Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

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

OMB No. 1545-1150 2014

Open to Public

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.

Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Inspection Internal Revenue Service For the 2014 calendar year, or tax year beginning 03/05/14, and ending 12/31/14Check if applicable: C Name of organization D Employer identification number Address change Music City MLK Roundball Classic, Name change 46-5003619 Initia) return Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Telephone number Final return/terminated 4300 Kings Lane 615-876-4862 City or town, state or province, country, and ZIP or foreign postal code Amended return F Group Exemption Application pending Nashville Number > Cash X Accrual Other (specify) ▶ Accounting Method: H Check ► X if the organization is not Website: ► N/A required to attach Schedule B Tax-exempt status (check only one) — X 501(c)(3) 501(c)() **∢** (insert no.) 4947(a)(1) or (Form 990, 990-EZ, or 990-PF). Form of organization: X Corporation Trust Association Other Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ 7,000 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I Contributions, gifts, grants, and similar amounts received 1 Program service revenue including government fees and contracts 2 2 Membership dues and assessments 3 3 4 Investment income Gross amount from sale of assets other than inventory b Less: cost or other basis and sales expenses 5b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) C 6 Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than Gross income from fundraising events (not including \$ ____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) 6b Less: direct expenses from gaming and fundraising events 6c Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) ______ Gross sales of inventory, less returns and allowances 7a Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) C 7c Other revenue (describe in Schedule O) 8 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 9 7,000 Grants and similar amounts paid (list in Schedule O) 10 Benefits paid to or for members 11 11 Salaries, other compensation, and employee benefits 12 12 Professional fees and other payments to independent contractors 13 750 13 Occupancy, rent, utilities, and maintenance 14 Printing, publications, postage, and shipping 15 250 15 16 Other expenses (describe in Schedule O) 16 Total expenses. Add lines 10 through 16 17 1,000 17 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 6,000 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 Other changes in net assets or fund balances (explain in Schedule O) 20 Net assets or fund balances at end of year. Combine lines 18 through 20 6,000

For Paperwork Reduction Act Notice, see the separate instructions.

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	Contract Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V) Check if the organization used Schedule O to respond to any question in the	⊧in the his Part V		П
		70 TO	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		l	
	detailed description of each activity in Schedule O	33	<u> </u>	X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			l
	change on Schedule O (see instructions)	34	—	X
35a	5			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?			X
b	The state of the s	35b	ऻ	-
С	0			
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	ــــ	X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
	during the year? If "Yes," complete applicable parts of Schedule N	36	1	X
37a				
b	***************************************	37b		X
38a	, , , , , , , , , , , , , , , , , , , ,			
_	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	L	X
b	***************************************			
39	Section 501(c)(7) organizations. Enter:			
a				
b				
40a	(), () () () () () () () () ()			
_	section 4911 ▶; section 4912 ▶; section 4955 ▶			
b				
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year			
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed			
	on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
đ	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line			
	40c reimbursed by the organization			
e	Guilland and the state of the s			
	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed TN			
42a	The organization's books are in care of Eva M. Lemeh Telephone no.	▶ 615-87	6-4	862
	4300 Kings Lane	25040		
	Located at Nashville TN ZIP + 4	37218		Т
Đ	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR).			
c	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		x
•	If "Yes," enter the name of the foreign country:			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here			L
-	and enter the amount of tax-exempt interest received or accrued during the tax year			
	and ones are amount or an exempt interest received or addition during the tax year	40	Yes	No
14a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		103	NO
	annual of the state of the stat	44a		x
	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			-
	completed instead of Form 990-EZ	44b	MANAGE (III	X
С	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			41
_	explanation in Schedule O		Committee (Committee)	
	Did the execution have a name led out to this the execution of a this factor		\neg	х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the	45a		<u> </u>
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ (see instructions)		******	x
		490		<u> </u>

Form 990-EZ (2014)

X Yes

Phone no. 615-312-8247

Firm's EIN ▶

Preparer

Use Only

Firm's name

Firm's address >

Larry Williams,

TN

205 Powell Pl

Brentwood.

May the IRS discuss this return with the preparer shown above? See instructions

CPA

37027

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

Music City MLK Roundball Classic, Inc.

