### **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)

OMB No 1545 0047

2003

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements.

									2 / 2 2	1		<del></del>	
Α	For t	he 2003 calen	dar year, o	r tax year beginning 7/0	01	, 2003, a	and en	ding	6/30			, 2004	
В	Check	ıf applicable	Planes							D Empl	oyer Ide	ntification Number	
	Ad	ddress change		FANNIE BATTLE DAY	HOME	FOR CHILDRE	EN, ]	INC		62	-047	6290	
	∏ <sub>Ni</sub>	ame change	or print or type.	911 SHELBY AVENUE					Ī	E Telep	hone nu	mber	
		itial return	See specific	NASHVILLE, TN 3720	06					61	5-22	8-6745	
	$\vdash$	nal return	instruc- tions,						<u> </u>		unting od:		Accrual
	$\vdash$	mended return	uons.						1		ou: Other (sp		) Accidai
	$\vdash$			F01( )(D)	1.40.47(-)	./4\	Ī.,					· · · · · · · · · · · · · · · · · · ·	
	Application pending  Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A  H (a) Is this a group return												লে
				990 or 990-EZ).				٠.	• •				X No
G	Web	site: ► WWW.	FANNIE	BATTLE.ORG					'Yes,' enter n				_
	0	-141					╗		Are all affiliate			Yes	∐ No
J		nization type ck only one)	<b>&gt;</b>	X 501(c) 3 ◀ (insert	no.) [	4947(a)(1) or	527		If 'No,' attach			•	
<u>—</u>			f the organ	<del></del>			— Н		s this a separ				_
-	Check here   if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization organization										a group	ruling? Yes	X No
	recei	ived a Form 99	90 Packag	e in the mail, it should file a i	return wit	thout financial dat	a. 1		Group Exe	mption	Numbe	er 🟲	
	30III	e states requi	re a compi	ete return.			M					ation is not requir	
				8b, 9b, and 10b to line 12						<u>`</u>	Form 990	), 990-EZ, or 990-F	PF)
Pa	rt I	Revenue	e, Exper	ses, and Changes in N	<u>let Ass</u>	ets or Fund B	Baland	ces (	See Instru	ctions)	<del>,,, ,, ,,,,,</del>		
	1	Contributions	i, gifts, gra	ents, and similar amounts rec	eıved.								
	a	Direct public	support				1 a		127,	280.			
	b	Indirect publi	c support				1 b		34,	<u>370.</u>			
	l c	Government		ons (grants)		į	1 c		32,	391.	•		
	d	Total (add lines 1a through 1c) (c	ash \$	189,743. noncash	\$	4,298	.)			.	1d	194	,041.
	2	<del>-</del>										254	,695.
	3 Membership dues and assessments										3		400.
	4	Interest on sa	avings and	temporary cash investments	5						4		
;	5	Dividends an	d interest	from securities							5	5	,888.
	6a	Gross rents					6a					· ·	
	ь	Less. rental	expenses				6b						
!	c	Net rental ind	come or (lo	oss) (subtract line 6b from lin	e 6a)						6c		
, - D	7				ŕ					)	7		
Ë				•	0	A) Securities			(B) Other	(			
REVERUE	<sub> </sub> 8a	than inventor		es of assets other		52,528.	8a	-	· · · · · · · · · · · · · · · · · · ·				
J ñ	Ь		-	is and sales expenses		51,974.	8Ь						
1		Gain or (loss) (a		•		554.	8c						
<b>7</b>	1			bine line 8c, columns (A) and	t (B))						8d		554.
				ivities (attach schedule). If ar		nt is from gaming.	. check	here		ר ו			
9		Gross revenu				of contributions	,			_			
ก	_	reported on I					9a		40	490.			
	ь	•		other than fundraising expens	293		9 b			933.			
	l .			om special events (subtract li		m line 9a)		<u> </u>	TATEME		9c	30	,557.
	1		-	y, less returns and allowance			rd ()						, , , , , , ,
	l .	Less cost of				RECE	X	<b>)</b>					
	1		-	les of inventory (attach schedule) (su	htract line	10h from line 10a)	See All L	W	8		10c		
	11			art VII, line 103)	ibliact iiiie	14/1	า กิลลล	ബ	Ŏ	,	11		
	12		-	s 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c	100 00	is mai is	1 200	ן עו	U)		12	196	,135.
	13			n line 44, column (B)).	, ruc, am	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	•				13		, 309.
E	14			ral (from line 44, column (6))		UGDE	IV, U	1	——————————————————————————————————————		14		, 309. , 324.
EXPENSES	15				, :	Comment of the Comment	• •- •		<del></del> '		15		, <u>324.</u> , 402.
Ñ	16	2,7									16	4.0	, -02.
Ę	'			•		• •					17	100	,035.
	17			nes 16 and 44, column (A)).	June 10	·		•					
. A	18			he year (subtract line 17 from			•			,	18		<u>, 900.</u>
N E E	19			ances at beginning of year (fro				ים כ	יידוגעינויים אַ ייף	ا د بست	19	1,001	
֓֞֞֝֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓				ssets or fund balances (attac			5E	re. 9	TATEME	Y1 .5	20		942.
PA	21 ^ Fo			ances at end of year (combine			-				21	1,076 Form 99	
DΑ	м го	i raperwork N	euuction .	Act Notice, see the separate i	いらいないてはく	/II5.		I EEAU	107L 10/03/0	1.5		rorm 99	u (2003)

