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)

2006

Department of the Treasury

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

Open to Public Inspection

		enue Service				2006						2007	
			dar year,	or tax year beginnin	g 6/01	, 2006, a	and en	iain g	5/3			, ZUU / ntification Number	
В	Chack	if applicable:	Please use	C	msr nation					1	-		
	∐ Ad	loress change	IRS inbel	NASHVILLE CI								0788	
	∐ Na	me change	or ivne	3630 REDMON NASHVILLE, T						E Telep			
	Ini	tial return	specific	MUSIIATTIPE' 1	H 31203							<u> 297-2966</u>	
	Fi	nat return	instruc- tions.							F Accou	inting od:	Cash 2	Accrual
	∏ An	nended return									Other (sp	pecify) >	
		plication pending	Section	on 501(c)(3) organiz	ations and 494	7(a)(1) nonexempt	+	i and I	are not apple	cable to sec	tion 527	organizations.	_
	*`ب		charit	table trusts must at	ach a complet	ed Schedule A		H (a)	ls this a grou	ip return foi	affiliate	ь? Yes	X No
			(Form	1 990 or 990-EZ).			1	d (b)	if 'Yes.' ente	number of	affiliate	.s. ►	_
G	Web	site: <u>WWW</u> .	NASHVI	LLEBALLET.CO	AI		ř		Are all affilia				No
J	Orga	nization type			:	_,			(If "No." attac				
	(chec	k only one)		X 501(c) 3					ls this a sepi				(C)
K	Checl	k here 🏲 🔲 if	the organ	ization is not a 5096	a)(3) supportin	g organization and	its _		organization				X No
	gross	s receipts are	normally	not more than \$25,0	00. A return is	not required, but if return.	the		Group Ex	, , , , , , , , , , , , , , , , , , , 			
							!				•	ation is not requi	
L	Gross	receipts: Add	lines 6b, 8	b, 9b, and 10b to line	12 ► 4,1	45,223.						0, 990-EZ, or 990-	-PF).
		Revenu	e, Exper	ises, and Chan	es in Net A	ssets or Fund B	alan	ces	(See the	<u>instru</u>	ction	s.)	
	1			ants, and similar arr									
	a						1 a						
	ь	Direct public	support (not included on line	1a)		1 b		2,563	,388.			
	c	indirect publi	ic support	(not included on lin	e a)		1 c		13	,355.			
	d	c indirect public support (not included on line 1a)											
	e	Total (add lines	ash \$	2,708.122	noncash \$	25,128	•)				1 e	2,733	,250.
	2										2		,575.
	Program service revenue including government fees and contracts (from Part VII, line 93) Membership dues and assessments								3	2,210	, - ,		
	4	•										 7	,442.
	4 5										5	<u>'</u>	, 774.
	5 Dividends and interest from securities						э 2						
							Ş						
	b Less: rental expenses. 6b c Net rental income or (loss). Subtract line 6b from line 6a												
	_						• • • • •			••••••	6c		
R	7	Other investi	ment incoi	me (describe		(A) C =	1 1		(D) O4		7		
ポート・コード	8 a			les of assets other		(A) Securities	-		(B) Othe	er .	ry h		
N	Ī		•	• • • • • • • • • • • • • • • • • • • •			8a						
E				sis and sales expen			8b				,		
	C	Gain or (loss) (a	ttach schedu	de)			8 c						
						- . 					8d		
						nount is from gamin	g, che	ck he	re ►	ا ل			
	а			cluding \$, ,						
	}	reported on I	line 1b)				9a			,500.			
						•				,299.		•	
	•					b from line 9a			STATEM		9с		,799.
	,			•			$\overline{}$			<u>,436.</u>			
										,866.			
	¦ c	Gross profit or (loss) from sa	ales of inventory (attach s	chedule). Subtract	line 10b from line 10a			STATEM	ENT2	10 c		,430.
	11										11		20.
	12	Total revenu	e. Add line	es 1e, 2, 3, 4, 5, 6c.	7, 8d, 9c, 10c	, and 11			<u> </u>	<u></u> 1	12	3,967	,058.
_	13										13		,093.
MXPMZWEN	14	•	•		••						14		,005.
Ē	15		_								15		,190.
N S	16	-	-								16		<u></u>
E	17					· · · · · · · · · · · · · · · · · · ·					17	2.783	,288.
_	10					12					18		770.
N S E E T T	10			•						i	19		,878.
EF	19				•	ne 73, column (A)).					20	1,900	,,010.
T T S		-			•	olanation)						2 127	640
	21	ivet assets or	r tund bala	ances at end of year	. Combine line	s 18, 19, and 20			<u></u>		21	3,13 <i>1</i>	,648.

58-1440788

Form 990 (2006) NASHVILLE CITY BALLET

Page 2 Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

D	o not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 a	Grants paid from donor advised		-	9000		
	funds (attach sch)					
	(cash \$)				57.	
	If this amount includes	1				
	foreign grants, check here.	22 a				
22 t	Other grants and allocations (att sch)			į		
	(cash \$)					
	,		Ì			
	If this amount includes foreign grants, check here.	22 b				
23	Specific assistance to individuals					
	(attach schedule)	23				
24	Benefits paid to or for members					
	(attach schedule)	24	-			
25	a Compensation of current officers, directors, key employees, etc listed in					
	Part V-A (attach sch)	25 a	329,844.	243,666.	59,235.	26,943.
1	Compensation of former officers,			i		
	directors, key employees, etc listed in Part V-B (attach sch)	25 b	0.	0.	0.,	0.
•	Compensation and other distributions, not					
	ncluded above, to disqualified persons (as defined under section 4958(f)(1)) and persons					
	pescribed in section 4958(c)(3)(B) (attach schedule)	25 c	0.	0.	0.	0.
26	•	1				, -
20	Salaries and wages of employees not included on lines 25a, b, and c	26	836,293.	617,794.	150,187.	68,312.
27	Pension plan contributions not	Ì		1	-	
	Pension plan contributions not included on lines 25a, b. and c	27				
28	Employee benefits not included on		76.056	62.800	0 000	4 060
20	lines 25a - 27	28	76,856. 171,324.	62,898. 127,622.;	8,990. 33,906.	<u>4,968.</u> 9,796.
29 30	Payroll taxes Professional fundraising fees		64,652.	121,022.	33, 300.	64,652.
31	Accounting fees		04,032.			04,032.
32	Legal fees	·				
33	Supplies		10,916.	6,113.	2,947.	1,856.
34	Telephone		7,867.	6,766.	708.	393.
35	Postage and shipping.		3,329.	1,864.	899.	566.
36	Occupancy		69,995.	60,196.	6,299.	3,500.
37	Equipment rental and maintenance		51,182. 6,369.	39,671. 3,567.	7,214.	4,297. 1,082.
38 39	Printing and publications.	39	23,399.	20,123.	2,106.	1,170.
40	Conferences, conventions, and meetings	40	23,333.	20,123.	2,100.	1,110.
41	interest	41	9,714.	8,355.	874.	485.
42	Depreciation, depletion, etc (attach schedule)	42	128,043.	110,117.	11,524.	6,402.
	Other expenses not covered above (itemize):					
	SEE STATEMENT 3	43 a	993,505.	955,341.	8,396.	29,768.
	b	43 b 43 c				
	c d	43 d				
	8	43e		j		
		43 f				
,	9	43 g				
44						
	Total functional expenses. Add lines 225 through 43g. (Organizations completing columns (5) - (D), carry these totals to lines 13 - 15)	44	2,783,288.	2,264,093.	295,005.	224,190.
Join	t Costs. Check If you are followin					
	any joint costs from a combined education		aign and fundraising s			
	es," enter (i) the aggregate amount of the	se joint c	osts 5	; (ii) the ar	mount allocated to Progr	am services
\$; (iii) the amount a undraising \$	iliocated t	o Management and ge	neral \$; and (iv) the	amount allocated
BAA			TEEA0102L 01/2			Form 990 (2006