Employer identification number 46-5003619

2000	10000000						1 20 30				
	art I	· · · · · · · · · · · · · · · · · · ·		Status (All organizations				ons.			
The	orga			se it is: (For lines 1 through 11,							
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2		A school de	ol described in section 170(b)(1)(A)(ii). (Attach Schedule E.)								
3		A hospital o	pital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,									
	city, and state:										
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
		section 170(b)(1)(A)(iv). (Complete Part II.)									
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public									
		described in section 170(b)(1)(A)(vi). (Complete Part II.)									
8				170(b)(1)(A)(vi). (Complete Par	t II.)						
9	X			1) more than 33 1/3% of its sup		contributio	ons, membership fees, and o	nss			
	•			npt functions—subject to certain							
				nd unrelated business taxable in							
				0, 1975. See section 509(a)(2)							
10				exclusively to test for public saf							
11				exclusively for the benefit of, to				ises of			
	L			tions described in section 509(a							
				cribes the type of supporting or							
а				ed, supervised, or controlled by			_				
	i3			to regularly appoint or elect a m				na			
			. You must complete Part I		ajointy of	tric an ecto	is or ilustees of the supports	19			
b				vised or controlled in connection	ruith ite s	unnorted (reanization(e) by having				
-				organization vested in the same							
			(s). You must complete Par		e personi	u iai wiia	or or manage the supported				
С				orting organization operated in	aannaatia	nuith and	I functionally intravated with				
٠											
d				tions). You must complete Par							
u				supporting organization operate)			
				ganization generally must satisfy							
_				t complete Part IV, Sections A							
е				d a written determination from t			/pe I, Type II, Type III				
				nctionally integrated supporting	organizat	ion.		r			
f			r of supported organizations								
9			wing information about the su								
{i}		of supported nization	(ii) EIN	(iii) Type of organization	F	organization or governing	(v) Amount of monetary	(vi) Amount of			
	5			(described on lines 1-9 above or IRC section	document?		support (see instructions)	other support (see instructions)			
				(see instructions))		·	,	,			
					Yes	No					
A)					l						
	····						W				
B)											
C)											
						<u> </u>					
D)											
						<u> </u>					
Ξ)											
otal						Brace Wolfer And Brach					

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage from 2013 Schedule A, Part II, line 14 15 15 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					7,000	7,000
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5					7,000	7,000
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
8 8	Add lines 7a and 7b Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						7,000
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6			<u> </u>		7,000	7,000
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						-
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)			l		7,000	7,000
14	First five years. If the Form 990 is for the organization, check this box and stop here						▼
Sec	tion C. Computation of Public Su		tage	<u> </u>			P A
15	Public support percentage for 2014 (line 8,			in (fl)	·	15	%
6	Public support percentage from 2013 Sche	edule A. Part III. lir	ne 15	··· (*// , , , , , , , , , , , , , , , , , ,		16	/ %
~	ion D. Computation of Investme			<u> </u>		<u> </u>	70
7	Investment income percentage for 2014 (li			, column (f))		17	%
8	Investment income percentage from 2013		161 11 4-	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1 . 1	%
9a	33 1/3% support tests—2014. If the organ		eck the box on line	e 14, and line 15 is	more than 33 1/3	%, and line	
	17 is not more than 33 1/3%, check this bo						
b	33 1/3% support tests—2013. If the organ	nization did not ch	eck a box on line 1	4 or line 19a, and	line 16 is more that	an 33 1/3%, and	
	line 18 is not more than 33 1/3%, check thi	s box and stop he	ere. The organizat	ion qualifies as a p	oublicly supported	organization	🕨 🔲
0	Private foundation. If the organization did	not check a box of	on line 14, 19a, or	19b, check this bo	x and see instruct	ions	>

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organ	iizations
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- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) 10a (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

***	Yes	No
1	Markey Herrick (2)	
	1002-022-03	
2	A construction to the	and personal personal personal control
-		
3a		
	1	
3b		
D-1/40/25/000		
3с		
4a	1	1
4b	I	I
75	 	
BEEN GEGENARE		
4c		
	6.000.000.00	
5a		
5b		
5с		
		60 662 65
6		
7		
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8		
0		
0		
9a		
9a		
9a 9b		
9a 9b		
9a 9b		
9a 9b 9c		