Part II 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.

Ĺ	Do 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	Grants and allocations (att sch)					
	(cash \$					
23	non-cash \$) Specific assistance to individuals (att sch)	22				
24	Benefits paid to or for members (att sch)	24				
25	Compensation of officers, directors, etc	25	47,348.	38,284.	5,063.	4,001.
26	Other salaries and wages	26	239,232.	193,437.	25,582.	20,213.
27	Pension plan contributions	_27	5,362.	4,375.	641.	346.
28	Other employee benefits	28	13,540.	11,047.	1,619.	874.
29	Payroll taxes	29	20,553.	16,357.	2,344.	1,852.
30	Professional fundraising fees .	30			·=··	
31	Accounting fees	31	8,165.		8,165.	
32	Legal fees	32				
33	Supplies	33	7,219.	1,556.	5,663.	
34	Telephone	34				·
35	Postage and shipping.	35	1,988.		1,988.	
36	Occupancy .	36	16 222	12 012	2 110	
37	Equipment rental and maintenance	37	16,332.	13,213.	3,119.	
38	Printing and publications	38	2,741.		2,741.	
39	Travel	39				<del> </del>
40	Conferences, conventions, and meetings .	40				
41	Interest	41	27 272	27 272		
42	Depreciation, depletion, etc (attach schedule).	42	27,373.	27,373.		
43	Other expenses not covered above (itemize) SEE STATEMENT 4	42-	00 102	75 667	22 200	1 116
		43 a	99,182.	75,667.	22,399.	1,116.
	<u></u>	43 b				
		43 d				
	'	43 u			· · · · · · · · · · · · · · · · · · ·	
44	Total functional expenses (add lines 22 - 43)	436				
	Total functional expenses (add lines 22 - 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	489,035.	381,309.	79,324.	28,402.
Join	t Costs. Check 🕨 If you are following:	SOP 9	8-2.			
	any joint costs from a combined educationa			citation reported in (B) P	rogram services? .	► Yes X No
	es,' enter (i) the aggregate amount of these				nount allocated to Progr	ram services
. \$		ocated	to Management and ger	neral \$	; and (iv) the	e amount allocated
	indraising \$	A				<del></del>
	Statement of Program Serv			NAME OF THE OWNER OWNER OF THE OWNER		B A : E
	is the organization's primary exempt purpo				to the number of	Program Service Expenses (Required for 501(c)(3) and
clien	rganizations must describe their exempt puits served, publications issued, etc. Discussons and 4947(a)(1) nonexempt charitable tr	achiev	ements that are not mea	surable. (Section 501(c)	(3) & (4) organ-	(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
	MAINTENANCE AND OPERATION					optional for others)
č	CHILDREN.		A DAI CAKE AND	MOKSEKI LOK 82	2_10_100	
	CITTIDIZEN.				· <del>-</del>	
					· · · ·	381,309.
Ŀ			(Grains and	i allocations \$	<del></del>	301,309.
•	'				··	
				allocations \$	··	
			(Grants and	i allocations 9	<del></del>	
•	'					
c			(Grants and	allocations \$	<del></del>	<del></del>
					·	
					·	
				allocations \$		
P	Other program services .			allocations \$		
	Total of Program Service Expenses (shou	ıld egu			· · · · · · · · · · · · · · · · · · ·	381,309.

Part IV Balance Sheets (See Instructions)

