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.

Open to Public Inspection

<u>A</u>	For the 2	009 calendar year, or tax year beginning $07/01/09$ , and ending $06/30/09$			
В	Check if appl	luca IDC I	IL,	D Emp	loyer identification number
	Address char	ge label or INC.			
	Name change	1 1 5 5 5 4		58	-1488230
Ξ	,	type. Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Tele	ohone number
<u> </u>	Initial return	See 4805 PARK AVENUE	305	61	5-298-8060
	Termination	Specific Instruc- City or town, state or country, and ZIP + 4		G Gross re	<del></del>
Г	Amended ret				
F	1	E Name and address of mitoglinal officers	· · · · · · · · · · · · · · · · · · ·	H(a) is thi	s a group return for
لبيا	Application p	MEG NUGENT	•	1	ates? Yes X No
		4805 PARK AVENUE #305		H(b) Are a	all affiliates Yes No
		NASHVILLE TN 37209		4	o," attach a list. (see instructions)
<u>-</u>	Tau augus			- " " " " " " " " " " " " " " " " " " "	o, attach a list. (see instructions)
-	Tax-exemp	► WWW.NASHVILLELITERACY.ORG		11/-> 0	
<u>J</u>			1		p exemption number
			. Year of formation: $oldsymbol{1}$	902	M State of legal domicile: TN
	Part	Summary			
		fly describe the organization's mission or most significant activities:			
စ္ည	Ι Ι		G TO U.S	BORN A	ADULTS
าลท	P	ND ENGLISH SKILLS TO ADULT IMMIGRANTS.			
Governance	·				
ó	2 Che	ck this box 🛌 if the organization discontinued its operations or disposed of more tha	n 25% of its net a	issets.	
જ	3 Nur	nber of voting members of the governing body (Part VI, line 1a)		3	20
es	4 Nur	nber of independent voting members of the governing body (Part VI, line 1b)		4	20
Activities &	5 Tota	al number of employees (Part V, line 2a)			30
Ċ	6 Tota	al number of volunteers (estimate if necessary)			650
⋖	7a Tota	al gross unrelated business revenue from Part VIII, column (C), line 12			
		unrelated business taxable income from Form 990-T, line 34			. 0
	D IVE	unteraced business taxable income from 1 orm 930-1, line 34	Prior Ye		Current Year
41	8 Cor	tributions and grants (Part VIII, line 1h)		3,862	431,876
Revenue	9 Pro	gram service revenue (Part VIII, line 2g)		,	
Ş.	10 inve	stment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>—</b>	1,292	1,515
æ	11 Oth	er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,415	25,207
		Il revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,569	458,598
				3,305	430,330
	13 GIA	nts and similar amounts paid (Part IX, column (A), lines 1–3)			
	I	efits paid to or for members (Part IX, column (A), line 4)		3,180	244,264
šes	15 Sala	ries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		2,100	244,204
Expenses	16aPro	essional fundraising fees (Part IX, column (A), line 11e)			
χ.	b Tota	I fundraising expenses (Part IX, column (D), line 25) ▶			
ш	17 000	er expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		3,831	125,247
	18 Tota	l expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,011	369,511
	19 Rev	enue less expenses. Subtract line 18 from line 12		1,558	89,087
Sign			Beginning of Cur		End of Year
Net Assets or	20 Tota	J assets (Part X, line 16)	233	3,967	323,083
et A	21 Tota	I liabilities (Part X, line 26)		.,434	1,463
		assets or fund balances. Subtract line 21 from line 20	232	2,533	321,620
F	Part II	Signature Block			
		Under penalties of perjury, I declare that I have examined this return, including accompanying sche			
		and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on	all information of wr	ich prepare	r nas any knowledge.
Sig	gn				
He	re	Signature of officer		Date	0.15 12
		CONNIE HERRELL SMU HEMUL TREA	SURER		9.15.10
		Type or print name and title			
		Prenarer's Date	Check	if	Preparer's identifying number
Pa	id	rieparers 1	L5/10 self- employ		(see instructions) P00641158
Pre	eparer's	Eirn's name (er vours) BROWN & MAGUIRE CPAS, PLLC	LO / LO employ		26-1534694
Us	e Only	FOO ST CA DE TATE COM IL COM		EIN ►	ZU-1334094
	-	· · · · · · · · · · · · · · · · · · ·	•	Phone	021200 2000
<u></u>		002012217 211 00102		no.	931-388-3008
					X Yes No
DAA	Privacy A	ct and Paperwork Reduction Act Notice, see the separate instructions.			Form <b>990</b> (2009)

) (Revenue \$

(Expenses \$

4d Other program services. (Describe in Schedule O.)