Form 990 (2006) NASHVILLE CITY BALLE	Т	58-144	10788 Page 3
Statement of Program Service A	Accomplishments		
Form 990 is available for public inspection and, for sorganization. How the public perceives an organizatiolease make sure the return is complete and accura	ion in such cases may be determined by the info	ormation presented o	n its return. Therefore.
What is the organization's primary exempt purpose? All organizations must describe their exempt purpos clients served, publications issued, etc. Discuss achieve zations and 4947(a)(1) nonexempt charitable trusts	SEE STATEMENT 4 the achievements in a clear and concise manner. the achievements in a clear and concise manner. the achievements in a clear and concise manner. the achievements and concise manner. The achievements and concise manner.	State the number of and (4) organ- ations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)
a PROMOTE THE PURPOSE OF THE OF	RGANIZATION AND RELATED MANDATE R ARTS ORGANIZATIONS WITH THE (ES_WHILE	
(Grants and allocations \$) If this amount includes foreign grants, of	check here ▶	2,264,093.
b			
(Grants and allocations \$) If this amount includes foreign grants, o	check here	
(Grants and allocations \$) If this amount includes foreign grants, (check here ►	
(Grants and allocations \$) If this amount includes foreign grants, o	check here	

f Total of Program Service Expenses (should equal line 44, column (B), Program services).....

) If this amount includes foreign grants, check here . . . ►

ВАА

2,264,093. Form 990 (2006)

Page 4

58-1440788

Form 990 (2006) NASHVILLE CITY BALLET Balance Sheets (See the instructions.) (A) Beginning of year (B) End of year Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only. 848. 73,010. 45 Cash - non-interest-bearing 854,323. 198,410. 46 26,639. 10,620. 47c 26,639. b Less: allowance for doubtful accounts..... 47 h 418,178. 48 a 91,116. 48 c 406,113. b Less: allowance for doubtful accounts..... 12,065. 48b 44,185. 54,693. 49 Grants receivable..... 50 a Receivables from current and former officers, directors, trustees, and key 50 a employees (attach schedule)..... b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)..... 50 b 51 a Other notes and loans receivable 51 a (attach schedule)..... b Less: allowance for doubtful accounts....... 51 b 51 c 13,368. 52 Inventories for sale or use..... 9,411. 52 22,782. 49,211. 53 Prepaid expenses and deferred charges..... 53 54 a 54a Investments - publicly-traded securities IFMV 54 b b Investments — other securities (attach sch)...... ▶ Cost FMV 55 a investments - land, buildings, & equipment: basis. . 55 a b Less: accumulated depreciation 55 0 (attach schedule)..... ...SEE .STMT..5. 66,673. 74,115. 56 investments - other (attach schedule)..... 56 57 a 2,983,779. b Less: accumulated depreciation (attach schedule)......STATEMENT .6... 57b 1,835,157. 1,767,809. 1,215,970. 58 Other assets, including program-related investments (describe ► SEE STATEMENT 7 16,091 81,186. 59 Total assets (must equal line 74). Add lines 45 through 58..... 2,367,455. 3,328,305. 42,482. 30,626. 60 60 61 Grants payable 132,752. 160,031. Deferred revenue..... 62 62 63 Loans from officers, directors, trustees, and key 63 employees (attach schedule)..... 64a Tax-exempt bond liabilities (attach schedule)..... 64 2 213,000. 64 b 25,343. 65 Other liabilities (describe . . _ ____)... 190,657. Total liabilities. Add lines 60 through 65 413,577. 66 Organizations that follow SFAS 117, check here | X and complete lines 67 through 69 and lines 73 and 74. 1,725,315 1,987,362. 67 67 Unrestricted.... 161,890. 1,076,171. 68 74,115. 66,673. 69 Permanently restricted..... Organizations that do not follow SFAS 117, check here - and complete lines Q R 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..... Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 1,953,878. 3,137,648. 73 72. (Column (A) must equal line 19 and column (B) must equal line 21) 2,367,455. 74 3,328,305. 74 Total liabilities and net assets/fund balances. Add lines 66 and 73....

BAA

BAA

Form 990 (2006)

Fo	orm 990 (2006) NASHVILLE	CITY BA	LLET			.440788	Page 5
9	Reconciliation of instructions.)	of Revenue	per Audited Financia	Statements with	n Revenue per Ret	urn (See th	те
a	Total revenue, gains, and of	ther support p	er audited financiał stateme	ents		a 4,:	2 <u>27, 27</u> 9.
b	Amounts included on line a						
	1 Net unrealized gains on inve	estments,					
	2Donated services and use of				82,056.		
	3Recoveries of prior year grad	nts		b3			
	4Other (specify):			- -			
	SEE STM 8	_ 		<u> </u>	178,165.		
	Add lines b1 through b4				P		<u>260,221.</u>
С	Subtract line b from line a.					c 3,	<u>967,058.</u>
d		-		11			
	1 Investment expenses not inc						
	2Other (specify):						
	Add lines d1 and d2				, , , , , , , , , , , , , , , , , , ,	_d	067 050
e	Total revenue (Part I, line 1	2). Add lines	c and d	1 (1-1			967,058.
	Reconciliation of	or Expense	s per Audited Financi	ai Statements wi	tn Expenses per H	eturn	
а	Total expenses and losses p	per audited fir	nancial statements	***********		a 3,	043,509.
b	Amounts included on line a			1 1			
	1Donated services and use of				82,056.		
	2Prior year adjustments repo						
	3Losses reported on Part I, Ii	ine 20		<u>Б3</u>			
	4Other (specify):						
	SEE STMT 9			<u>_b4</u>	178,165.		
	Add lines b1 through b4				· •		260,221.
C						c 2,	783,288.
ď				11			
	1 Investment expenses not inc						
	2Other (specify):						
	Add lines d1 and d2					d .	702 000
e	Total expenses (Part I, line						783,288.
態	Current Officers or key employee at	s, Directors any time duri	s, Trustees, and Key E ng the year even if they we	mployees (List eare not compensated.)	ich person who was ar (See the instructions.	officer, direc	tor, trustee,
			(B) Title and average hours				xpense
	(A) Name and address	s	per week devoted to position	(if not paid, enter -0-)	employee benefit plans and deferre	d alloy	and other vances
			·		compensation plan	าร	
						j	
<u>SE</u>	EE STATEMENT 10		· · -	329,844	14,43	2.	0.
			••				
	·						
	<u> </u>					_	
<u> </u>							
					•	1	

