

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

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

OMB No. 1545-0047

2006Open to Public
Inspection**A** For the 2006 calendar year, or tax year beginning

and ending

B Check if
applicable:

- ☐ Address
change
- ☐ Name
change
- ☐ Initial
return
- ☐ Final
return
- ☐ Amended
return
- ☐ Application
pending

Please
use IRS
label or
print or
type. See
Specific
Instruc-
tions.**C** Name of organization**Tennessee Art League, Inc.**

Number and street (or P.O. box if mail is not delivered to street address)

808 Broadway

Room/suite

City or town, state or country, and ZIP + 4

Nashville, TN 37203**D** Employer identification number**62-1068612****E** Telephone number**(615) 736-5000****F** Accounting method: ☒ Cash ☐ Accrual☐ Other
(specify) ▶• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts
must attach a completed Schedule A (Form 990 or 990-EZ).**H** and **I** are not applicable to section 527 organizations.**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes," enter number of affiliates ▶ **N/A****H(c)** Are all affiliates included? **N/A** ☐ Yes ☐ No
(If "No," attach a list.)**H(d)** Is this a separate return filed by an or-
ganization covered by a group ruling? ☐ Yes ☒ No**I** Group Exemption Number ▶ **N/A****G** Website: ▶ **www.tennesseeartleague.org****J** Organization type (check only one) ☒ 501(c) (**3**) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Check here ☐ if the organization is not a 509(a)(3) supporting organization and its gross
receipts are normally not more than \$25,000. A return is not required, but if the organization
chooses to file a return, be sure to file a complete return.**M** Check ☒ if the organization is not required to attach
Sch. B (Form 990, 990-EZ, or 990-PF).**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶**880,860.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, and similar amounts received:					
	a	Contributions to donor advised funds	1a				
	b	Direct public support (not included on line 1a)	1b	201,365.			
	c	Indirect public support (not included on line 1a)	1c				
	d	Government contributions (grants) (not included on line 1a)	1d	574,751.			
	e	Total (add lines 1a through 1d) (cash \$ 775,723. noncash \$ 393.)	1e		776,116.		
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		59,689.		
	3	Membership dues and assessments	3		19,910.		
	4	Interest on savings and temporary cash investments	4		3,844.		
	5	Dividends and interest from securities	5				
Revenue	6a	Gross rents	6a	See Statement 1	21,216.		
	b	Less: rental expenses	6b				
	c	Net rental income or (loss). Subtract line 6b from line 6a	6c		21,216.		
	7	Other investment income (describe ▶)	7				
	8a	Gross amount from sales of assets other than inventory	(A) Securities	8a			
	b	Less: cost or other basis and sales expenses	8b				
	c	Gain or (loss) (attach schedule)	8c				
	d	Net gain or (loss). Combine line 8c, columns (A) and (B)	8d				
	9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>					
	a	Gross revenue (not including \$ 751,697. of contributions reported on line 1b)	9a				
Revenue	b	Less: direct expenses other than fundraising expenses	9b	28,669.			
	c	Net income or (loss) from special events. Subtract line 9b from line 9a	9c	See Statement 2	-28,669.		
	10a	Gross sales of inventory, less returns and allowances	10a	85.			
	b	Less: cost of goods sold	10b	4,466.			
	c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c	Stmt 3	-4,381.		
	11	Other revenue (from Part VII, line 103)	11				
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		847,725.		
	Expenses	13	Program services (from line 44, column (B))	13		117,202.	
		14	Management and general (from line 44, column (C))	14		129,610.	
		15	Fundraising (from line 44, column (D))	15			
16		Payments to affiliates (attach schedule)	16				
17		Total expenses. Add lines 16 and 44, column (A)	17		246,812.		
18		Excess or (deficit) for the year. Subtract line 17 from line 12	18		600,913.		
Net Assets	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		360,042.		
	20	Other changes in net assets or fund balances (attach explanation)	20		0.		
	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21		960,955.		

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01-18-07

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2006)

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► <u>See Statement 5</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a GALLERY INCOME: USE OF GALLERY FACILITIES TO PROMOTE CREATIVITY AND ART APPRECIATION.	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	68,953.
b WORKSHOPS: PROVIDE EDUCATION ON A VARIETY OF SUBJECTS DEALLING WITH ART.	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	34,590.
c SALE OF ARTWORK: SALE OF GALLERY PAINTINGS, PRINTS AND SOUVENIRS.	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	13,659.
d	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
e Other program services (attach schedule)	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	117,202.