4e Total program service expenses ▶

including grants of \$

358,176

the the organization desorthosd in eaction SIO (a)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A is the organization required to complete Schedule B, Schedule of Contributions?  1				Yes	No
s the organization required to complete Schedule 8, Schedule of Contributors?  Diff the organization organge in dicted to indirect political cameging enablities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I  Section 301(c)(3) organizations. Diff the organization sugges in hobbying activities? If "Yes," complete Schedule C, Part II  Section 301(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 503(c) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II  Diff the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? "Yes," complete Schedule C, Part II  Diff the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? "Yes," complete Schedule D, Part II  Diff the organization remains collections of works of art, historical treasures, or other similar assessor? If "Yes," complete Schedule D, Part II  Diff the organization maintain and accounts in the such accounts with the such accounts of the such accounts in the such accounts of	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
2 Is the organization required to complete Schedule B, Schedule of Contributors?  3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II  4 Section 801(c)(6) carpanizations. Did the organization engage in licibitying activities? If "Yes," complete Schedule C, Part II  5 Section 801(c)(4), 501(c)(6), and 501(c)(6) organizations. Is the organization subject to the section 903(e) cotice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III  5 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the fight to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II  6 Did the organization maintain collections of works of art, historical treasures, or other similar assesses? If "Yes," complete Schedule D, Part II  8 Did the organization maintain collections of works of art, historical treasures, or other similar assesses? If "Yes," complete Schedule D, Part III  9 Did the organization maintain collections of works of art, historical treasures, or other similar assesses? If "Yes," complete Schedule D, Part III  10 Did the organization increation of a manural in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt massagement, aredit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VII  10 Did the organization directly or through a related organization, hold assets in term, permanent, or quasi-endowners? If "Yes," complete Schedule D, Part VIII  11 Ste organization report an amount for Individual particles of the true organization report an amount for investments—contres escurities in Part X, line 10? If "Yes," complete Schedule D, Part VIII  12 Did the organization report an amount for the resistence of the study and the security of the organization report an amount fo			1		
3	2	is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
acandidates for public office? If "Yes," complete Schedule C, Part I   3   X   Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II   5   Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the seaths 6033(e)   5   notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II   5   Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the seaths 6033(e)   5   notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II   5   Section 501(c)(4), 501(c	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
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7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III 7 S. Complete Schedule D, Part III 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 8 Did the organization or pert of an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," organization directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 Did the organization in directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 Is the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 IV 11, VIII, X, or X as applicable Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII.  Did the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  Did the organization report an amount for investments—organization and the organization report an amount for investments—organization and the organization report an amount for their assets related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  Did the organization report an amount for their assets related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X X.  Did the organization seport an amount for their asset selected in Part X, line 13 that is 5% or		assumitate Cabadula D. Dort I	6		x
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	***************************************			
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complete Schedule D, Part III 9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization freport an anount for louding questions "Yes"? If so, complete Schedule D, Part VI, 11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Part VI, 12 IV, IV, IV, IV, X ex As applicable 13 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 14 Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 25 Did the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 26 Did the organization report an amount for other assets related in Part X, line 13 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 27 Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 28 Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets the organization's separate or consolidated financial statements for the tax year include a feotionate that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. 29 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, IV, IV, AV, IV, AV, IV, IV, AV, IV, IV, AV, IV, IV, AV, IV, IV, IV, IV, IV, IV, IV, IV, IV,	•				
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V  11 Is the organization's answer to any of the following quesitions "Yes?" If so, complete Schedule D, Part SVI, VIII, VIII, IX, or X as applicable  11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete  12 Schedule D, Part VI.  13 Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  14 Did the organization report an amount for investments—organ related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  15 Did the organization report an amount for other labsilities in Part X, line 16 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  16 Did the organization report an amount for other labsilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X.  17 Did the organization orbital separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X.  18 Did the organization orbital separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X.  19 Did the organization shoulded in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, IXII, and XIII.  19 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, busin	8		۰		Y
x, or provide credit counselling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V  11 Is the organization's answer to any of the following questions "Yes?" If so, complete Schedule D, Parts VI, VII, IVII, IX, or X as applicable  11 D  12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.  12 Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  13 Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  14 Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  15 Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X.  16 Did the organization obtain separate, independent audited financial statements for the tax year include a footnote that addresses the organization included in consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X.  17 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X.  18 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X.  18 Did the organization maintain an office, employees, or agents outside of the United States? If "Yes," complete Schedule			-		-2
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	20	Did the digatilization operate one of more hospitals: if ites, complete schedule if		990	

Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24a  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	X	X X
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25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction		
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with a dioqualities person earning the year in 1997 complete constants 2,1 and 1		Х
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a		
prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or		l
25h		x
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or		
disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		х
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		
substantial contributor, or a grant selection committee member, or to a person related to such an individual?		
15 IIV-as III as malata Cabadulla I Dout III	1.	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L,		
Part IV instructions for applicable filling thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	198300090	X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		
Schedule L, Part IV		х
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a		
family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,		
Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		
conservation contributions? If "Yes," complete Schedule M		Х
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	$\neg$	
Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		
		X
Schedule N, Part II  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		
	ľ	X
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,		
		X
III, IV, and V, line 1  35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete		
		X
Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related		
		X
organization in too, complete constant in the		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		
	1	X
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and  19? Note. All Form 990 filers are required to complete Schedule O		
Form	X	

l Pa	Statements Regarding Other IRS Fillings and Tax Compliance			T	
	Futurable assessmented in Day 2 of Ferral 100C. Applied Cummany and Transmitted of			Yes	No
та	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1a 1			
L.	U.S. Information Returns. Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	-		
b	Did the organization comply with backup withholding rules for reportable payments to vendors and	L:2   -	-		
С	gaming (gambling) winnings to prize winners?	reportable	1c		X
2a		[]	10		- 22
Za	Statements, filed for the calendar year ending with or within the year covered by this return	2a 30			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax ret		2b	X	1811123346
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see				
	instructions)	-			
За		red by			
	this return?		3a	***********	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other				
	over, a financial account in a foreign country (such as a bank account, securities account, or other				
	account)?		4a		X
b	If "Yes," enter the name of the foreign country: ▶				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreig	n Bank		Kanagaran.	
	and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-		5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Re	garding	1		
	Prohibited Tax Shelter Transaction?		5c		
6a					
	organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions or	1		
_	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly fo	r goods			
			7a 7b		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v		75		
С		was	7c		
٦	required to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year	7d	70		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	<del></del>			
C	benefit contract?		7e	0002005UA	38808883
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con	tract?	7f		
а	For all contributions of qualified intellectual property, did the organization file Form 8899 as required		7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098				
	required?		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	9			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	g ·			
	organization, have excess business holdings at any time during the year?		8	i 46744.7	
9	Sponsoring organizations maintaining donor advised funds.			la contra	
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b	ARTERIO PRINCIPO	000000000000000000000000000000000000000
10	Section 501(c)(7) organizations. Enter:	l I			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	4		
11	Section 501(c)(12) organizations. Enter:	140			
a	Gross income from members or shareholders	11a	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	116			
10-	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b	12a		
12a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	124		
U	n res, chief the amount of tax-exemptimiterest received of accided during the year	1 E M	accountaines.	assustani	