TEEA0105L - 01/18/07

Form 990 (2006) NASHVILLE CITY BALLET			58-14407	788	Page 6		
Pro V-A Current Officers, Directors, Tru					Yes No		
75 a Enter the total number of officers, directors, and trustees p							
b Are any officers, directors, trustees, or key end listed in Schedule A, Part I, or highest compet A. Part II-A or II-B, related to each other throusdentifies the individuals and explains the relationship.	nsated professional and high family or business r tionship(s)	d other independent correlationships? If 'Yes,' a	ntractors listed in Schedi attach a statement that	ule 75 b	X		
c Do 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-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'.							
If 'Yes,' attach a statement that includes the ii					是我们是		
d Does the organization have a written conflict of	of interest policy?	<u> </u>	<u></u>	75 d	X		
Former Officers, Directors, Tru Benefits (If any former officer, direct during the year, list that person below the instructions.)	or, trustee, or key emp	lovee received compen-	sation or other benefits ((described i	below)		
(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Ex account a allowa			
NONE							
		·					
			_				
	L	<u> </u>					
Other Information (See the inst	ructions.)			70000	Ýes No		
76 Did the organization make a change in its acti If 'Yes,' attach a detailed statement of each cl				76	X		
77 Were any changes made in the organizing or	-			<u> </u>	X		
If 'Yes,' attach a conformed copy of the change		at not reported to the n					
78 a Did the organization have unrelated business		or more during the ver	ar covered by this return	? 78a	Х		
b If 'Yes,' has it filed a tax return on Form 990-1	•		-	- t	N/A		
79 Was there a liquidation, dissolution, termination year? If 'Yes,' attach a statement	on, or substantial contra	action during the		79	X X		
80 a ls the organization related (other than by asso	ociation with a statewid	e or nationwide organiz	ation) through common				
membership, governing bodies, trustees, offic			yanızatıon:	80 a	X		
b If 'Yes,' enter the name of the organization ►		seck whether it is The	vernation Thomason				
81 a Enter direct and indirect political expenditures	and a	ouz) iecz wnienien ir iz ∏ e	81 a	0.			
b Did the organization file Form 1120-POL for the	•	•	·		X		
BAA	<u> </u>				990 (2006)		

	0 (2006) NASHVILLE CITY BALLET	58-144078	8	Р	age 7
JEEU.	Other Information (continued)			Yes	No
82 a Di St	I the organization receive donated services or the use of materials, equipment, or facilities estantially less than fair rental value?	es at no charge or at	82 a	X	- Ames α
r€	Yes,' you may indicate the value of these items here. Do not include this amount as venue in Part I or as an expense in Part II. (See instructions in Part III.)	82ы 82,056.			
	t the organization comply with the public inspection requirements for returns and exempt		83 a	X	
	t the organization comply with the disclosure requirements relating to quid pro quo contri		83 Б	Χ	
84 a D	the organization solicit any contributions or gifts that were not tax deductible?		84 a	SOLING:	X
b if	Yes,' did the organization include with every solicitation an express statement that such tax deductible?	contributions or gifts were	84 b	N	A
	1(c)(4), (5), or (6) organizations, a Were substantially all dues nondeductible by members		85 a		/A
	the organization make only in-house lobbying expenditures of \$2,000 or less?		85 b	N	A Marie and the second
lf w	Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless iver for proxy tax owed for the prior year.				
c D	es, assessments, and similar amounts from members	85 c N/A	- 200333341		
	ction 162(e) lobbying and political expenditures		- Market 18		
	gregate nondeductible amount of section 6033(e)(1)(A) dues notices		一致,在是一		
	xable amount of lobbying and political expenditures (line 85d less 85e)		-		
g D	es the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85 g	N	A
h If di	ection 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reas as allocable to nondequotible loobying and political expenditures for the following tax year?	sonable estimate of	85 h	N,	/ A
86 5	i(c)(7) organizations. Enter: a Initiation fees and capital contributions included on				
	e 12	86a N/A			
	oss receipts, included on line \2, for public use of club facilities	86 b N/A			
87 5	(1(c)(12) organizations. Enter: a Gross income from members or shareholders	87 a N/A			
b G a	oss income from other sources. (Do not net amounts due or paid to other sources ainst amounts due or received from them.)	87b N/A			
88 a A o: lf	any time during the year, did the organization own a 50% or greater interest in a taxable an entity disregarded as separate from the organization under Regulations sections 301. Yes,' complete Part IX	e corporation or partnership, 7701-2 and 301,7701-3?	88 a		X
b A	any time during the year, did the organization, directly or indirectly, own a controlled enti- ction 512(b)(13)? If 'Yes,' complete Part XI	tity within the meaning of	88Ъ		Х
	(I(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year				
	ction 4911 ► 0.; section 4912 ► 0.; section				
b 5	17(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excring the year or did it become aware of an excess benefit transaction from a prior year?	ess benefit transaction			
e	plaining each transaction		89b	Service Services	X
c E y	ater: Amount of tax imposed on the organization managers or disqualified persons during ar under sections 4912, 4955, and 4958.	the0.			
	ster: Amount of tax on line 89c, above, reimbursed by the organization			題於	
e A	l organizations. At any time during the tax year, was the organization a party to a prohibi	ted tax shelter transaction?	89e		X
f A	organizations. Did the organization acquire a direct or indirect interest in any applicable	insurance contract?	89f	er en er s	X
0	or supporting organizations and sponsoring organizations maintaining donor advised fund ganization, or a fund maintained by a sponsoring organization, have excess business hol	dings at any time during	89 g		Y.
	e year?		1 039		Z.
- 13	e instructions.)		90Ь		51
91 a T	e books are in care of ► MARGIE WHITMORE Telephone r	number - (615) 297-	<u> 2966</u>		
	re books are in care of ► MARGIE WHITMORE Telephone related at ► 363C_REDMON_STREET, NASHVILLE_TN	•	<u>9</u> г		
ρĂ	any time during the calendar year, did the organization have an interest in or a signature andial account in a foreign country (such as a bank account, securities account, or other	e or other authority over a	91 6	Yes	No X
			310	242	<u>^</u>
	Yes,' enter the name of the foreign country *				音感
	e the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report on ancial Accounts.	of Foreign Bank and			