Form 990 (2006)

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing	24,895.	124,793.
	46 Savings and temporary cash investments	75,394.	125,395.
	47 a Accounts receivable		
	b Less: allowance for doubtful accounts		
	48 a Pledges receivable	425,365.	
	b Less: allowance for doubtful accounts		
	49 Grants receivable	8,404.	7,224.
	50 a Receivables from current and former officers, directors, trustees, and key employees		
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		
	51 a Other notes and loans receivable		
	b Less: allowance for doubtful accounts		
	52 Inventories for sale or use		
	53 Prepaid expenses and deferred charges		
	54 a Investments - publicly-traded securities		
	b Investments - other securities		
	55 a Investments - land, buildings, and equipment: basis		
	b Less: accumulated depreciation		
	56 Investments - other		
57 a Land, buildings, and equipment: basis	1,091,692.		
b Less: accumulated depreciation	34,154.		
58 Other assets, including program-related investments (describe)			
59 Total assets (must equal line 74). Add lines 45 through 58	1,129,012.	1,740,315.	
Liabilities	60 Accounts payable and accrued expenses		3,003.
	61 Grants payable		
	62 Deferred revenue		
	63 Loans from officers, directors, trustees, and key employees		
	64 a Tax-exempt bond liabilities		
	b Mortgages and other notes payable	762,470.	754,516.
	65 Other liabilities (describe)	6,500.	21,841.
66 Total liabilities. Add lines 60 through 65	768,970.	779,360.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted	360,042.	960,955.
	68 Temporarily restricted		
	69 Permanently restricted		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.		
	70 Capital stock, trust principal, or current funds		
	71 Paid-in or capital surplus, or land, building, and equipment fund		
	72 Retained earnings, endowment, accumulated income, or other funds		
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	360,042.	960,955.
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	1,129,012.	1,740,315.	

Form 990 (2006)

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a Total revenue, gains, and other support per audited financial statements		N/A	
b Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments		
2	Donated services and use of facilities		
3	Recoveries of prior year grants		
4	Other (specify):		
Add lines b 1 through b 4			
c	Subtract line b from line a		
d Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b		
2	Other (specify):		
Add lines d 1 and d 2			
e Total revenue (Part I, line 12). Add lines c and d			

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a Total expenses and losses per audited financial statements		N/A	
b Amounts included on line a but not on Part I, line 17:			
1	Donated services and use of facilities		
2	Prior year adjustments reported on Part I, line 20		
3	Losses reported on Part I, line 20		
4	Other (specify):		
Add lines b 1 through b 4			
c	Subtract line b from line a		
d Amounts included on Part I, line 17, but not on line a:			
1	Investment expenses not included on Part I, line 6b		
2	Other (specify):		
Add lines d 1 and d 2			
e Total expenses (Part I, line 17). Add lines c and d			

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
TED KROMER 808 BROADWAY NASHVILLE, TN 37203	PRESIDENT	5.00	0.	0.
MELANIE ELLINGTON 808 BROADWAY NASHVILLE, TN 37203	VICE PRESIDENT	5.00	0.	0.
MITCHELL CHAMBERLAIN 808 BROADWAY NASHVILLE, TN 37203	VICE PRESIDENT	5.00	0.	0.
NICKIE STANLEY 808 BROADWAY NASHVILLE, TN 37203	EXECUTIVE DIRECTOR	20.00	0.	0.
CLAIRE WEBER 808 BROADWAY NASHVILLE, TN 37203	PARLAMENTARIAN	5.00	0.	0.
WENDY LATIMER 808 BROADWAY NASHVILLE, TN 37203	VOLUNTEER DIRECTOR	5.00	0.	0.
CLAUDE NIVENS 808 BROADWAY NASHVILLE, TN 37203	RESOURCE DIRECTOR	5.00	0.	0.
JAN BATES 808 BROADWAY NASHVILLE, TN 37203	PAST PRESIDENT	5.00	0.	0.
NASHVILLE, TN 37203				

Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82a	X
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	
85 501(c)(4), (5), or (6) organizations. a	Were substantially all dues nondeductible by members?	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86 501(c)(7) organizations. Enter: a	Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87 501(c)(12) organizations. Enter: a	Gross income from members or shareholders	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>0.</u> ; section 4912 <u>0.</u> ; section 4955 <u>0.</u>		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90 a	List the states with which a copy of this return is filed	90b	0
b	Number of employees employed in the pay period that includes March 12, 2006		
91 a	The books are in care of <u>JAN BATTS</u> Telephone no. <u>(615) 736-5000</u> Located at <u>808 BROADWAY, NASHVILLE, TN</u> ZIP + 4 <u>37203</u>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	91b	X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			

Part VI Other Information (continued)

Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States?