Form 990 (2009) NASHVILLE ADULT LITERACY COUNCIL, 58-1488230

Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body 1a 20			
b	Enter the number of voting members that are independent 1b 20	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	the second secon	2	**********	X
3	any other officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the direct			
J	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members of stockholders, or other persons who may elect one or more members	<u>ا</u>		<del></del> -
1 a	of the governing hadv?	7a		x
h	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
b		70		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:	0-	X	
a	The governing body?	8a	X	
ь	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			v
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
	tion B. Policies (This Section B requests information about policies not required by the Internal			
<u>Hev</u>	renue Code.)	-	1	
	- · · · · · · · · · · · · · · · · · · ·		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		<u> </u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	l	.,	
	form?	11	X	TORRESSES
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		and an interest of the	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	10110222002
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	W1997 W 90 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a	100000000000	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b	ļ	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ TN			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply.			
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: ► MEG NUGENT 4805 PARK AVENUE, #305			
N.	ASHVILLE TN 37209 615	-29	8 <u>-8</u>	<u>060</u>

Form 990 (2009)

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. See instructions for definition of "key employee."

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- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

X Check this box if the organization	on did not comp		te an			nt offic	cer,		T	T
(A) Name and Title	(B) Average	Positi			all '	that ap	ply)	(D) Reportable	(E) Reportable compensation	(F) Estimated amount of
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount or other compensation from the organization and related organizations
4805 PARK AVE, #	5.00			х				0	0	0
VP	305 5.00			x				0	.0	0
4805 PARK AVE, #	305 5.00			x				0	. 0	0
TREASURER	305 5.00			x				0	0	O
EXEC DIRC	305 40.00			x				0	0	σ
4805 PARK AVE, #	305						x	0	0	0
									,	
									construction and the second	

Part VII Section A. Officers (A) Name and Title	(B) Average hours per	_	_	chec		that a	_	(D) Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
• • • • • • • • • • • • • • • • • • • •										
•										
•										· 
						!				
1b Total							<u> </u>			
2 Total number of individuals (ir reportable compensation from				tho	se li	sted	abo	ve) who received more tha	an \$100,000 in	
5 Did any person listed on line services rendered to the orga	' complete Scho e 1a, is the sun organizations gr la receive or ac nization? If "Ye	edule n of re eater 	J fo epor than com	r suctable 1 \$1: 	ch in e cor 50,0 satio	ndivid mpen 00? I  on fro	ual sati f "Y  m a	ion and other compensation es," complete Schedule Juny unrelated organization	n from for such	Yes No 3 X 4 X 5 X
Section B. Independent Contract  1 Complete this table for your fire	ve highest com	pens	ated	inde	pen	dent	con	tractors that received mor	e than \$100,000 of	
compensation from the organi Name and	(A) business address							Descrip	(B) lion of services	(C) Compensation
2 Total number of independent more than \$100,000 in compe						ted to	o the	ose listed above) who rece	eived	0
DAA	moduon Itom ti	UIL	2111م	الانت						Form <b>990</b> (2009)

Pa	art V	III Statement of Revenue						
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
E ST	1a	Federated campaigns 1a						
grants	b	Membership dues 1b						
ts, ar	c	Fundraising events 1c						
ar a	d	Related organizations 1d		,				
S.E	lе	Government grants (contributions) 1e		60,000				
iti s	f	All other contributions, gifts, grants,						
Ë		and similar amounts not included above 1f		371,876				
벌	a	Noncash contributions included in lines 1a-1f:						
ರ್ಷ	h	Total. Add lines 1a-1f			431,876		leter, compare	
Program Service Revenue Contributions, gifts,				Busn. Code				
š	2a							
2	b							
<u>.</u> ë	l .c							
Ser	d							
E	e							
ğ	f	All other program service revenue .						
P	a	Total. Add lines 2a–2f						
	3	Investment income (including divide						
		other similar amounts)		<b></b>	1,515			1,515
	4	Income from investment of tax-exen						
	5	Royalties						
		(i) Real		ersonal				
	6a	Gross Rents						
	b	Less: rental exps.						
	С	Rental inc. or (loss)						
	d	Net rental income or (loss)	▶					
	7a	Gross amount from (i) Securities sales of assets	(ii)	Other				
		other than inventory						
	b	Less: cost or other			and the state of t			
		basis & sales exps						
	С	Gain or (loss)						
		Net gain or (loss)	<u></u>	<u></u> ▶				
e	8a	Gross income from fundraising events						
Revenue		(not including \$		•				
æ.		of contributions reported on line 1c).					la analysis dan distance	Tagana ay
_		See Part IV, line 18 a						
Other		Less: direct expenses b						
_		Net income or (loss) from fundraising	g events	<b>&gt;</b>				
	9a	Gross income from gaming activities.						
		See Part IV, line 19 a						
	. b	Less: direct expenses b	11111 '					
		Net income or (loss) from gaming ac	avities	····· <u> </u>				
	ιυa	Gross sales of inventory, less						
	h	returns and allowances a Less: cost of goods sold b						
		Net income or (loss) from sales of in	ventory	<b></b>			;; <u>;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;</u>	**************************************
		Miscellaneous Revenue	voillory .	Busn. Code				
	11a	SPECIAL EVENT			25,207	25,207		
	b							
	С							
	d	All other revenue						
		Total. Add lines 11a-11d		▶	25,207			
	12	Total Revenue. See instructions			458,598	25,207	0	1,515