Note	: Wh	ere required, attached schedules and amounts within umn should be for end-of-year amounts only.	the des	cription	(A) Beginning of year		<b>(B)</b> End of year
	45	Cash - non-interest-bearing			91,803.	45	70,219.
		Savings and temporary cash investments				46	
	<b>∆</b> 7 a	Accounts receivable	47 a	82,981.			
	b Less, allowance for doubtful accounts		47 b	02,301.	18,054.	47 c	82,981.
		Pledges receivable .	48 a				
		Less, allowance for doubtful accounts	48 b			48 c	<del></del>
	49	Grants receivable	<del></del>	49			
A S S E T S	50	Receivables from officers, directors, trustees, and k employees (attach schedule)			50		
S   E	51 a	Other notes & loans receivable (attach sch)	, ,				
s	b	Less, allowance for doubtful accounts			51 c		
	52	Inventories for sale or use				52	
ł	53	Prepaid expenses and deferred charges .			3,944.	53	4,733.
	54	Investments – securities (attach schedule) SEE	ST 5	► Cost X FMV	498,022.	54	561,342.
ļ	55 a	Investments - land, buildings, & equipment: basis.	55 a				
	b	Less. accumulated depreciation (attach schedule)	55 b			55 c	
ŀ	56	Investments - other (attach schedule) .	<del></del>			56	
		Land, buildings, and equipment: basis	57 a	614,830.			
	b	Less. accumulated depreciation (attach schedule) STATEMENT 6	57 b	301,502.	333,373.	57 c	313,328.
1	58	Other assets (describe > SEE STATEMENT 7	<u></u>	)	75,000.	58	75,000.
	59	Total assets (add lines 45 through 58) (must equal I	ine 74)		1,020,196.	59	1,107,603.
	60	Accounts payable and accrued expenses			18,269.	60	30,634.
ļ	61	Grants payable		. [		61	
À	62	Deferred revenue		. [		62	
A B I L	63	Loans from officers, directors, trustees, and key employees (attack	n schedule)	·		63	
Ì	64 a	Tax-exempt bond liabilities (attach schedule)				64a	
- 1	b	Mortgages and other notes payable (attach schedule)		ļ		64 b	
F S		Other liabilities (describe >		)		65	
$\rightarrow$		Total liabilities (add lines 60 through 65)			18,269.	66	30,634.
N		· —	ind comp	olete lines 67			
F		through 69 and lines 73 and 74.				<u> </u>	057 204
A S	67	Unrestricted	•	, <u>,</u>	923,077.		957,324.
ANNELS	68	Temporarily restricted	•	-	78,850.	68	119,645.
		Permanently restricted		· <b>-</b>		69	
R	Jrgan	izations that do not follow SFAS 117, check here ► 70 through 74.	∟a	nd complete lines			
DZC	70	Capital stock, trust principal, or current funds		70			
1	71	Paid-in or capital surplus, or land, building, and equ		71			
Ř Ļ	72	Retained earnings, endowment, accumulated incom	er funds.		72		
BALANCES	73	Total net assets or fund balances (add lines 67 thro 72, column (A) must equal line 19, column (B) mus	ugh 69 d t equal l	or lines 70 through ne 21) .	1,001,927.	73	1,076,969.
3	74	Total liabilities and net assets/fund balances (add li			1,020,196.	74	1,107,603.

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.

BAA

Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations?... 75 XNo ► Yes If 'Yes,' attach schedule - see instructions BAA Form 990 (2003)

BAA

N/A

Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here

and enter the amount of tax-exempt interest received or accrued during the tax year

		Unrelate	d business income	Excluded by se	ection 512, 513, or 514	(E)
<b>Note:</b> Enter otherwise ii	r gross amounts unless ndicated.	(A) Business code	<b>(B)</b> Amount	(C) Exclusion code	<b>(D)</b> Amount	Related or exempt function income
	gram service revenue. Y HOME FEES					254,695.
b						
c						
e						
f Med	dicare/Medicaid payments					
-	& contracts from government agencies					
	mbership dues and assessments					400.
	est on savings & temporary cash invmnts					
	dends & interest from securities			14	5,888.	,
	rental income or (loss) from real estate.			<u> </u>		
	t-financed property					
	debt-financed property					<u> </u>
	rental income or (loss) from pers prop				-,	
	er investment income					
100 Gau	n or (loss) from sales of assets er than inventory			18	554.	
	income or (loss) from special events			1	30,557.	
	s profit or (loss) from sales of inventory	_			,	
	er revenue: a					
d						
е						
	otal (add columns (B), (D), and (E))	, , ,			36,999.	255,095.
	al (add line 104, columns (B), (D), a		•		▶	292,094.
	105 plus line 1d, Part I, should equa					
Part VIII	Relationship of Activities t	<u>o the Acco</u>	<u>mplishment of E</u>	xempt Purpo:	ses (See instructions.)	
Line No. ▼	Explain how each activity for which of the organization's exempt purpo	n income is re oses (other th	ported in column (E) o an by providing funds	of Part VII contrib for such purposes	uted importantly to the s).	accomplishment
93 (A)	FEES RECEIVED FOR THE	OPERATION	ON OF A DAY CA	RE AND NURS	SERY FOR 85 TO	100 CHILDREN.
94	DUES RECEIVED FROM ME	MBERS OF	THE ORGANIZAT	ION, WHICH	IS USED FOR TH	E MAINTENANCE
	AND ORGANIZATION OF T	HE DAY HO	OME.			
						_
Part IX	Information Regarding Tax	able Subs	idiaries and Disre	egarded Entiti	es (See instructions.)	<u> </u>
	(A)	(B)	(	C)	(D)	(E)
Name,	address, and EIN of corporation,	Percentage	e of Nature o	f activities	Total	End-of-year
	tnership, or disregarded entity	ownership in	terest		ıncome	assets
N/A			8			
			%			
	· · · · · · · · · · · · · · · · · · ·		8			
D-4 V	late De l'art		8	and Dank	C	<u> </u>
	Information Regarding Tra					
	e organization, during the year, receive any fui					Yes X No
	ne organization, during the year, pag	•	•	n a personal bene	efit contract?	Yes X No
Note: //	f 'Yes' to <b>(b),</b> file Form 8870 <b>and</b> Fo		<del></del>			
DI	Under penalties of perjury, I declare that I hat true, correct and complete Declaration of pr	ve examined this eparer (other than	return, including accompanyi n officer) is based on all infor	ng schedules and state mation of which prepar	ements, and to the best of my er has any knowledge	knowledge and belief, it is
Please	Dana at onlinu				Date / X4/	υ <b>υ</b>
			tive Dir	ector	Date	
				Date	Check if	reparer's SSN or PTIN (see General Instruction W)