91c

X

If "Yes," enter the name of the foreign country **N/A**92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here ☐

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

92

N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a GALLERY INCOME					18,334.
b CLASSES & WORKSHOPS					30,588.
c MISCELLANEOUS					9,987.
d MEMBER PROGRAMS					780.
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					19,910.
95 Interest on savings and temporary cash investments			14	3,844.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					21,179.
b not debt-financed property					37.
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					-28,669.
102 Gross profit or (loss) from sales of inventory					-4,381.
103 Other revenue:					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		3,844.	67,765.
105 Total (add line 104, columns (B), (D), and (E))					71,609.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	See Statement 8

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). N/A

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- ----- -----			
b	----- ----- -----			
c	----- ----- -----			
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- ----- -----			
b	----- ----- -----			
c	----- ----- -----			
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
Please Sign Here	<div>Signature of officer</div> <div>Date</div>
	Type or print name and title
Paid Preparer's Use Only	<div>Preparer's signature</div> <div>Firm's name (or yours if self-employed), address, and ZIP + 4</div>
	<div>Date</div> <div>Check if self-employed <input checked="" type="checkbox"/></div> <div>Preparer's SSN or PTIN (See Gen. Inst. X)</div>
	<div>EIN</div> <div>Phone no.</div>

Signature of officer: *Melinda S. Lennan CPA*
 Date: 05/24/07
 Check if self-employed: ☒
 Preparer's SSN or PTIN: P00348799
 Firm's name: Dodd, Drennan & Associates, PLLC, CPA's
 Address: 1706 Hayes Street
 City: Nashville, TN 37203
 EIN: 62-1719464
 Phone no.: (615) 322-9600

Form 990 (2006)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.)

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

OMB No. 1545-0047

2006

Name of the organization

Tennessee Art League, Inc.

Employer identification number

62 1068612

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

Total number of other employees paid over \$50,000 ▶

0

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		

Total number of others receiving over \$50,000 for professional services ▶

0

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		

Total number of other contractors receiving over \$50,000 for other services ▶

0

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1		X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.				
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		X
e	Transfer of any part of its income or assets?	2e		X
3	a 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.)	3a		X
	b Did the organization have a section 403(b) annuity plan for its employees?	3b		X
	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	3c		X
	d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4	a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		X
	b Did the organization make any taxable distributions under section 4966?	4b		X
	c Did the organization make a distribution to a donor, donor advisor, or related person?	4c		X
	d Enter the total number of donor advised funds owned at the end of the tax year			0
	e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			0.
	f Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			0.
	g Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year			0.

Schedule A (Form 990 or 990-EZ) 2006

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ☐
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
☐ Type I ☐ Type II ☐ Type III-Functionally Integrated ☐ Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total <input type="checkbox"/>					

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

Schedule A (Form 990 or 990-EZ) 2006

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.

Calendar year (or fiscal year beginning 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.)	74,529.	22,856.	14,879.	1,304.	113,568.
16 Membership fees received	14,280.	11,345.	11,816.	5,525.	42,966.
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	32,630.	34,648.	20,206.	5,341.	92,825.
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	1,473.	79.	227.	1,219.	2,998.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets			See Statement 9	883.	883.
23 Total of lines 15 through 22	122,912.	68,928.	47,128.	14,272.	253,240.
24 Line 23 minus line 17	90,282.	34,280.	26,922.	8,931.	160,415.
25 Enter 1% of line 23	1,229.	689.	471.	143.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 3,208.
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 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 0.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 160,415.
d Add: Amounts from column (e) for lines: 18 2,998. 19 22 883. 26b					26d 3,881.
e Public support (line 26c minus line 26d total)					26e 156,534.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 97.5807%
27 Organizations described on line 12: 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: N/A					
(2005) (2004) (2003) (2002)					
b For 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 11b, 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: N/A					
(2005) (2004) (2003) (2002)					
c Add: Amounts from column (e) for lines: 15 16 17 20 21					27c N/A
d Add: Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, 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.					