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C)	_ (D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and		•		
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
Ū	trustees, and key employees				
6	Compensation not included above, to disqualified				
_	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	244,264	244,264		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				*
b	Legal				
С	Accounting	2,300		2,300	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 1	7			
f	Investment management fees	0.045		0.047	
g	Other	2,047		2,047	
12	Advertising and promotion				
13	Office expenses	<u> </u>		W. P	
14	Information technology	<u> </u>			
15	Royalties	18,268	18,268		
16	Occupancy	111	111		
17	Travel		111		
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials		-		
19	Conferences, conventions, and meetings		· · · · · · · · · · · · · · · · · · ·		· · · · ·
20	Interest Payments to affiliates			***	
21	Depreciation, depletion, and amortization	6,988		6,988	
22 23	-				
23	Insurance				
24	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.			19.0	
а	BOOKS	31,073	31,073		
b	TECHNOLOGY	24,051	24,051		
c	MARKETING	8,673	8,673		
d	INSURANCE	8,078	8,078		
е	OFFICE SUPPLIES	5,095	5,095		<u> </u>
f	All other expenses	18,563			
_25_	Total functional expenses. Add lines 1 through 2	f 369,511	358,176	11,335	
26	Joint costs. Check here				
	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs	<u>.</u>			
	from a combined educational campaign and				
D 4 4	fundraising solicitation	<u> </u>			Form <b>990</b> (2009)
DAA					r omi 330 (2009)

P	art )	Balance Sheet					
,					(A)		(B)
					Beginning of year		End of year
-	1	Cash—non-interest bearing			2,295	1	694
	2	Savings and temporary cash investments			215,014	2	312,259
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors	, trustee:	s, key			
		employees, and highest compensated employees. Con	nplete Pa	art II of			
		Schedule L				5	
	6	Schedule L  Receivables from other disqualified persons (as define	d under s	section			
		4958(f)(1)) and persons described in section 4958(c)(3	)(B). Cor	mplete			
(A)		Part II of Schedule L				6	
Assets	7	Notes and loans receivable, net				7	
SS	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges	.,		1,200	9	
	10a	Land, buildings, and equipment: cost or					
		other basis. Complete Part VI of Schedule D	10a	77,551			
	b	Less: accumulated depreciation	10b	68,621	14,258	10c	8,930
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets			1 000	14	1 000
	15	Other assets. See Part IV, line 11			1,200		1,200
	16	Total assets. Add lines 1 through 15 (must equal line 3			233,967		323,083
		Accounts payable and accrued expenses			1,434		1,463
	18	Grants payable				18	
	19	Deferred revenue				19	
m	20	Tax-exempt bond liabilities				20	
<u>ë</u>	21	Escrow or custodial account liability. Complete Part IV				21	
≣	22	Payables to current and former officers, directors, trust					
Liabilities		employees, highest compensated employees, and disc				22	
_	00					23	
	23	Secured mortgages and notes payable to unrelated thin Unsecured notes and loans payable to unrelated third				24	
	24 25	Other liabilities. Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			1,434		1,463
ances	20	Organizations that follow SFAS 117, check here			_, .0.		
nc		complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets			232,533	27	321,620
ä	28	Temporarily restricted net assets				28	
pu	29	Permanently restricted net assets				29	
Ţ		Organizations that do not follow SFAS 117, check it	nere 🗍				
2		and complete lines 30 through 34.					
<u>S</u>	30	Capital stock or trust principal, or current funds		·		30	
Sei	31	Paid-in or capital surplus, or land, building, or equipme				31	
AS	32	Retained earnings, endowment, accumulated income,	or other f	funds		32	
Net Assets or Fund Bal	33	Total net assets or fund balances			232,533		321,620
Ž	34	Total liabilities and net assets/fund balances	<u></u>		233,967	34	323,083

Form	1990 (2009) NASHVILLE ADULT LITERACY COUNCIL, 58-1488230		Pag	<u>ge 12</u>
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		_X_
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	Separate basis X Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		<u> </u>
		Form	990	(2009)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

### **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. ▶ See separate instructions.

OMB No. 1545-0047 Open to Public

Inspection

Department of the Treasury Internal Revenue Service

INC.