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

# Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information — (See separate instructions.)

2003

Employer identification number

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.

62-0476290 FANNIE BATTLE DAY HOME FOR CHILDREN, Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See instructions. List each one. If there are none, enter 'None.') (a) Name and address of each (d) Contributions (b) Title and average (c) Compensation (e) Expense hours per week devoted to position to employee benefit plans and deferred employee paid more than \$50,000 account and other allowances compensation NONE \_\_\_\_\_\_ Total number of other employees paid over \$50,000 Part II 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 NONE Total number of others receiving over \$50,000 for professional services

Sche	dule	ule A (Form 990 or 990-EZ) 2003 FANNIE BATTLE DAY HOME FOR C	HILDREN,	INC 6	52-047629	0	F	age 2
Par	t III	Statements About Activities (See Instructions.)					Yes	No
1	Dur to ii	Ouring the year, has the organization attempted to influence national, state, or local local influence public opinion on a legislative matter or referendum? If 'Yes,' enter the to	legislation, incl otal expenses	luding any paid	/ attempt			
		r incurred in connection with the lobbying activities   \$ N/A	<u> </u>					3.5
	•	Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)				1		X
	org	Organizations that made an election under section 501(h) by filing Form 5768 must co organizations checking 'Yes,' must complete Part VI-B AND attach a statement giving obbying activities.	omplete Part V g a detailed de	/I-A. Othe escription	r of the			
2	sub tax	During the year, has the organization, either directly or indirectly, engaged in any of toubstantial contributors, trustees, directors, officers, creators, key employees, or mere axable organization with which any such person is affiliated as an officer, director, trueneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explain.	mbers of their rustee, majority	families, y owner, o	or with any or principal			
a	Sal	Sale, exchange, or leasing of property?			•	2a		X
t	Ler	ending of money or other extension of credit?				2b		Х
Ċ	: Fur	urnishing of goods, services, or facilities?	ORM 990,	PART I	, 1	2с		Х
c	<b>i</b> Pay	Payment of compensation (or payment or reimbursement of expenses if more than \$				2d	<u>X</u>	
•	Tra	ransfer of any part of its income or assets? .				2e		х
3 a	Do exc	Do you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach explanation of how you determine that recipients qualify to receive payments.)	h an			3a		Х
t		Do you have a section 403(b) annuity plan for your employees?	•••			3ь		Х
	Dıd	Old you maintain any separate account for participating donors where donors have the use or distribution of funds? .	ne right to prov	vide advic	е	4		Х
Par	t IV	IV Reason for Non-Private Foundation Status (See instructions.)		•				
The	orga	ganization is not a private foundation because it is. (Please check only ONE applicat	ble box.)		. <u> </u>		<u> </u>	
5		A church, convention of churches, or association of churches. Section 170(b)(1)(	-					
6	-	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)	. 707					
7		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)	).					
8		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)						
9		A medical research organization operated in conjunction with a hospital. Section	170(b)(1)(A)(ıı	ıı). Enter t	he hospital's ı	name,	city,	
10		An organization operated for the benefit of a college or university owned or opera (Also complete the <b>Support Schedule</b> in Part IV-A.)		ernmental	unit. Section	170(b)	(1)(A)	(iv)
11 a	X	X An organization that normally receives a substantial part of its support from a go Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)	vernmental un	ut or from	the general p	ublic.		
111	· [	A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedul	le in Part IV-A.	.)				
12		An organization that normally receives: (1) more than 33-1/3% of its support from activities related to its charitable, etc, functions — subject to certain exception gross investment income and unrelated business taxable income (less section granization after June 30, 1975. See section 509(a)(2). (Also complete the Support of the Supp	ons, and <b>(2) n</b> oion 511 tax) fro	o more th om busine	a <b>n 33-1/3%</b> of esses acquired	its sur	port	ots
13		An organization that is not controlled by any disqualified persons (other than four described in. (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if t section 509(a)(3).)	ndation manag they meet the t	gers) and test of se	supports orga ction 509(a)(2)	nizatio . (See	ns	
		Provide the following information about the supported	organizations.	(See inst	ructions.)			
		(a) Name(s) of supported organization(s)				<b>(b)</b> Lir	ne nur n abo	
14	Г	An organization organized and operated to test for public safety. Section 509(a)(	(4). (See instru	ictions.)				
_								

