u>	· · · · · ·	· · · · · · · ·	<u> </u>	<u></u> ▶				
14		An organization organized and op	erated to test for	public safety. Section 5	09(a)(4). (See	page 7 of the	instructions.)			

Par	IV-A Support Schedule (Complete only You may use the worksheet in the instructions	if you checked a	box on line 10,	11, or 12.) Use c	ash method of a	accounting.
	idar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
	Gifts, grants, and contributions received. (Do	(2) 2000	(6) 2004	(0) 2000	(4) 2002	(c) rotar
	not include unusual grants. See line 28.) .	145,879.30	329,828.85	215,829.84	87,777.84	780,315.83
16	Membership fees received					
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			-10.00	177.00	167.00
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	12,036.03	3,118.72	5,321.10	5,126.74	25,602.59
19	Net income from unrelated business activities not included in line 18		-15.15			-15.15
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22	Other income. Attach a schedule. Do not	540.04				C10 01
	include gain or (loss) from sale of capital assets	-540.21	202 202 42	201 110 01	00.004.50	-540.21
23	Total of lines 15 through 22	158,375.12	332,932.42	221,140.94	93,081.58	805,530.06
24	Line 23 minus line 17	158,375.12	332,932.42	221,150.94	92,904.58	805,363.06
25	Enter 1% of line 23	1,583.75	3,329.32	2,211.40	930.82	
26	Organizations described on lines 10 or 11:	a Enter 2% of	amount in colum	ın (e), line 24	▶ 26a	16,107.26
ь	governmental unit or publicly supported organi	zation) whose tota	al gifts for 2002 tl	nrough 2005 exce	eded the	402,616.07
	amount shown in line 26a. Do not file this list w	•		I these excess an	1001110	805,363.06
	Total support for section 509(a)(1) test: Enter I	25,602.59			▶ 260	003,303.00
d	Add: Amounts from column (e) for lines: 18	-540.21	26b 402,616		▶ 26d	427,663.30
_	Public support (line 26c minus line 26d total)		200		26e	377,699.76
f		ator) divided by	line 26c (denom	inatori)	26f	46.89 %
27	Organizations described on line 12: a F-person," prepare a list for your records to show Do not file this list with your return. Enter the (2005)	or amounts included the name of, and ne sum of such ar	ded in lines 15, total amounts renounts for each (2003)	16, and 17 that vectived in each year:	were received from each "dis	m a "disqualified qualified person.
b	For any amount included in line 17 that was recesshow the name of, and amount received for each (Include in the list organizations described in lines the difference between the amount received and amounts) for each year:  (2005)	year, that was mo 5 through 11b, as if the larger amoun	re than the larger well as individuals it described in (1)	of (1) the amount .) Do not file this I or (2), enter the s	on line 25 for the ist with your retur sum of these diffe	year or (2) \$5,000 m. After computing rences (the excess
c	Add: Amounts from column (e) for lines: 15		16		·	
·	17 20		21		<b>&gt;</b> 27c	
d	Add: Line 27a total	and line 27b tota	al	<del></del>	<b>&gt;</b> 27d	
e	Public support (line 27c total minus line 27d t	otal)			<b>▶ 27e</b>	
f	Total support for section 509(a)(2) test: Enter	amount from line	23, column (e) .	. ► 27f	et et a	
g	Public support percentage (line 27e (numer	ator) divided by	line 27f (denom	inator)) ,		9
_ <u>h</u>	Investment income percentage (line 18, col	umn (e) (numera	tor) divided by I	ine 27f (denomi	nator)). ► 27h	9
28	Unusual Grants: For an organization describ prepare a list for your records to show, for e description of the nature of the grant. Do not	ach year, the nan	ne of the contrib	utor, the date an	d amount of the	grant, and a brid

Nashville State Community College Foundation 62-1567873

Schedule A Line 22 Attachment

The foundation received a donation of EDS stock. \$540.21 was the brokerage expense of converting the donation to cash.

Pai	Private School Questionnaire (See page 9 of the instructions.)  (To be completed ONLY by schools that checked the box on line 6 in Part IV)					
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No		
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.)			4.2		
	Does the organization maintain the following:  Records indicating the racial composition of the student body, faculty, and administrative staff?	32a				
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b				
	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		1 1		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)					
33	Does the organization discriminate by race in any way with respect to:					
а	Students' rights or privileges?	33a				
b	Admissions policies?	33b		<u> </u>		
C	Employment of faculty or administrative staff?	33c				
d	Scholarships or other financial assistance? , , ,	33d		-		
е	Educational policies?	33e				
f	Use of facilities?	33f	-			
g	Athletic programs?	33g	-			
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.)					
				· · · · · ·		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a				
b	Has the organization's right to such aid ever been revoked or suspended?	34Ь				

If you answered "Yes" to either 34a or b, please explain using an attached statement.