Form 990 (2006) NASHVILLE CITY BAL	LET _	58-1440788 Page 8				
Density Other Information (continue	ed)				Yes No	
c At any time during the calendar year, did		naintain an offic	e outside of the U	nited States?	91 c X	
If 'Yes,' enter the name of the foreign count	rv ►					
92 Section 4947(a)(1) nonexempt charitable	trusts filing Form	990 in lieu of Fo	<i>orm 1041</i> – Check	here	N/A ►	
and enter the amount of tax-exempt inte	rest received or ac	crued during the	tax year	▶ 92	N/A	
Ran VIII Analysis of Income-Produc	ing Activities (See the instr	uctions.)			
	Unrelated bus	iness income	Excluded by see	ction 512, 513, or 514	(E)	
Note: Enter gross amounts unless otherwise indicated.	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	Related or exempt function income	
93 Program service revenue:	1					
a COSTUMES/PROPS REVENU					15,960.	
b SCHOOL AND WORKSHOPS					8,424.	
c TICKET SALES					623,540.	
d TOUR FEES					39,275.	
e_TUITION					553,376.	
f Medicare/Medicaid payments						
g Fees & contracts from government agencies						
94 Membership dues and assessments.						
95 Interest on savings & temporary cash invmnts .			14	7,442.		
96 Dividends & interest from securities.						
97 Net rental income or (loss) from real estate:						
a debt-financed property				· · · ·		
b not debt-financed property						
98 Net rental income or (loss) from pers prop						
99 Other investment income				· · · · · · · · · · · · · · · · · · ·		
100 Gain or (loss) from sales of assets other than inventory						
101 Net income or (lass) from special events		1	1	-8,799.		
102 Gross profit or (loss) from sales of inventory			3	-5,430.		
103 Other revenue: a						
b MISCELLANEOUS					20.	
С						
d						
e						
104 Subtotal (add columns (B), (D), and (E))			\$ \$250 K. \$2500	-6,787.	1,240,595.	
105 Total (add line 104, columns (B), (D),					1,233,808.	
Note: Line 105 plus line 1e, Part I, should equ	-					
Relationship of Activities to			xempt Purpose	s (See the instruc	tions.)	
Explain how each activity for which of the organization's exempt purp	h income is report	ed in column (E) of Part VII contrib	outed importantly to the		
ALL ALL REVENUE IS GENERA	TED TO COVER	COSTS INC	CURRED BY PR	ODUCTIONS.		
				•		
			-			
Part X Information Regarding Tax	able Subsidiar	ies and Disre	garded Entitie	s (See the instruct	ions.)	
(A)	(B)		(C)	(D)	(E)	
Name, address, and EIN of corporation,	Percentage of	Nature	of activities	Total	End-of-year	
partnership, or disregarded entity	ownership interest	14atule C	or activities	income	assets	
N/A	%					
	56					
	90					
	ې					
Part X Information Regarding Tra	nsfers Associa	ted with Pers	sonal Benefit C	ontracts (See the		
a Did the organization, during the year, fedeve any full b Did the organization, during the year, pa					Yes X No	
Note: If 'Yes' to (b), file Form 8870 and Fo	= '					
ΒΔΔ				TEFACIORI DAIDAIS	7 Form 990 (2006)	

	990 (2006) NASHVILLE CITY BALLET		58-144		Page	
	Information Regarding Transfers organization is a controlling organi	To and From Controlled Entitization as defined in section 5	ties. Complete only if t 512(b)(13).	he 		
106	Did the reporting organization make any transfe 'Yes,' complete the schedule below for each cor	ers to a controlled entity as defined introlled entity	n section 512(b)(13) of the	Code? If	Yes No	
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	Amount	(D) of transfer	
a						
b						
С .						
	Totals					
107	Did the reporting organization receive any trans 'Yes,' complete the schedule below for each co	sfers from a controlled entity as definition	ned in section 512(b)(13) of	the Code? I	Yes No	
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer		
a						
b						
С						
	Totals					
108	Did the organization have a binding written con annuities described in question 107 above?	tract in effect on August 17, 2006, or	overing the interest, rents, r	oyalties, and	Yes No	
Plea	Under penalties of perjury, I doclare that I have examined true, correct, and complete. Declaration of preparer (other	this return, including accompanying schedules a ribran officer) is based on all information of which	and statements, and to the best of my n preparer has any knowledge.		eliet, il is	
Sign Here	Signature of officer	President	Cate			
Paid Pre-		Ly Dale	8-07 Check if self- employed ► X	Preparer's SSN Genera Instruct N/A	or PTIN (Set son W)	
pare Use Only	Firm's name (or FRASIER, DEAN & HO yours it self: employed). 3310 WEST END AVE		EIN ► N/A		6592	
BAA					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

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 58-1440788 NASHVILLE CITY BALLET Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See instructions. List each one. If there are none, enter 'None.') (d) Contributions to employee penefit plans and deferred (b) Title and average (c) Compensation (e) Expense account and other (a) Name and address of each hours per week devoted to position employee paid more than \$50,000 allowances compensation NONE Total number of other employees paid over \$50,000 Compensation of the Five Highest Paid Independent Contractors for Professional Services (See 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 PAINE & PARTNERS 56 LINDSLEY AVENUE, STE 101 NASHVILLE, TN 37210 PR, MARKETING, ADV 61,433. LAWSON ASSOCIATES 545 MADISON AVENUE NEW YORK, NY 10022 FUNDRAISING 72,034. Total number of others receiving over \$50,000 for professional services Rank Ba 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 instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation NONE

Total number of other contractors receiving

over \$50,000 for other services.