Name of the organization NASHVILLE ADULT LITERACY COUNCIL,

Employer identification number 58-1488230

	art l	m neas	OII IOI FUDIIC CIIAITE	y Status (All organizatio	ns mus	st Comp	nete ti	us par	<u>ı.) 0e</u>	e msi	rucuc	<i>)</i> 113.		
The	orga	nization is no	t a private foundation becau	ise it is: (For lines 1 through 11	, check o	nly one b	ox.)							
1	ΓĬ			sociation of churches describe				i).						
2	H			(A)(ii). (Attach Schedule E.)			,, ,, ,,	,						
	Н			rice organization described in s	ection 17	70/b\/1\/	Δ \/iii\							
3	$\vdash$							\/ <b>L</b> \/4\/A	\/:::\ =	ntor the	- hooni	talla na		
4		A medical re	search organization operate	ed in conjunction with a hospita	i describe	a in sec	tion 17t	)(1)(A)	.)(III <b>).</b> =	nter the	e nospi	taisna	ine,	
		city, and stat												
5		An organizat	ion operated for the benefit	of a college or university owne	d or oper	ated by a	ı govern	mental L	ınit des	cribed i	in			
		section 170	(b)(1)(A)(iv). (Complete Par	rt II.)										
6				governmental unit described in	section '	170(b)(1)	(A)(v).							
7	X			substantial part of its support				or from t	he aen	eral pub	olic			
•		_	section 170(b)(1)(A)(vi). (							•				
				<b>170(b)(1)(A)(vi).</b> (Complete Pa	et II V									
8	$\vdash$			(1) more than 33 1/3 % of its su		m aantrib	utiona	mambar	abia for	o and	aracc			
9	$\Box$													
				mpt functions—subject to certa							IIS			
			-	and unrelated business taxable				tax) from	n busin	esses				
	_		_	30, 1975. See <b>section 509(a)(</b> 2										
10		An organizat	ion organized and operated	exclusively to test for public sa	ıfety. See	section	509(a)(	4).						
11		An organizat	ion organized and operated	exclusively for the benefit of, to	perform	the func	tions of	, or to ca	rry out	the				
		purposes of	one or more publicly suppor	ted organizations described in	section 5	09(a)(1)	or section	on 509(a	)(2). Se	e sect	ion			
		509(a)(3). Ch	neck the box that describes	the type of supporting organiza	tion and	complete	lines 1	1e throu	gh 11h.					
		a Type	l <b>b</b> Type II	c Type III-Function	ally integi	ated	d	П Тур	e IIIOt	her				
е	$\Box$			ganization is not controlled dire			one or	more di	squalifi	ed				
•				s and other than one or more p							ion			
		,	section 509(a)(2).		,	•	Ū							
f														
ı			ation received a written det	ermination from the IBS that it	s a Type	I. Type I	l. or Tvr	e III sup	portina					
		_		ermination from the IRS that it	s a Type	I, Type I	I, or Typ	e III sup	porting					
		organization,	check this box					e III sup	porting			• • • • • •		
g		organization, Since Augus	check this box t 17, 2006, has the organiza	ermination from the IRS that it ation accepted any gift or contri				e III sup	porting			• • • • • •		
		organization, Since Augus following per	check this box	ation accepted any gift or contri	bution fro	m any of	the	• • • • • • •	porting		••••	• • • • • •		
		organization, Since Augus following per (i) A person	check this box t 17, 2006, has the organizarsons? n who directly or indirectly c	ation accepted any gift or contri	bution from	m any of	the cribed i	n (ii)	••••				Yes	No
		organization, Since Augus following per (i) A person and (iii)	check this box t 17, 2006, has the organizarsons? who directly or indirectly obelow, the governing body of	ation accepted any gift or contri ontrols, either alone or togethe of the supported organization?	bution from	om any of	the cribed i	n (ii)				11g(i)	Yes	No
		organization, Since Augus following per (i) A person and (iii) (ii) A family	check this box t 17, 2006, has the organizarsons? n who directly or indirectly obelow, the governing body of member of a person descri	ation accepted any gift or contri ontrols, either alone or togethe of the supported organization? bed in (i) above?	bution from	om any of	the cribed i	n (ii)				11g(ii)		No
		organization, Since Augus following per (i) A person and (iii) (ii) A family	check this box t 17, 2006, has the organizarsons? n who directly or indirectly obelow, the governing body of member of a person descri	ation accepted any gift or contri ontrols, either alone or togethe of the supported organization? bed in (i) above?	bution from	m any of	the cribed i	n (ii)						No
		organization, Since Augus following per (i) A person and (iii) (ii) A family (iii) A 35% o	check this box t 17, 2006, has the organizatesons? who directly or indirectly obelow, the governing body of member of a person descriptoritrolled entity of a person	ation accepted any gift or contri ontrols, either alone or togethe of the supported organization? bed in (i) above?	bution fro	m any of	the cribed i	n (ii)				11g(ii)		No
g		organization, Since Augus following per (i) A person and (iii) (ii) A family (iii) A 35% of Provide the	check this box t 17, 2006, has the organizatesons? who directly or indirectly obelow, the governing body of member of a person descriptoritrolled entity of a person	ation accepted any gift or contribution accepted any gift or contribution on together of the supported organization? bed in (i) above? described in (i) or (ii) above? the supported organization(s).	bution from the with per	sons des	the cribed i	n (ii)		s the		11g(ii) 11g(iii) vii) Am	ount of	
g		organization, Since Augus following per (i) A person and (iii) (ii) A family (iii) A 35% of Provide the	check this box t 17, 2006, has the organizarsons? n who directly or indirectly obelow, the governing body omember of a person descriptority of a person following information about	ation accepted any gift or contribution accepted any gift or contribution on together of the supported organization? bed in (i) above?  described in (i) or (ii) above? the supported organization (described on lines 1–9	bution from the per (iv) is the coin col. (i) listhecoin col. (i) listhecoin col. (i) listhecoin col. (ii) listhecoin col. (iii) listhecoin col. (iiii) listhecoin col. (iii) listhecoin col. (iii) listhecoin col. (iii) listhe	sons des	the cribed i	n (ii)	(vi) l	s the		11g(ii) 11g(iii	ount of	
g		organization, Since Augus following per (i) A person and (iii) (ii) A family (iii) A 35% of Provide the	check this box t 17, 2006, has the organizarsons? n who directly or indirectly obelow, the governing body omember of a person descriptority of a person following information about	ation accepted any gift or contribution accepted any gift or contribution of the supported organization? bed in (i) above? described in (i) or (ii) above? the supported organization(s).  (iii) Type of organization (described on lines 1–9 above or IRC section	bution from the per (iv) is the coin col. (i) listhecoin col. (i) listhecoin col. (i) listhecoin col. (ii) listhecoin col. (iii) listhecoin col. (iiii) listhecoin col. (iii) listhecoin col. (iii) listhecoin col. (iii) listhe	sons des	(v) Did the orga	n (ii)	(vi) I organizat (i) organi	s the		11g(ii) 11g(iii) vii) Am	ount of	
g		organization, Since Augus following per (i) A person and (iii) (ii) A family (iii) A 35% of Provide the	check this box t 17, 2006, has the organizarsons? n who directly or indirectly obelow, the governing body omember of a person descriptority of a person following information about	ation accepted any gift or contribution accepted any gift or contribution on together of the supported organization? bed in (i) above?  described in (i) or (ii) above? the supported organization (described on lines 1–9	bution from the per (iv) is the coin col. (i) listhecoin col. (i) listhecoin col. (i) listhecoin col. (ii) listhecoin col. (iii) listhecoin col. (iiii) listhecoin col. (iii) listhecoin col. (iii) listhecoin col. (iii) listhe	sons des	(v) Did the orga	n (ii)	(vi) I organizat (i) organi	s the ion in col.		11g(ii) 11g(iii) vii) Am	ount of	
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g		organization, Since Augus following per (i) A person and (iii) (ii) A family (iii) A 35% of Provide the	check this box t 17, 2006, has the organizarsons? n who directly or indirectly obelow, the governing body omember of a person descriptority of a person following information about	ation accepted any gift or contribution accepted any gift or contribution of the supported organization? bed in (i) above? described in (i) or (ii) above? the supported organization(s).  (iii) Type of organization (described on lines 1–9 above or IRC section	bution from the per vith per v	m any of sons des	(v) Did y the orga	n (ii)  /ou notify nization in of your port?	(vi) I organizat (i) organi U.s	s the ion in col. zed in the S.?		11g(ii) 11g(iii) vii) Am	ount of	
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g		organization, Since Augus following per (i) A person and (iii) (ii) A family (iii) A 35% of Provide the	check this box t 17, 2006, has the organizarsons? n who directly or indirectly obelow, the governing body of member of a person descripontrolled entity of a person following information about (ii) EIN	ation accepted any gift or contribution accepted any gift or contribution of the supported organization? bed in (i) above? described in (i) or (ii) above? the supported organization(s).  (iii) Type of organization (described on lines 1–9 above or IRC section	(iv) is the coin col. (i) lis governing  Yes	rganization sted in your document?	(v) Did ; the orga col. (i) supp	n (ii)  /ou notify nization in of your port?  No	(vi) I organizat (i) organi U.; Yes	s the ion in col. zed in the S.?		11g(ii) 11g(iii) vii) Am	ount of	