FANNIE BATTLE DAY HOME FOR CHILDREN, 62-0476290 Schedule A (Form 990 or 990-EZ) 2003 Page 3 Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. (e) Total Calendar year (or fiscal year 2002 beginning in) Gifts, grants, and contributions received (Do not include unusual grants. See line 28.) 15 206,904. 236,943 1,010,095. 203,046. 363,202 3,200. Membership fees received 500 950 600. 1,150. 16 Gross receipts from admissions. merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's 258,866. 267,781 236,105 189,548 952,300. charitable, etc, purpose 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 organ-7,350 172,704. 5,891 56,380 103,083 ization after June 30, 1975 Net income from unrelated business activities not included in line 18 Tax revenues levied for the 20 organization's benefit and either paid to it or expended on its behalf 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 Other income. Attach a schedule. Do not include gain or (loss) from sale of čapital assets 530,724 468,303 482,985 656,287 2,138,299. Total of lines 15 through 22 209,437. 215,204 420,182. 341,176. 1,185,999 Line 23 minus line 17 6,563. 5,307. 4,830. Enter 1% of line 23 4,683. 23,720. a Enter 2% of amount in column (e), line 24 26 a Organizations described on lines 10 or 11: b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your • 42,051. return. Enter the total of all these excess amounts 26 b 26 c 1,185,999. c Total support for section 509(a)(1) test: Enter line 24, column (e). 172,704. d Add. Amounts from column (e) for lines. 18 19 214,755. 42,051. 26 d 26 b 971,244. 26 e e Public support (line 26c minus line 26d total) 81.89 % f Public support percentage (line 26e (numerator) divided by line 26c (denominator)). 26 f Organizations described on line 12: N/A a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year. \_\_\_\_ (2000) (1999)(2002)(2001)

bFor any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year.

(2002) (2001)		(2000) (	1999)		
c Add: Amounts from column (e) for lines.	15	16			
17	20	21		27 c	
d Add. Line 27a total		and line 27b total		27 d	
e Public support (line 27c total minus line 2	7d total)		<b></b>	27 e	
f Total support for section 509(a)(2) test: E	nter amou	nt from line 23, column (e) 27f			
g Public support percentage (line 27e (num	erator) div	ided by line 27f (denominator)).	<u> </u>	27 g	ક
h Investment income percentage (line 18, c	olumn (e)	(numerator) divided by line 27f (denominator))	•	27 h	%

Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

a(	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, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
1	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)			
2	Does the organization maintain the following:	_		
i	a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		<u> </u>
١	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 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	}	ļ
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)			
		-		
		-		
3	Does the organization discriminate by race in any way with respect to			
i	a Students' rights or privileges?	33a		L
	<b>b</b> Admissions policies?	33 b		L
,	c Employment of faculty or administrative staff?	33 c		_
,	d Scholarships or other financial assistance?	33 d		_
,	e Educational policies?	33 e	_	ļ 
	f Use of facilities?	33 f		
	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 statement.)			
		-		
		-		
4	a Does the organization receive any financial aid or assistance from a governmental agency?	34a		
	<b>b</b> Has the organization's right to such aid ever been revoked or suspended?	34 b		
	If you answered 'Yes' to either 34a or b, please explain using an attached statement.			
5	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		l

Part VI-A Lobbying Expenditures by Electing Public Charities (See Instructions.)