Schedule A (Form 990 or 990-EZ) 2006 NASHVILLE CITY BALLET	58-1440/88	, 	age 2
Facilies Statements About Activities (See instructions.)		Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid.	ng any attempt d		
or incurred in connection with the lobbying activities • \$ N/A		ł	1
(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	<u>1</u>		<u> </u>
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A organizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description lobbying activities.	. Other otion of the		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts substantial contributors, trustees, directors, officers, creators, key employees, or members of their fam taxable organization with which any such person is affiliated as an officer, director, trustee, majority ov beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transact	wher, or with any		
a Sale, exchange, or leasing of property?	2	a	Х
b Lending of money or other extension of credit?	2	ь	<u> x</u>
c Furnishing of goods, services, or tacilities?		С	X
SEE FORM 990, PAR	TV	ļ	İ
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2	d X	<u> </u>
e Transfer of any part of its income or assets?	2	e	Х
3a 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.)	STMT. 11 3	a X	
b Did the organization have a section 403(b) annuity plan for its employees?	3	ь	х
c 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	.,3	c	х
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation ser	rvices?3	d	x
4a Did the organization maintain any donor advised funds? If 'Yes,' complete lines 4b through 4g. If 'No,' 4f and 4g	complete lines	а	x
b Did the organization make any taxable distributions under section 4966?	4	b N	I/A_
C Duel the recognization makes a distribution to a term of a contract of the c	ļ	1	. _
Did the organization make a distribution to a donor, donor advisor, or related person?	-		I/A
d Enter the total number of donor advised funds owned at the end of the tax year			N/A
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	<u> </u>		N/A
f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding done funds included on line 4d) where donors have the right to provide advice on the distribution or investment amounts in such funds or accounts.	ent of		0
g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the ti	ax year ►		0.

Schedule A (F	orm 990 or 990-EZ) 2006 NA	ASHVILLE CITY BAL	LET		58-1440	788 Page 3
i en lo	Reason for Non-Private I	Foundation Status (S	See instructions.)			
i certify that th	e organization is not a private	foundation because it is: ((Please check only ONE app	plicable box	.)	
5	urch, convention of churches, o	or association of churches.	Section 170(b)(1)(A)(i).			
6	hool. Section 170(b)(1)(A)(ii). ((Also complete Part V.)				
7 \[\] A ho	spital or a cooperative hospital	service organization. Sec	tion 170(b)(1)(A)(iii).			
8	deral, state, or local governmen	nt or governmental unit. S	ection 170(b)(%)(A)(v).			
	edical research organization op	perated in conjunction with	a nospital. Section 170(b)	(1)(A)(iii). Ei	nter the hosp	oital's name, city,
10 And (Als	organization operated for the be o complete the Support Sched	enefit of a college or unive ule in Part IV-A.)	ersity owned or operated by	a governme	ental unit. Se	ction 170(b)(1)(A)(iv).
11 a X An o	organization that normally recei tion 170(b)(1)(A)(vi). (Also com	ves a substantial part of it plete the Support Schedu	is support from a governme lie in Part IV-A.)	ental unit or	from the gen	eral public.
11 b A co	ommunity trust. Section 170(b)(1)(A)(vi). (Also complete t	the Support Schedule in Pa	art IV-A.)		
from	organization that normally received activities related to its charital gross investment income and inization after June 30, 1975. S	ble, etc. functions — subje	ct to certain exceptions, ar	nd (2) no mo	ore than 33-1.	/3% of its support
13 An (organization that is not controlle irements of section 509(a)(3).	ed by any disqualified pers	sons (other than foundation	managers)	and otherwis	se meets the
	Type I		onally Integrated	Type III		
	Provide the	e following information ab	out the supported organiz	ations. (See	instructions	.)
N:	(a) ame(s) of supported organization(s)	(b) Employer identification number (EIN)	Employer identification Type of			(e) Amount of support
				Yes	No	
	····					
		. · <u>-</u>				
Total						0.
14 And	organization organized and ope	rated to test for public safe	ety. Section 509(a)(4). (Sec			n 990 or 990-EZ) 2006

Sche	dule A (Form 990 or 990-EZ) 2006	NASHVILLE C	ITY BALLET		58-144078	88 Page 4
	Support Schedule (0			e 10, 11, or 12.) <i>Use c</i>	ash method of accou	inting.
Note	: You may use the worksheet in th	e instructions for con	verting from the accr	rual to the cash metho	d of accounting.	
	ndar year (or fiscal year nning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,746,760.	1,617,126.	1,647,684.	1,493,225.	6,504,795.
16	Membership fees received					Ō.
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	1,191,334.	1,197,266.	803,735.	904,396.	4,096,731.
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.	3,730.	4,917.	15,403.	5,090.	29, <u>1</u> 40.
19	Net income from unrelated business activities not included in line 18					0.
20	Tax revenues levied for the organization's benefit 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					<u> </u>
	gain or (loss) from sale of capital assets SEE. STMT . 12	20,880.	728.	47,850.	51,145.	120,603.
23	Total of lines 15 through 22	2,962,704.	2,823,037.	2,514,672.	2,453,856.	10,751,269.
	Line 23 minus line 17	1,771,370.	1,622,771.	1,710,937.	1,549,460.	6,654,538.
25	Enter 1% of line 23	29,627.	28,200.	25,147.	24,539.	
26	Organizations described on line	s 10 or 11: a Ente	er 2% of amount in c	olumn (e), line 24	► 26a	133,091.
b	Prepare a list for your records to show the supported organization) whose total gifts f return. Enter the total of all these excess	or 2002 through 2005 excee	ded the amount shown in li	ine 26a. Do not file this list	with your	208,633.
c	: Total support for section 509(a)(1					6,654,538.
	Add: Amounts from column (e) for		29,140.	19		
		22	120,603.	26b 208,6	33. 26 d	358,376.
	Public support (line 26c minus fin				► 26e	6,296,162.
	Public support percentage (line :	26e (numerator) divid	ed by line 26c (deno	minator))	► 26f	94.61 %
27 a	Organizations described on line For amounts included in lines 15, name of, and total amounts receisuch amounts for each year: (2005)	.16, and 17 that were ved in each year from			•	
t	For any amount included in line 1 to show the name of, and amoun	7 that was received for the received for each year.	rom each person (olf ar, that was more th	her than 'disqualified p an the larger of (1) the	persons), prepare a li e amount on line 25 f	st for your records or the year or (2)
	After computing the difference be differences (the excess amounts)	zations described in li tween the amount red for each year:	nes 5 through 11b, a seived and the larger	is well as individuals.) amount described in	Do not file this list w (1) or (2), enter the si	rith your return. um of these
	(2005)	(2004)	(2003)		_ (2002)	
С	Add: Amounts from column (e) for 17 Add: Line 27a total Public support (line 27c total mine 27c total mi	r lines: 15		16		
	17			21	27 c	
d	Add: Line 2/a total	an an	d line 27b total	·····	27 d	
e	Total support for section 509(a)(2	us line ∠/d total)	from tine 59	(a) Þ. 274	27e	
1	Public support for section 509(a)(2)	g lest. ⊏nter amount i Za (numerator) disid	rom ime 23, column ed by line 27/1/demai	(c). 2/1	□ 27 =	8
	Investment income percentage (Ine 2					<u> </u>
	Unusual Grants: For an organization					
	list for your records to show, for enature of the grant. Do not file the	each year, the name o	if the contributor, the	date and amount of t	the grant, and a brief	description of the