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

11	Total support. Add lines 7 through 10		1,555,900
12	Gross receipts from related activities, etc. (see instructions)	12	26,754
13	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	· · · · · · ·	
Sec	tion C. Computation of Public Support Percentage		
14	Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	99.28%
15	Public support percentage from 2008 Schedule A, Part II, line 14	15	99.19%
16a	33 1/3 % support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this		, ► <u>X</u>
b	and stop here. The organization qualifies as a publicly supported organization  33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, che	ck this	
17a	box and <b>stop here.</b> The organization qualifies as a publicly supported organization  10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10 more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how	% or	
<b>h</b>	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization  10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15		▶ □
b	more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	/ the 	💺 🗀
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instruc	. נוטוו	

Pa	Support Schedule for C (Complete only if you ch				(a)(2)		
500	etion A. Public Support	iecked the bo	x on line 9 or	rait i.)			<u> </u>
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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					i	
6	Total. Add lines 1 through 5						
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						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support			<u></u>	·		
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
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 IV.)						
13	Total support. (Add lines 9, 10c, 11,						
14	and 12.) First five years. If the Form 990 is for the	e organization's fir	st, second, third,	fourth, or fifth tax	year as a section	501(c)(3)	
<u> </u>	organization, check this box and stop her ction C. Computation of Public S	Support Porce	ntage				P <u></u>
	Bublic annual properties for 2000 (line s	Support Ferce	ed by line 12 cel	ımp (f\)		15	<del></del> %
15 16	Public support percentage for 2009 (line 8 Public support percentage from 2008 Sch						
<u>16</u> Sec	tion D. Computation of Investm			· · · · · · · · · · · · · · · · · · ·			
<u> </u>	Investment income percentage for 2009 (			13, column (f))		17	%
18	Investment income percentage for 2000 (					· · · · · · · · · · · · · · · · · · ·	%
19a		anization did not	check the box on	line 14, and line 1	5 is more than 33	1/3 %, and line	
	17 is not more than 33 1/3 %, check this l						▶ □
b	33 1/3 % support tests—2008. If the org	anization did not	check a box on lir	ie 14 or line 19a, a	and line 16 is more	than 33 1/3 %, and	
	line 18 is not more than 33 1/3 %, check t	this box and <b>stop</b>	here. The organi	zation qualifies as	a publicly support	ed organization	
20	Private foundation. If the organization di	id not check a box	on line 14, 19a,	or 19b, check this	box and see instr	uctions	<u>.,,.,</u> ▶ ∐

Schedule A (F	orm 990 or 990-E	Z) 2009 <b>N</b> Z	ASHVIL	LE ADULT	LITERACY	COUNCIL,	58-1488230	Page 4
Part IV	Supplement	al Inform	ation. Co	mplete this p	part to provide	the explanation	58-1488230 s required by Part II, li nformation. See instru	ne 10;
	Part II, line 1	/a or 1/1	o; and Par	T III, line 12.	Provide any of	<u>iner additional i</u>	monnauon. See instru	ictions.
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#### SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

▶ Attach to Form 990. ▶ See separate instructions.