Part V Private School Questionnaire (See page 9 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	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	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31	
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34 a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Schedule A (Form 990 or 990-EZ) 2006

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check ☐ a ☐ if the organization belongs to an affiliated group.Check ☐ b ☐ if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred.)			
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following 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		\$100,000 plus 15% of the excess over \$500,000	
Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000	
Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000	
Over \$17,000,000		\$1,000,000	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period					N/A
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total	
45	Lobbying nontaxable amount					0.
46	Lobbying ceiling amount (150% of line 45(e))					0.
47	Total lobbying expenditures					0.
48	Grassroots nontaxable amount					0.
49	Grassroots ceiling amount (150% of line 48(e))					0.
50	Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- 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.)

Yes	No	Amount
		0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
Buildings								
15	BUILDING - 808 BROADWAY	080205SL	39.00	16	650,000.		6,944.	16,667.
17	SIGN	101105SL	7.00	16	2,500.		89.	357.
18	IMPROVEMENTS - 808 BROADWAY	100605SL	27.50	16	137,000.		1,245.	4,982.
24	EXHAUST FAN ON 2ND FLOOR	010406SL	7.00	16	1,270.			181.
25	OUTSIDE LIGHTS IN FRONT	060806SL	7.00	16	1,297.			108.
26	IMPROVEMENTS - 808 BROADWAY	062806SL	27.50	16	34,605.			629.
27	REWIRE WATER HEATER	073106SL	27.50	16	2,748.			42.
28	REWIRE CLASS ROOM	081206SL	27.50	16	1,900.			29.
29	BALANCED AIR ON 2ND & 3RD	110806SL	27.50	16	2,020.			12.
38	FLOORING	101506SL	27.50	16	8,090.			74.
	* 990 Page 2 Total Buildings				841,430.	0.	8,278.	23,081.
Furniture & Fixtures								
16	CARPETING - FOYER	101705SL	5.00	16	3,172.		159.	634.
19	26 TABLES & CHAIRS	102205SL	7.00	16	1,471.		53.	210.
22	GIFT SHOP SHELVES	100105SL	7.00	16	2,712.		97.	387.
30	FLOOR TABLE & LAMP	011306SL	7.00	16	800.			114.
31	OUTSIDE FLOOD LIGHTS	050406SL	7.00	16	1,297.			124.
	* 990 Page 2 Total Furniture & Fixtures				9,452.	0.	309.	1,469.
Machinery & Equipment								
23	CANON COPIER GP 200	123005SL	7.00	16	3,500.			500.
32	INTERCOM SYSTEM	060806SL	7.00	16	2,961.			247.
33	WATER HEATER, ICE MAKER	080506SL	7.00	16	785.			47.
34	COMPUTER SOFTWARE, ROUTER	090506SL	5.00	16	1,426.			95.
35	KATHERINE'S COMPUTER	091606SL	5.00	16	776.			39.
36	COMPUTER SOFTWARE	121206SL	5.00	16	1,961.			33.
37	TELEPHONE SYSTEM	111606SL	7.00	16	4,400.			52.

Form 990	Rental Income	Statement	1
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Kind and Location of Property	Activity Number	Gross Rental Income
STUDIO RENTAL	2	21,179.
VIDEO RENTAL	3	37.
Total to Form 990, Part I, line 6a		21,216.

Form 990	Special Events and Activities	Statement	2
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Description of Event	Gross Receipts	Contribut. Included	Gross Revenue	Direct Expenses	Net Income
CAPITAL CAMPAIGN	751,697.	751,697.		28,669.	-28,669.
To Fm 990, Part I, line 9	751,697.	751,697.		28,669.	-28,669.

Form 990

Income and Cost of Goods Sold
Included on Part I, Line 10

Statement 3

Income

1. Gross receipts	85	
2. Returns and allowances		
3. Line 1 less line 2		85
4. Cost of goods sold (line 13)	4,466	
5. Gross profit (line 3 less line 4)		-4,381

Cost of Goods Sold

6. Inventory at beginning of year		
7. Merchandise purchased		
8. Cost of labor		
9. Materials and supplies	4,466	
10. Other costs		
11. Add lines 6 through 10		4,466
12. Inventory at end of year		
13. Cost of goods sold (line 11 less line 12). .		4,466

Form 990	Other Expenses			Statement	4
Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising	
BANK FEES & SERVICE CHARGES	3,099.	3,099.			
CONTRACT LABOR	19,449.	19,449.			
MARKETING	21,048.	21,048.			
PROGRAMS/MEMBERS	1,345.	1,345.			
COMMUNITY ARTS EDUCATION	16,105.	16,105.			
EXHIBITS	1,490.	1,490.			
MEMBERSHIPS	1,225.	1,225.			
CONTINUING EDUCATION	33.	33.			
TAXES & LICENSES	500.		500.		
GALLERY EXPENSES	13,605.	13,605.			
Total to Form 990, line 43	77,899.	77,399.	500.		