35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

35

				Fire parts	•		
		990 or 990-EZ) 2006			-		Page 6
Par	VI-A	Lobbying Expenditures by Ele (To be completed ONLY by an				e instructions.	)
Check	(►a [	if the organization belongs to an affilia	ted group. Chec	sk ► b 🗌 ify	ou checked "a" ar	nd "limited control"	provisions apply.
		Limits on Lobbyir				(a) Affiliated group totals	(b) To be completed for all electing
		(The term "expenditures" mean	is amounts paid	or incurred.)		· · · · · · · · · · · · · · · · · · ·	organizations
36		bying expenditures to influence public			1	<del></del>	<del></del>
37		bying expenditures to influence a legis					
38		bying expenditures (add lines 36 and 3	•			<del></del>	
39 40		empt purpose expenditures			• • • •		
41		nontaxable amount. Enter the amount	•			3 4 No. 11 18 18 18 18 18 18 18 18 18 18 18 18	10000000000000000000000000000000000000
71	, ,		obbying nontaxa	•		· • • • • • • • • • • • • • • • • • • •	
			of the amount on		. )		
			000 plus 15% of th	e excess over \$5	00,000		
			000 plus 10% of the		1 03.4	<u> </u>	
		00,000 but not over \$17,000,000 . \$225,0					
42		000,000	0,000 , , , ne 41\		40		
43		line 42 from line 36. Enter -0- if line 4	•				
44		line 41 from line 38. Enter -0- if line 4			44		
	Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.						
	Caution.						
	(S	4-Year AVG Some organizations that made a section See the instructions for		do not have to d	omplete all of the		elow.
		OGO MIO MONOGRAPIO		bying Expenditu			eriod
	Calenda	r year (or	(a)	(b)	(c)	(d)	(e)
		ar beginning in) ►	2006	2005	2004	2003	Total
45	Lobbying	g nontaxable amount					
46_	Lobbying	g ceiling amount (150% of line 45(e))					
47	Total lob	obying expenditures					
48	Grassro	ots nontaxable amount					
49	Grassro	ots ceiling amount (150% of line 48(e))					
EΛ	Concern	ots lobbying expenditures	Į				
50	rt VI-B	Lobbying Activity by Nonelec	ting Public C	harities	<u> </u>		
10	f Al-D	(For reporting only by organiza			Part VI-A) (Se	e page 13 of t	he instructions.)
	-	ar, did the organization attempt to influence public opinion on a legislative r	uence national, s	tate or local legis	lation, including		
	Voluntee	·		-100			
b		ff or management (Include compensat	lon in expenses i	eported on lines	c through h.)		
c		dvertisements					
đ	Mailings	to members, legislators, or the public	;		71.		-
е		ions, or published or broadcast staten					-
f	Grants t	o other organizations for lobbying purp	poses				<del></del>

g Direct contact with legislators, their staffs, government officials, or a legislative body.
 h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means

Par	t VII		Regarding Tr	ansfers To and Tran	sactions and	Relationships W	ith Noncharitable
51	Did th	ne reporting organ	nization directly or I	indirectly engage in any of (c)(3) organizations) or in s	the following with	any other organization	on described in section
а				to a noncharitable exempt		g to political organizat	Yes No
4				to a nonchantable exempt	organization of.		51a(i) ✓
	• • •	Other assets	• • • • • •				a(ii)
ь.		transactions:					4(1)
U				noncharitable exempt orga	almost a		b(i) ✓
							b(ii) ✓
				table exempt organization			p(iii)  ✓
				er assets		• • • • • • •	
						• • • • • •	
				hip or fundraising solicitation			
		•	•	ts, other assets, or paid en			c /
	good: transa	s, other assets, or action or sharing ar	r services given by	complete the following sche the reporting organization. column (d) the value of the	If the organizatio	n received less than fa	fair market value of the air market value in any
	9)	(b)		(c)		(d)	
Line	no.	Amount involved	Name of nonci	haritable exempt organization	Description of	of transfers, transactions, ar	nd sharing arrangements
	_		-				
							·
							· · · · · · · · · · · · · · · · · · ·
_							
						<del></del>	
				<del> </del>			
	desc	ribed in section 50				?	ns ▶ ☐ Yes ☑ No
		Name of organiz	zation i	(b) Type of organization	1	(c)  Description of relations	onship
					40 1.W.	· · · · · · · · · · · · · · · · · · ·	<u> </u>
					3Ac. 133.		
				<u> </u>	140 1830	1, 1 1, 1	
_					August Stages Co. 15		
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						<del></del>	
		<u>,.                                    </u>		<del></del>		Schedule A	(Form 990 or 990-EZ) 2006