۰	_~~_	,y =-^	Policiti	4.03 2		, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(To be	complete	d ONLY I	ov an elí	gible organi	zation that filed	Form 5768)

		(10 pe combiet	ed ONL1 by an eligible of	organization that i	meu Form 57	<del></del>					N/A
Chec	k ► a	if the organiz	zation belongs to an affil	liated group. C	Check ► b	ıf yı	ou check			contr	ol' provisions apply.
			imits on Lobbying 'expenditures' means a	•				Affiliatei tota	d grou	р	(b) To be completed for ALL electing organizations
36	Total lob	bying expenditu	ures to influence public o	opinion (grassroot	s lobbying)	•	36				
37	Total lob	bying expenditi	ures to influence a legisl	ative body (direct	lobbying)		37				
38	Total lob	bying expenditi	ures (add lines 36 and 3	7)			38				
39	Other ex	empt purpose e	expenditures				39				
40	Total ex	empt purpose e	xpenditures (add lines 3	8 and 39) .			40				
41	Lobbying	g nontaxable am	nount. Enter the amount	from the followin	g table –						
	If the amount on line 40 is — The lobbying nontaxable amount is —										
	Not over \$500,000 20% of the amount on line 40										
	Over \$500,	000 but not over \$1,	000,000 \$100,0	000 plus 15% of the ex	xcess over \$500,0	000					
	Over \$1,00	0,000 but not over \$	\$1,500,000 \$175,0	000 plus 10% of the ex	xcess over \$1,00	0,000	- 41				
	Over \$1,50	0,000 but not over \$	\$17,000,000 \$225,0	000 plus 5% of the exc	cess over \$1,500,	000					
	Over \$1	7,000,000	\$1,0	00,000							
42			amount (enter 25% of lin				42				
43			ie 36 Enter -0- if line 42				43				
44			e 38. Enter -0- if line 41				44				
	Caution	: If there is an a	mount on either line 43	or line 44, you m	ust file Form	<u>4720.</u>					
		(Some organ	nizations that made a se	Averaging Per ection 501(h) elect ee the instructions	tion do not ha	ave to c	complete		e colu	mns	below.
				Lobbying E	xpenditures	During	4 -Year	Averaging P	eriod		
	Calenda (or fisca beginnir	l ýear	(a) 2003	<b>(b)</b> 2002		<b>(c)</b> 2001			d <b>)</b> 00		<b>(e)</b> Total
45	Lobbying amount	g nontaxable									
46	Lobbying of	ceiling amount line 45(e))									
47	Total lob expendit						·				
48	Grassro taxable										
49		ceiling amount line 48(e))									
	expendi										
Par	t VI-B	Lobbying A (For reporting o	ctivity by Nonelect	ting Public Ch at did not complete	n <b>arities</b> e Part VI-A)	(See in	structions	i)			N/A
Durii	ng the yea	ar, did the orgai uence public op	nization attempt to influe pinion on a legislative ma	ence national, stat atter or referendu	te or local led m, through th	gislation ne use o	n, includir of:	ng any	Yes	No	Amount

empt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines <b>c</b> through <b>h</b> .)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h.)			
If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activitie	ς		

# Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did the	e reporting organization of Code (other than section	directly or inc	directly engage in any of the following	g with any other organization described ig to political organizations?	ın sectior	501(	2)
			a noncharitable exempt organization		1	Yes	No
	ash	garnzanorri		[	51 a (i)		X
• •	ther assets			Ī	a (ii)		X
	transactions.			Ī			
(i) Sa	ales or exchanges of asse	ets with a no	oncharitable exempt organization		b (i)		Х
(ii)Pı	urchases of assets from a	a noncharital	ble exempt organization .		b (ii)		X
(iii)Re	ental of facilities, equipme	ent, or other	assets	ĺ	b (iii)		X
(iv)Re	eimbursement arrangeme	ents.			b (iv)		X
( <b>v)</b> Lo	oans or loan guarantees			. [	b (v)		X
(vi)Pe	erformance of services or	membershi	p or fundraising solicitations	. [	b (vi)		X
c Sharır	ng of facilities, equipment	, mailing list	s, other assets, or paid employees	. [	С		X
<b>d</b> If the the go	answer to any of the aboo oods, other assets, or ser ansaction or sharing arra	ve is 'Yes,' o vices given l naement, sh	complete the following schedule. Coluby the reporting organization. If the olow in column (d) the value of the go	umn (b) should always show the fair mark rganization received less than fair mark ods, other assets, or services received.	rket value et value i	of n	
(a)	(b)		(c)	(d)			
Line no.	Amount involved	Name of	noncharitable exempt organization	Description of transfers, transactions, and s	haring arrar	igement	S
N/A	·						
	· · · · · · · · · · · · · · · · · · ·				-		
	·						
			<del></del>				—
	-				<del></del>		
		<u> </u>					
			· · · · · · · · · · · · · · · · · · ·				
		<u></u>					
			lated with, or related to, one or more her than section 501(c)(3)) or in secti	tax-exempt organizations on 527?	► ∐ Ye	s X	No
<b>b</b> If 'Yes	s,' complete the following	schedule.					
	(a) Name of organization		<b>(b)</b> Type of organization	<b>(c)</b> Description of relations	shin		
	Name of organization		Type of organization	Description of relation			
N/A		-					
	<del></del>						
	· · · · · · · · · · · · · · · · · · ·						
		<u></u>					
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				· · · · · · · · · · · · · · · · · · ·			