Inspection

OMB No. 1545-0047

Employer identification number Name of the organization NASHVILLE ADULT LITERACY COUNCIL, 58-1488230 INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if -Part I the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year ..... 1 Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year ..... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements ...... 2a Total acreage restricted by conservation easements \_\_\_\_\_\_\_\_\_\_ c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_\_ \_ \_ \_ Number of states where property subject to conservation easement is located ▶\_\_\_\_\_\_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service. provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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3	Using the organization's acquisition, accession						
_	collection items (check all that apply):  Public exhibition	d 🗀					
а	<b>=</b>		or exchange progr				
b	Scholarly research	e [ Othe	r				_
С	Preservation for future generations						
4	Provide a description of the organization's collect XIV.	llections and explain ho	w they further the o	organizati	on's exempt purpo	ose in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	be maintained as part	of the organization's	s collection	on?		Yes No
Pa	rt IV Escrow and Custodial Arra	<b>angements.</b> Comp	olete if the orga	anizatio	n answered "	Yes" to	o Form 990, Part
	IV, line 9, or reported an ar						
1a	Is the organization an agent, trustee, custodia	n or other intermediary	for contributions or	other as	sets not		
	included on Form 990, Part X?						Yes No
b	If "Yes," explain the arrangement in Part XIV a	and complete the follow	ring table:				
						$\sqcup \bot$	Amount
С	Beginning balance					1c	
d	Additions during the year					1d	
	Distributions during the year					1e	
f	Ending balance					1f	
2a	Did the organization include an amount on Fo	rm 990. Part X. line 213	· · · · · · · · · · · · · · · · · · ·			<u> </u>	Yes No
	If "Yes," explain the arrangement in Part XIV.	000, 1 4 14, 10 = 1					🗀 163 🗀 140
Pa	rt V Endowment Funds. Comp	lete if organization	answered "Ye	es" to F	orm 990. Part	IV. lir	ne 10.
	Lindownion ( and or comp	(a) Current year	(b) Prior year				s back (e) Four years back
10	Reginning of year belongs	```	(5) / 1151 / 551				
	Beginning of year balance						
	Contributions			100819181918			
С	Net investment earnings, gains,						
	and losses			-			
	Grants or scholarships						
е	Other expenditures for facilities						
	and programs			-			
f	Administrative expenses			200000000000000000000000000000000000000			
g	End of year balance						
	Provide the estimated percentage of the year						
	Board designated or quasi-endowment ▶	%					
b	Permanent endowment ▶%						
C	Term endowment ▶ %						
За	Are there endowment funds not in the posses	sion of the organization	that are held and a	administe	red for the		
	organization by:						Yes No
	(i) unrelated organizations						3a(i)
							3a(ii)
b	If "Yes" to 3a(ii), are the related organizations	listed as required on Se	chedule R?				3b
4	Describe in Part XIV the intended uses of the	organization's endowm	ent funds.				
Pa	rt VI Investments—Land, Buildi	ngs, and Equipm	ent. See Form	990, P	art X, line 10.		
	Description of investment	(a) Cost or other basis	(b) Cost or o	ther	(c) Accumulat	ed	(d) Book value
	·	(investment)	basis (other	er)	depreciation	1	
1a	Land						
h	Buildings						
c	Leasehold improvements						
	Equipment		77	,551	68	, 621	8,930
	Other		1	,			3,220
	. Add lines 1a through 1e. (Column (d) must ed	gual Form 990. Part X	column (B), line 100	'c).)	L	▶	8,930
	(-) made of	,	, ,,			<u></u>	

Schedule D (Form 990) 2009 NASHVILLE ADULT LITER	ACY COUNCIL,	58-1488230	Page 3
Part VII Investments—Other Securities. See Form 9		(a) Mathad a	fuction
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-year	
		000.0, 0110 0. 300	ar manner value
Financial derivatives  Closely-held equity interests			
			141 1 4
Other			
			-
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Related. See Form 9	90, Part X, line 13.		
(a) Description of investment type	(b) Book value	(c) Method o	f valuation:
		Cost or end-of-year	ar market value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part X Other Assets. See Form 990, Part X, line 15.			
. (a) Description			(b) Book value
	<u> </u>		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. See Form 990, Part X, line	25		
	(b) Amount		
	(b) Amount		
Federal income taxes		-	
		-	
		-	
			***************************************
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)			
2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organisms.	anization's financial stater	nents that reports the	
organization's liability for uncertain tax positions under FIN 48.			

Sche	dule D (Form 990) 2009 NASHVILLE ADULT LITERACY COUNCIL, 58-14882		Page 4
Pa	Irt XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Sta	<u>ateme</u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	458,598
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	<u>369,511</u>
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	89,087
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	89,087
	rt XIIII Reconciliation of Revenue per Audited Financial Statements With Revenue per	r Retu	
1	Total revenue, gains, and other support per audited financial statements	1	458,598
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	Net unrealized gains on investments		
b	Donated services and use of facilities 2b		
C	Recoveries of prior year grants 2c 2c	1	
d	Other (Describe in Part XIV.)	1 1	
		2e	
_	Add lines 2a through 2d	3	458,598
3	Subtract line 2e from line 1  Amounts included on Form 900 Port VIII line 13, but not on line 1.	3	430,330
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b  4a		
_	The state of the s		
b	Chief (Bootship in Cartary)		
	Add lines 4a and 4b	4c 5	458,598
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		#J0, J90
	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	Tel ne	369,511
1	Total expenses and losses per audited financial statements	1	309,311
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities 2a	-	
b	Prior year adjustments 2b	-	
C	Other losses 2c	-	
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	2e	2.CO E11
3	Subtract line 2e from line 1	3	369,511
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	Investment expenses not included on Form 990, Part VIII, line 7b	4	
	Other (Describe in Part XIV.)		
C	Add lines 4a and 4b	4c	
_ 5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	369,511
	rt XIV Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b		
and 2	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete		
this p	art to provide any additional information.		