	nedule A (Form 990 or 990-EZ) 2006 NASHVILLE CITY BALLET	58-1440/88		P;	age 5
<u>`Ej</u>	Private School Questionnaire (See instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)		N/A	 -	
				Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter other governing instrument, or in a resolution of its governing body?	, byławs,	29	7. 0	
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	brochures,	30		
37	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast med the period of solicitation for students, or during the registration period if it has no solicitation program, in makes the policy known to all parts of the general community it serves?	ia during a way that	31		
	If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)				
32	2 Does the organization maintain the following:				
	a Records indicating the racial composition of the student body, faculty, and administrative staff?		32 a		İ
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		32 b		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dea with student admissions, programs, and scholarships?	[32 c		
	d Copies of all material used by the organization or on its behalf to solicit contributions?		32 d		
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement of the above, please explain.)				
33	Does the organization discriminate by race in any way with respect to:				
	a Students' rights or privileges?		33 a		
	b Admissions policies?		33 b		
	c Employment of faculty or administrative staff?		33 c		
	d Scholarships or other financial assistance?		33 d		
	e Educational policies?		33 e		
	f Use of facilities?		331		
	g Athletic programs?		33 g	,	:
	h Other extracurricular activities?		33 h		
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate sta	atement.) 			
				1	
			\$ 64.		
34	a Does the organization receive any financial aid or assistance from a governmental agency?		34 a		
	b Has the organization's right to such aid ever been revoked or suspended?		34 b		
35	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	2.183	STEEL STEEL
BA	C-L-2	iule A (Form 990	or 99	30.EZ)	2005

Sche	dule A (Form 990 or 990	-EZ) 2006 NASHVIL	TE CLLA BUTTEL		5	8-1440	788 Page 6
	Lobbying Ex (To be complete			es (See instructions. orm 5768))		N/A
Chec	k > a if the organiz	zation belongs to an affil	iated group. Check	► b if you check	ed 'a' and 'iin	nited contro	ol' previsions apply.
		imits on Lobbying	•	41	(a) Affiliated total		(b) To be completed for all electing
							organizations
36	Total lobbying expenditu			•			
37		ures to influence a legisi			<u> </u>		
38		ures (add lines 36 and 3			ļ — — —		
39		expenditures					
40		expenditures (add lines 3					
41	Lobbying nontaxable an						
	If the amount on line 40	20%	obbying nontaxable ar	550.00	医安全连续		
		,000,000 \$100,0					
		\$1,500,000 \$175,0		I 1		Destroy of the Party of the Par	the proof of the party of the party of the party.
		\$17,000,000 \$225,0					
		\$1,00					
42	Grassroots nontaxable					meet manage (1922)	
43		ne 36. Enter -0- if line 42	•				
44		ne 38. Enter -0- if line 41			1		
		amount on either line 43		The second secon			
			Averaging Period L		1/h)		
	(Some organ	izations that made a sec	etion 501(h) election do the instructions for lin	not have to complete	all of the five	columns	below.
			Lobbying Expend	litures During 4 -Year	Averaging Pe	riod	
	Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2005	(c) 2004	(d) 200		(e) Total
45	Lobbying nontaxable amount.						
46	Lobbying ceiling amount (150% of line 45(e)).						
47	Total lobbying expenditures						,
48	Grassroots non- taxable amount						
49	Grassroots ceiling amount (150% of line 48(e)).						
50	Grassroots lobbying expenditures						
		only by organizations tha	t did not complete Par	t VI-A) (See instruction			N/A
	ng the year, did the organ npt to influence public op	nization attempt to influe pinion on a legislative ma	ence national, state or l atter or referendum, th	local legislation, inclu rough the use of:	oing any	res No	Amount
	Volunteers.				—		
	Paid staff or manageme			•	_		S. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
	: Media advertisements .				_		
	Mailings to members, le					- }	·
	Publications, or publishe						
	Grants to other organiza				-		
	Direct contact with legis				,	+	
in ;	Rallies, demonstrations,	seminars, conventions,	speecnes, lectures, or	any other means	350		
,	Total lobbying expenditu					September 1	·
	in tes to any of the abov	e, aisu allacii a sialemeni	, giving a detalled descri	promor ine roppying 20	HAIRIGS.		

BAA

Page 7

Schedule A (Form 990 or 990-EZ) 2006

Schedule A (Form 990 o	r 990-EZ) 2006 NA	ASHVILLE CITY BALLET	58-1440	788	Page 7
Information		nsfers To and Transactions a	nd Relationships With Noncharit	:able	
51 Did the reporting o of the Code (other	rganization directly o	r indirectly engage in any of the follow 3) organizations) or in section 527, re	ving with any other organization describe ating to political organizations?	d in section	on 501(c)
a Transfers from the	reporting organization	en to a noncharitable exempt organiza	ition of:		Yes No
(i) Cash				51 a (i)	X
(ii)Other assets.	• • • • • • • • • • • • • • • • • • • •			a (ii)	X
b Other transactions	:		İ		
(i)Sales or excha	inges of assets with a	a noncharitable exempt organization.	·	b (i)	X_
(ii)Purchases of a	ssets from a noncha	ritable exempt organization		b (ii)	X
				b (iii)	<u>X</u>
				b (iv)	X
				b (v)	X
		• =		b (vi)	<u> </u>
c Sharing of facilities	s, equipment, mailing	lists, other assets, or paid employee	s	c	<u> </u>
d if the answer to an the goods, other a any transaction or	ny of the above is Ye ssets, or services giv sharing arrangement	s,' complete the following schedule. C en by the reporting organization. If th , show in column (d) the value of the	Column (b) should always show the fair ma e organization received less than fair ma goods, other assets, or services received	iarket value rket value j:	in to
(a) (b) Line no. Amount)	(c) of noncharitable exempt organization	(d)		
N/A					-
					
			 		
					
			 -		
					
		-			,
	directly or indirectly in 501(c) of the Code the following schedule		ore tax-exempt organizations ection 527?	► _ Yes	s X No
(a Name of or		(b) Type of organization	(c) Description of relation		
N/A	901112011011	Type of digametrion	Description of relation		
IV/A					
			 		
				· · · · ·	
		1	ł .		