2003 FEDERAL EXEMPT ORGAN	IZATION TAX	SUMMARY	PAGE 1							
FANNIE BATTLE DAY HOME FOR CHILDREN, INC										
REVENUE	2003	2002	DIFF							
CONTRIBUTIONS, GIFTS, AND GRANTS PROGRAM SERVICE REVENUE MEMBERSHIP DUES AND ASSESSMENTS DIVIDENDS & INTEREST FROM SECURITIES NET GAIN (LOSS) - NONINV. ASSETS/DISP NET INCOME (LOSS) - SPECIAL EVENTS	194,041 254,695 400 5,888 554 30,557	203,046 216,048 500 5,891 0 35,437	-9,005 38,647 -100 -3 554 -4,880							
TOTAL REVENUE	486,135	460,922	25,213							
EXPENSES PROGRAM SERVICES. MANAGEMENT AND GENERAL. FUNDRAISING	381,309 79,324 28,402	350,812 72,077 48,258	30,497 7,247 -19,856							
TOTAL EXPENSES	489,035	471,147	17,888							
NET ASSETS OR FUND BALANCES EXCESS OR (DEFICIT) FOR THE YEAR NET ASSETS/FUND BAL. AT BEG. OF YEAR OTHER CHANGES IN NET ASSETS/FUND BAL NET ASSETS/FUND BAL. AT END OF YEAR.	-2,900 1,001,927 77,942 1,076,969	-10,225 1,008,191 3,961 1,001,927	7,325 -6,264 73,981 75,042							

2003

#### FEDERAL STATEMENTS

PAGE 1

FANNIE BATTLE DAY HOME FOR CHILDREN, INC

62-0476290

STATEMENT 1 FORM 990, PART I, LINE 8 NET GAIN (LOSS) FROM NONINVENTORY SALES

PUBLICLY TRADED SECURITIES

GROSS SALES PRICE: COST OR OTHER BASIS: 52,528.

51,974.

TOTAL GAIN (LOSS) PUBLICLY TRADED SECURITIES \$ 554.

TOTAL NET GAIN (LOSS) FROM NONINVENTORY SALES \$ 554.

STATEMENT 2 FORM 990, PART I, LINE 9 NET INCOME (LOSS) FROM SPECIAL EVENTS

SPECIAL EVENTS		GROSS RECEIPTS	LESS CONTRI- BUTIONS	GROSS REVENUE	LESS DIRECT EXPENSES	NET INCOME (LOSS)
CAROLING AUCTION	TOTAL	29,909. 10,581. \$ 40,490.	0. 0. \$ 0.	29,909. 10,581. \$ 40,490.	6,648. 3,285. \$ 9,933.	23,261. 7,296. \$ 30,557.

STATEMENT 3 FORM 990, PART I, LINE 20 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

UNREALIZED GAIN ON INVESTMENTS

TOTAL \$ 77,942.

STATEMENT 4 FORM 990, PART II, LINE 43 OTHER EXPENSES

	(A)	(B) PROGRAM	(C) MANAGEMENT	(D)
	TOTAL	_SERVICES_	& GENERAL	<u>FUNDRAISING</u>
AUTO EXPENSE CHILDREN'S ENTERTAINMENT CLASSROOM EXPENSES DUES & SUBSCRIPTIONS GROCERIES INSURANCE	1,923. 9,627. 2,767. 3,280. 28,327. 12,110.	1,923. 9,627. 2,767. 3,280. 28,327. 9,797.	2,313.	
LOSS FROM MISAPPROPRIATION MISCELLANEOUS SECURITY TEACHER AND FAMILY EDUCATION TUITION REIMBURSEMENT UTILITIES	16,154. 2,238. 1,861. 1,174. 584. 19,137.	799. 1,861. 1,174. 16,112.	16,154. 323. 584. 3,025.	1,116.
	TOTAL \$ 99,182.	\$ 75,667.	\$ 22,399.	\$ 1,116.



#### FRASIER, DEAN & HOWARD, PLLC

CERTIFIED PUBLIC ACCOUNTANTS

3310 WEST END AVENUE, SUITE 550 NASHVILLE, TENNESSEE 37203 PHONE 615-383-6592, FAX 615-383-7094

FANNIE BATTLE DAY HOME FOR CHILDREN, INC 911 SHELBY AVENUE NASHVILLE, TN 37206

Dear Tracy:

Enclosed is your 2003 Federal Exempt Organization Income Tax Return. The original should be signed at the bottom of page six. No tax is payable with the filing of this return. Mail your Federal return on or before February 15, 2005 to:

# INTERNAL REVENUE SERVICE OGDEN, UT 84201-0027

Your copies of all the returns are enclosed for your files. We suggest that you retain these copies indefinitely.