V12111 0000 01111	dule A (Form 990 or 990-EZ) 2014 Music City MLK Roundball Classic, 46-5003	619 P:	age 5
	urt IV Supporting Organizations (continued)	V	
11	Has the organization accepted a gift or contribution from any of the following persons?	Yes	No
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		
	below, the governing body of a supported organization?	11a	
b		11b	
<u>c</u>	A	11c	
Sect	tion B. Type I Supporting Organizations		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	Yes	No
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		
	controlled the organization's activities. If the organization had more than one supported organization,		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		
•	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
2	Did the organization operate for the benefit of any supported organization other than the supported		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		
Sect	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2	
		V. I	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	Yes 1	No
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		
	or management of the supporting organization was vested in the same persons that controlled or managed		
	the supported organization(s).	1	88698999
Sect	ion D. All Type III Supporting Organizations		***************************************
		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax		
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3	By reason of the relationship described in (2), did the organization's supported organizations have a		
	significant voice in the organization's investment policies and in directing the use of the organization's		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		
Socti	supported organizations played in this regard.	3	
1	ion E. Type III Functionally-Integrated Supporting Organizations		
a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction The organization satisfied the Activities Test. Complete line 2 below.	s):	
b	The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instru	intiana)	
·	The organization supported a governmental entity. Describe in Fait of how you supported a government entity (see institu	icuons).	
2 /	Activities Test. Answer (a) and (b) below.	Yes N	io
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1,66	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		
	those supported organizations and explain how these activities directly furthered their exempt purposes,		
	how the organization was responsive to those supported organizations, and how the organization determined		
	that these activities constituted substantially all of its activities.	2a	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		
	reasons for the organization's position that its supported organization(s) would have engaged in these		
	activities but for the organization's involvement.	2b	
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		
	trustees of each of the supported organizations? Provide details in Part VI.	3a	
d	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	

Schedule A (Form 990 or 990-EZ) 2014 MUSIC CITY MER ROUNDE.			Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organizat	ions	
1 Check here if the organization satisfied the Integral Part Test as a qualifying true	ıst on Nov. 20, 19	70. See instructions. Al	
other Type III non-functionally integrated supporting organizations must comple	ete Sections A thro	ough E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally inte	saratad Tura III a	innodiae organization (s	

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instructions).

Zamen Control	t V Type III Non-Functionally Integrated 509(a)(3)			3 619 Page 7
		Supporting Organiza	ations (continued)	
	tion D - Distributions			Current Year
<u>1</u> 2	Amounts paid to supported organizations to accomplish exempt purpose Amounts paid to perform activity that directly furthers exempt purpose			
2				
3	organizations, in excess of income from activity			
	Administrative expenses paid to accomplish exempt purposes of supp	orted organizations	· · · · · · · · · · · · · · · · · · ·	
<u>4</u> 	Amounts paid to acquire exempt-use assets			
6	Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions	**************************************		
7	Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6.			
<u>′</u> 8				
0	Distributions to attentive supported organizations to which the organizations to which the organizations details in Part VI). See instructions.	ation is responsive		
9	Distributable amount for 2014 from Section C. line 6			
			<u>.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
10	Line 8 amount divided by Line 9 amount	73	(12)	A113
	Section E Distribution Allocations (see instructions)	(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
1	Distributable amount for 2014 from Section C, line 6		Pre-2014	Amount for 2014
2	Underdistributions, if any, for years prior to 2014			
_	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a	Excess distributions carryover, if any, to 2014.			
b b				
C				
ď				
	From 2013			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
<u></u>	Carryover from 2009 not applied (see instructions)			
<u>:</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section			
-	D, line 7:			
э	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
_	any. Subtract lines 3g and 4a from line 2 (if amount	0.0000000000000000000000000000000000000		
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
•	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
	Breakdown of line 7:			
a				
b				
	Excess from 2013			
	Excess from 2014			

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Schedule A (F	orm 990 or 990-EZ	2014 Music	City ML	Roundball	Classic,	46-5003619	Page 8
Part VI	Supplementa Part III line 12	I Information.	Provide the ex	planations require	d by Part II, line 10 mation. (See instrւ	46-5003619); Part II, line 17a or 17b	; and
	r circui, mic 12	Also complete	s this part for a	riy additional infor	maton. (See instit	JCHONS.)	
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