				
2006 FE	DERAL STAT	EMENTS		PAGE 1
	NASHVILLE CITY	BALLET		58-1440788
STATEMENT 1 FORM 990, PART I, LINE 9 NET INCOME (LOSS) FROM SPECIAL E	EVENTS			
SPECIAL EVENTS F	LE GROSS CONT RECEIPTS BUT	RI- GROSS		NET INCOME (LOSS)
BALLET BALL TOTAL \$	332,238. 209 332,238. \$ 209	,738. 122,5 ,738. \$ 122,5	00. 131,299 00. \$ 131,299	
STATEMENT 2 FORM 990, PART I. LINE 10 GROSS PROFIT (LOSS) FROM SALES FRIENDS BOUTIQUE GROSS SALES LESS RETURNS & ALLOWANCES NET SALES LESS COST OF GOODS SOLD GROSS PROFIT FROM SALES OF INVI			\$	41,436.
STATEMENT 3 FORM 990, PART II, LINE 43 OTHER EXPENSES				
	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) <u>FUNDRAISING</u>
CHOREOGRAPHY & ARTISTIC FEES DEVELOPMENT DUES & SUBSCRIPTIONS EMPLOYEE ACQUISITION INSURANCE MARKETING MISCELLANEOUS OUTREACH PRODUCTION EXPENSE PROFESSIONAL FEES	91,140. 25,105. 7,268. 3,557. 26,508. 243,765. 6,562. 15,378. 80,897. 9,755.	91,140. 6,251. 3,059. 22,797. 243,765. 5,729. 15,878. 80,897. 8,389.	654. 320. 2,386. 600.	25,105. 363. 178. 1,325. 333.
SCHOOL EXPENSE SERVICE CHARGES SYMPHONY FEES THEATER RENTAL & CREW EXPENSE UTILITIES	88,910. 13,859. 145,931. 208,609. 25,661. AL \$ 993,505.	88,910. 11,918. 145,931. 208,609. 22,068.	1,248. 2,310.	693. 1,283.

2006	FEDERAL ST	ATEMENTS		PAGE 2		
	NACHVILLEC	TV RALLET		58-1440788		
	NASHVILLE CITY BALLET					
ORGANIZ THE PUR	ENT 4 00 , PART III ZATION'S PRIMARY EXEMPT PURPOSE POSE OF THE ORGANIZATION IS TO MAINT WITH AN AFFILIATED SCHOOL MANDATED	FAIN A RESIDENT TO EDUCATE AND	PROFESSIONAL ENTERTAIN.	BALLET		
STATEM FORM 99 INVESTM	ENT 5 90, PART IV, LINE 56 MENTS - OTHER		WARTON.	DOON		
	VALUATION DESCRIPTION OF INVESTMENT METHOD			BOOK VALUE		
COMMUNI	TY FDN BENEFICIAL INTEREST	MARKET VAI	LUE TOTAL	\$ 74,115. \$ 74,115.		
AUTOMOE FURNITU	CATEGORY BILES / TRANSPORTATION EQUIPMENT JIRE AND FIXTURES ERY AND EQUIPMENT	BASIS \$ 39,083. \$ 83,164. 885,093. 1,976,439. \$ 2,983,779. \$	70,607. 718,565. 403,069.	12,557. 166,528. 1,573,370.		
CASH SU CONSORT	90, PART IV, LINE 58			8,676. 4,335.		
OTHER A	IENT 8 90. PART IV-A, LINE B(4) AMOUNTS F GOODS SOLD L EVENT EXPENSES			\$ 46,866. 131,299. s 178,165.		

2006	FEDERAL STATEMENTS	PAGE 3
	NASHVILLE CITY BALLET	58-1440788
STATEMENT 9 FORM 990, PART OTHER AMOUNT	T IV-B, LINE B(4)	
COST OF GOODS SPECIAL EVENT	SOLD EXPENSES TOTAL	\$ 46,866. 131,299. 178,165.

STATEMENT 10 FORM 990, PART V-A LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
ANDREA DILLENBURG	EXECUTIVE DIR. S	81,991.	\$ 2,366.	\$ 0.
NASHVILLE, TN	40			
PAUL VASTERLING	ARTISTIC DIR.	85,577.	2,839.	0.
NASHVILLE, TN	40			
AMY LEE BELL	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	1			
PAMELA CARTER	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	1			
CLAIRE TUCKER	PRESIDENT	0.	0.	, 0.
BRENTWOOD, TN	1			
JIM MCGREGOR	TREASURER	0.	0.	0.
NASHVILLE, TN	1			
SUANN DAVIS	BOARD MEMBER	. 0.	0.	0.
NASHVILLE, TN	1			
BOB ARNETT	BOARD MEMBER	0.	0.	0.
BRENTWOOD, TN	1			
ANITA BALTIMORE	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	1			
MELISSA BUFFINGTON	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	1			

2006 FEDERAL STATEMENTS PAGE 4

NASHVILLE CITY BALLET 58-1440788

STATEMENT 10 (CONTINUED) FORM 990, PART V-A LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE A AVERAGE H PER WEEK DI	IOURS	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
LARRAINE GERELICK	BOARD	MEMBER 1	\$ 0.	\$ 0.	\$ 0.
NASHVILLE, TN		•			
NANCY CHEADLE	BOARD	MEMBER 1	0.	0.	0.
NASHVILLE, TN		•			
DENNIS CLARK	BCARD	MEMBER 1	0.	0.	0.
NASHVILLE, TN		-			
BRENDA CORBIN	BOARD	MEMBER 1	0.	0.	0.
BRENTWOOD, IN		*			
KIM CRAFTON	BOARD	MEMBER 1	0.	0.	0.
NASHVILLE, TN		_			
ROSE COX	BOARD	MEMBER 1	0.	0.	0.
NASHVILLE, TN		±			
LAURIE ESKIND	BOARD	MEMBER 1	0.	0.	0.
NASHVILLE, TN		1			,
JANE FABIAN	BOARD	MEMBER 1	0.	0.	0.
NASHVILLE, TN		1			
TRACI GALLIVAN	BOARD	MEMBER 1	0.	0.	0.
NASHVILLE, TN		•			
PRISCILLA PARTRIDGE DE GARCIA	BOARD	MEMBER 1	0.	0.	0.
BRENTWOOD, TN		1			
DENNIS DEVINE	BOARD	MEMBER	0.	0.	0.
NASHVILLE, TN		1			
LAURA GERHARDI	BOARD	MEMBER	0.	0.	0.
BRENTWOOD, TN		ī			