Form 990	Statement of Organization's Primary Exempt Purpose Part III	Statement	5
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Explanation

TO OPERATE A CULTURAL CENTER FOR BOTH THE GENERAL PUBLIC AND THE ARTISTS OF THE NASHVILLE AND MIDDLE TENNESSEE AREA

Form 990	Mortgages Payable	Statement	6
Description	Balance Due		
JAMES R. STALLINGS, JR	754,516.		
Total included on Form 990, Part IV, line 64b, Column B	754,516.		

Form 990	Other Liabilities	Statement	7
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Description	Amount
SALES TAX PAYABLE	2,148.
PROPERTY TAXES PAYABLE	16,862.
ACCRUED PAYROLL & WITHOLDINGS	2,831.
Total to Form 990, Part IV, line 65, Column B	21,841.

Form 990	Part VIII - Relationship of Activities to Accomplishment of Exempt Purposes	Statement	8
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Line	Explanation of Relationship of Activities
93A	A FEE IS CHARGED FOR THE USE OF THE GALLERY FOR EXHIBITION AND
93A	EDUCATIONAL PURPOSES. OPERATION OF THE GALLERY IS AN ESSENTIAL
93A	EXEMPT FUNCTION.
93B	A FEE IS CHARGED FOR ATTENDANCE OF WORKSHOPS. CLASSES OFFERED ARE
93B	AN ESSENTIAL EXEMPT FUNCTION OF THE LEAGUE.
94	THE TENNESSEE ART LEAGUE ENCOURAGES ARTISTS AND ART ENTHUSIASTS TO
94	OBTAIN AN ANNUAL MEMBERSHIP, WHICH ALLOWS MEMBERS TO ATTEND LECTURES
94	EXHIBIT ARTWORK, PREVIEW EXHIBITS, USE THE ART LIBRARY AND RECEIVE
94	MONTHLY NEWSLETTERS.
98	THE TENNESSEE ART LEAGUE POSSESSES A SMALL COLLECTION OF ARTISTIC
98	EDUCATIONAL VIDEOS THAT ARE AVAILABLE FOR RENT TO MEMBERS.
98	EDUCATION OF THE LEAGUE'S MEMBERS IS AN ESSENTIAL EXEMPT PURPOSE.

Schedule A	Other Income	Statement	9
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Description	2005 Amount	2004 Amount	2003 Amount	2002 Amount
INSURANCE PROCEEDS	0.	0.	0.	883.
Total to Schedule A, line 22	0.	0.	0.	883.

Form **990-W****Estimated Tax on Unrelated Business Taxable
Income for Tax-Exempt Organizations**

OMB No. 1545-0976

(WORKSHEET)

Department of the Treasury
Internal Revenue Service

(and on Investment Income for Private Foundations) Form 990-T

(Keep for your records. Do not send to the Internal Revenue Service.)

2007

1	Unrelated business taxable income expected in the tax year	1
2	Tax on the amount on line 1. See instructions for tax computation	2
3	Alternative minimum tax (see instructions)	3
4	Total. Add lines 2 and 3	4
5	Estimated tax credits (see instructions)	5
6	Balance. Subtract line 5 from line 4	6
7	Other taxes (see instructions)	7
8	Total. Add lines 6 and 7	8
9	Credit for federal tax paid on fuels (see instructions)	9
10a	Subtract line 9 from line 8. Note. If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions	10a
b	Enter the tax shown on the 2006 return (see instructions). Caution. If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b
c	2007 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c

10a	
10b	694.
Adjusted To	
10c	720.

		(a)	(b)	(c)	(d)	
11	Installment due dates (see instructions)	11	04/17/07	06/15/07	09/17/07	12/17/07
12	Required installments. Enter 25% of line 10c in columns (a) through (d) unless the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization" (see instructions)	12	180.	180.	180.	180.
13	2006 Overpayment (see instructions)	13				
14	Payment due. (Subtract line 13 from line 12.)	14	180.	180.	180.	180.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-W (2007)