For your convenience, we are enclosing, in a separate folder, a copy of your Form 990 that should be used for the public inspection requirements.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions.

Sincerely,

Frasier, Dean & Howard, PLLC

Ste Ry

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2003 FEDER	AL ST	Α	<b>TEMENTS</b>				PAGE 2	
FANNIE BATTLE	FANNIE BATTLE DAY HOME FOR CHILDREN, INC							
STATEMENT 5 FORM 990, PART IV, LINE 54 INVESTMENTS - SECURITIES								
OTHER SECURITIES					ALUATION METHOD		AMOUNT	
MUTUAL FUNDS				MARK	ET VALUE	\$	561,342.	
					TOTAL	\$	561,342.	
	TOT	AL	INVESTMENTS	5 - 5	SECURITIES	\$	561,342.	
STATEMENT 6 FORM 990, PART IV, LINE 57 LAND, BUILDINGS, AND EQUIPMENT  CATEGORY  MACHINERY AND EQUIPMENT BUILDINGS LAND	TOTAL	\$	BASIS 126,532. 434,039. 54,259. 614,830.	<u> </u>	ACCUM. DEPREC. 85,890. 215,612. 301,502.		BOOK VALUE 40,642. 218,427. 54,259. 313,328.	
STATEMENT 7 FORM 990, PART IV, LINE 58 OTHER ASSETS FUTURE INTEREST IN LIFE INCOME GIFT			·		TOTAL	\$ \$	75,000. 75,000.	
STATEMENT 8 FORM 990, PART IV-A, LINE B(4) OTHER AMOUNTS SPECIAL EVENT EXPENSES					 TOTAL	\$ \$	9,933. 9,933.	
STATEMENT 9 FORM 990, PART IV-B, LINE B(4) OTHER AMOUNTS  SPECIAL EVENTS EXPENSES					тотат.	\$	9, 933. 9 933	

 TOTAL
 \$ 9,933.

 \$ 9,933.

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## FEDERAL SUPPLEMENTAL INFORMATION

PAGE 1

FANNIE BATTLE DAY HOME FOR CHILDREN, INC

62-0476290

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DEPRECIATION EXPENSE IS CALCULATED ON THE STRAIGHT-LINE METHOD OVER THE ESTIMATED USEFUL LIVES OF THE RESPECTIVE ASSETS, WHICH RANGE FROM 40 YEARS FOR BUILDINGS TO FIVE YEARS FOR EQUIPMENT.

2003

## **FEDERAL STATEMENTS**

PAGE 3

FANNIE BATTLE DAY HOME FOR CHILDREN, INC

62-0476290

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

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED		CONTRI- BUTION TO EBP & DC	ACCOUNT/
MELINDA WAYLAND	BOARD MEMBER	\$ 0	. \$ 0.	\$ 0.
NASHVILLE, TN	1			
TIM AYERS	BOARD MEMBER	C	0.	0.
NASHVILLE, TN	1			
SARA LONGHINI	EXECUTIVE DIREC	47,348	1,420.	0.
NASHVILLE, TN	40			
JAMES A. DICKENS	BOARD MEMBER	C	0.	0.
ANTIOCH, TN	1			
JULIE GAGLIONE	BOARD MEMBER	C	0.	0.
NASHVILLE, TN	1			
LIZ BEAVERS	VICE PRESIDENT	C	0.	0.
MT. JULIET, TN	1			
JULIE CLAY	BOARD MEMBER	C	0.	0.
NASHVILLE, TN	1			
TERESA NEELY-WHITE	BOARD MEMBER	C	0.	0.
NASHVILLE, TN	1			
CYNDI BLALOCK	BOARD MEMBER	C	0.	0.
ANTIOCH, TN	1			
GARY M. BROWN	LEGAL COUNSEL	C	0.	0.
NASHVILLE, TN	1			
ANGIE RICE	SECRETARY	C	0.	0.
NASHVILLE, TN	1			
CHERYL OWENS	BOARD MEMBER	C	0.	0.
NASHVILLE, TN	1			

2003

### **FEDERAL STATEMENTS**

PAGE 4

FANNIE BATTLE DAY HOME FOR CHILDREN, INC

62-0476290

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

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTE	COMPEN- D SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
KIM SPANN	PRESIDENT	\$ 0	. \$ 0.	\$ 0.
NASHVILLE, TN	1			
DENISE WARREN	TREASURER	0	. 0.	0.
NASHVILLE, TN	1			
	TOT	AL \$ 47,348	. \$ 1,420.	\$ 0.