2006 FEDERAL STATEMENTS PAGE 5

NASHVILLE CITY BALLET 58-1440788

STATEMENT 10 (CONTINUED) FORM 990, PART V-A LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE A AVERAGE I PER WEEK D	HOURS	COMPEN- SATION		CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
BILL HARALSON	BOARD	MEMBER 1	\$	0.	\$ 0.	\$ 0.
NASHVILLE, TN		-				
AMOS GOTT	BOARD	MEMBER		0.	0.	0.
NASHVILLE, TN		.				
ELIZABETH MCCOYD GREER	BOARD	MEMBER 1		0.	0.	0.
NASHVILLE, TN		1				
EDWINA HEFNER	BOARD	MEMBER		0.	0.	0.
BRENTWOOD, IN		1				
TAYLOR HENRY	BOARD	MEMBER		0.	0.	0.
BRENTWOOD, IN		1				
ASHLEY HENRY	BOARD	MEMBER		0.	0.	0.
NASHVILLE, TN		1				
PAULETTE JACKSON	BOARD	MEMBER		0.	0.	0.
BRENTWOOD, IN		1				•
SINCLAIR KELLY	BOARD	MEMBER		0.	0.	0.
NASHVILLE, TN		1				
AMY JOYNER	BOARD	MEMBER		0.	0.	0.
NASHVILLE, TN	. •	1			-	
ROBIN KEYSER	BOARD	MEMBER		0.	0.	0.
NASHVILLE, TN		1				
IRWIN KUHN	BOARD	MEMBER		0.	0.	0.
NASHVILLE, TN		1				
KATELEEN LOWRY	BOARD	MEMBER		0.	0.	0.
FRANKLIN, TN		1				

2006	FEDERAL STATEME	NTS		PAGE 6
	NASHVILLE CITY BALLE	<u>T</u>		58-1440788
STATEMENT 10 (CONTINUED) FORM 990, PART V-A LIST OF OFFICERS, DIRECTORS,	TRUSTEES, AND KEY EMPLOY	/EES		
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
EUGENE LOTOCHINSKI	BOARD MEMBER	\$ 0.	\$ 0.	\$ 0.
NASHVILLE, TN	1			
AMBER HERTIK	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	1			
TAMI JOHNSTON	SECRETARY 1	0.	0.	0.
NASHVILLE, TN	1			
JENNIFER PURYEAR	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	1			
REBECCA PAUL	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	<u> </u>			
LINDA REEVE	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	•			
ALLISON JONES	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	•			•
RONNIE SCOTT	BOARD MEMBER 1	0.	0.	0.
KINGSTON SPRINGS, TN	•			
DAN SLIPKOVICH	BOARD MEMBER		0.	0.
NASHVILLE, TN	-			
HEATHER SMALL	BOARD MEMBER		0.	0.
FORT LAUDERDALE, FL	1			
LUCY SMITH	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	1			
LEAH SOHR	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	±			

2006	FEDERAL STATEME	NTS		PAGE 7
2000				
	NASHVILLE CITY BALLE	·		58-1440788
STATEMENT 10 (CONTINUED) FORM 990, PART V-A LIST OF OFFICERS. DIRECTORS,	TRUSTEES, AND KEY EMPLOY	ŒES		
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
STACIE STANDIFER	BOARD MEMBER 1	\$ 0.	\$ 0.	\$ 0.
NASHVILLE, TN	•			
LAVONEIA STEELE	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	1			
KATE TALLMADGE	BOARD MEMBER	0.	0.	0.
NEW YORK, NY	1			
HEATHER THORNE	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	1			
MISSY WILLIAMS	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	•			·
PAT TODD	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	•			
ANDREA YANICKY	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	-			
JOYCE VISE	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	-			
CATHY MCLURE	BOARD MEMBER 1	0.	0.	0.
NASHVILLE, TN			•	. '
PATSY WEIGEL	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	-			
DONNA DELSENI	SCHOOL DIR.	35,394.	2,129.	0.
NASHVILLE, TN	, 40			
KELLY JOHNSON	DIR. OF DEV.		1,183.	0.
NASHVILLE, TN	40			

2006 FEDERAL STATEMENTS

PAGE 8

NASHVILLE CITY BALLET

58-1440788

STATEMENT 10 (CONTINUED)
FORM 990, PART V-A
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
SHARYN WOOD	DIR EDUC & OUTR \$	42,071.	\$ 2,839.	\$ 0.
NASHVILLE, TN	40			
RANDALL VOIT	DIR. OF MKTG.	37,923.	2,129.	0.
NASHVILLE, TN	40			
LISE MORROW	BCARD MEMBER	0.	0.	0.
NASHVILLE, TN	1			
KELTIE HAYS PEAY	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	1			
DICK RHODES	BOARD MEMBER	0.	0.	0.
BRENTWOOD, TN	1			
ANNE SHEPHERD	BOARD MEMBER	0.	0.	0.
BRENTWOOD, TN	1			
LEE ANN WILLS	DIR. OF DEV.	23,184.	947.	0.
NASHVILLE, TN	40			•
	TOTAL §	329,844.	\$ 14,432.	\$ 0.

STATEMENT 11 SCHEDULE A, PART III, LINE 3A QUALIFICATIONS OF RECIPIENTS RECEIVING GRANTS OR LOANS

FOR THE 2006-2007 SEASON, THE SCHOOL OF NASHVILLE BALLET GRANTED A TOTAL OF \$6,310 IN MERIT-BASED SCHOLARSHIPS. THESE SCHOLARSHIPS ARE PROVIDED TO STUDENTS WHO DEMONSTRATE EXCEPTIONAL TALENT FOR AND DEDICATION TO PURSUING A BALLET CAREER. THERE WERE NO FINANCIAL AIDE BASED SCHOLARSHIPS GIVEN FOR THE 2006-2007 SCHOOL YEAR.

2006 FEDERAL STATEMENTS

NASHVILLE CITY BALLET

STATEMENT 12
SCHEDULE A, PART IV-A, LINE 22
OTHER INCOME

DESCRIPTION
(A) 2005 (B) 2004 (C) 2003 (D) 2002 (E) TOTAL
MISCELLANEOUS

TOTAL

\$ 20,880. \$ 728. \$ 47,850. \$ 51,145. \$ 120,603. \$ 120,603.

2006

FEDERAL SUPPLEMENTAL INFORMATION

PAGE 1

NASHVILLE CITY BALLET

58-1440788

990, PART II, LINE 42

PROPERTY & EQUIPMENT ARE RECORDED AT COST. DONATED ASSETS ARE CAPITALIZED AT FAIR MARKET VALUE IN THE PERIOD RECEIVED. THE BALLET CAPITALIZES ALL PROPERTY AND EQUIPMENT OVER \$500. DEPRECIATION OF PROPERTY AND EQUIPMENT IS PROVIDED OVER THE ESTIMATED USEFUL LIVES OF THE RESPECTIVE ASSETS ON A STRAIGHT-LINE BASIS RANGING FROM 5-40 YEARS.