Sc	hed	ule	D (F	orm	990	) 20	09	N.	AS	ΗV	ΊL	LE	7	DÜ	Ľ	' I	JI:	[E]	RA	CY	С	OU	NC	IL	٠,	58	3-1	48	82	30					Pag	e 5
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#### **SCHEDULE J**

Department of the Treasury Internal Revenue Service

(Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Open To Public Inspection

Name of the organization NASHVILLE ADULT LITERACY COUNCIL, INC **Questions Regarding Compensation** Part I

Employer identification number 58-1488230

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.  First-class or charter travel  Travel for companions  Tax indemnification and gross-up payments  Discretionary spending account  Housing allowance or residence for personal use Payments for business use of personal residence  Health or social club dues or initiation fees  Personal services (e.g., maid, chauffeur, chef)			
, b	If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	4 L		
2	explain  Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	1b 2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.  Compensation committee Independent compensation consultant Form 990 of other organizations  Written employment contract Compensation survey or study Approval by the board or compensation committee			
b	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization:  Receive a severance payment or change-of-control payment?  Participate in, or receive payment from, a supplemental nonqualified retirement plan?  Participate in, or receive payment from, an equity-based compensation arrangement?  If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.	4a 4b 4c		X X X
а	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.  For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:  The organization?  Any related organization?	5a 5b		X
6 a	Any related organization?  If "Yes" to line 5a or 5b, describe in Part III.  For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:  The organization?	6a		X
	Any related organization?  If "Yes" to line 6a or 6b, describe in Part III.  For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed	_6b		i di di da
8	payments not described in lines 5 and 6? If "Yes," describe in Part III  Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe	7		<u>x</u>
9	in Part III  If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	8		X

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2009

Page 2

58-1488230 NASHVILLE ADULT LITERACY COUNCIL,

Schedule J (Form 930) 2009 NASHVILLE ADULT LITERACY COUNCIL, 58-1488230

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

			- Company			i		
(A) Name	edwoo	Base nsation	(i) Base (ii) Bonus & incentive (iii) Other compensation compensation compensation	(iii) Other reportable compensation	(c) neurement and other deferred compensation	( <b>D</b> ) Norliaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
4805 PARK AVE, #305 (i)		0.0	0		0	0	0.0	0.0
(1)								
(u) (0)								
(n) (n)								
(b) (0)	<u> </u>							
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				•			Schedul	Schedule J (Form 990) 2009

#### SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No. 1545-0047
2009
Open to Public Inspection

Name of the organization NASHVILLE ADULT LITERACY COUNCIL, INC.

Employer identification number 58–1488230

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990	
THE FORM 990 IS DISTRIBUTED TO THE EXECUTIVE DIRECTOR AND TREASURER, AS	
WELL AS THE FINANCE COMMITTEE, FOR REVIEW AND APPROVAL. UPON APPROVAL BY	
THE EXECUTIVE DIRECTOR, TREASURER AND FINANCE COMMITTEE THE FORM 990 IS	
SUBMITTED TO THE FULL BOARD, NOTING THAT THE FORM 990 HAS BEEN APPROVED IN	1
COMMITTEE.	
FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY	
THE CONFLICT OF INTEREST POLICY IS ENFORCED ANNUAL DURING A BOARD MEETING.	
DURING THE ANNUAL BOARD MEETING THE CONFLICT OF INTEREST POLICY IS READ TO	)
THE BOARD MEMBERS. AT THAT POINT THE EXECUTIVE DIRECTOR REQUESTS THAT ANY	<u>.</u>
CONFLICTS OF INTEREST, OR POTENTIAL CONFLICTS OF INTEREST, BE BROUGHT	
FORWARD AND DISCLOSED.	
FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL	
COMPENSATION FOR KEY EMPLOYEES IS DETERMINED ANNUAL DURING THE BUDGETING	
PROCESS. THE EXECUTIVE DIRECTOR REVIEWS NATIONAL AND LOCAL TRENDS IN MERI	T
INCREASES IN ORDER TO DETERMINE THE ANNUAL EMPLOYEE RAISES. THE EXECUTIVE	;
DIRECTOR THEN BRINGS THE RECOMMENDATION TO THE BOARD FOR APPROVAL.	
FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS	
COMPENSATION FOR KEY EMPLOYEES IS DETERMINED ANNUAL DURING THE BUDGETING	
PROCESS. THE EXECUTIVE DIRECTOR REVIEWS NATIONAL AND LOCAL TRENDS IN MERI	. п
	1
INCREASES IN ORDER TO DETERMINE THE ANNUAL EMPLOYEE RAISES. THE EXECUTIVE DIRECTOR THEN BRINGS THE RECOMMENDATION TO THE BOARD FOR APPROVAL.	1

Name of the organization NASHVILLE ADULT LITERACY COUNCIL,	58-1488230
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISC	LOSURE EXPLANATION
VARIOUS GOVERNING DOCUMENTS ARE AVAILABLE THROUGH GIV	ING MATTERS.
ADDITIONALLY, GOVERNING DOCUMENTS ARE AVAILABLE UPON I	REQUEST.
	······································
· · · · · · · · · · · · · · · · · · ·	

## Form 4562

#### **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service

► See separate instructions.

Attach to your tax return.

NASHVILLE ADULT LITERACY COUNCIL, Identifying number Name(s) shown on return 58-1488230 INC. Business or activity to which this form relates INDIRECT DEPRECIATION **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I 250,000 Maximum amount. See the instructions for a higher limit for certain businesses 1 Total cost of section 179 property placed in service (see instructions) 2 2 800,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions .... 5 (a) Description of property (b) Cost (business use only) Listed property. Enter the amount from line 29 7 7 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 9 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 ... 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 15 6,988 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Section A MACRS deductions for assets placed in service in tax years beginning before 2009 ..... If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (e) Convention (f) Method (g) Depreciation deduction placed in (a) Classification of property (business/investment use only-see instructions) 19a 3-year property 5-year property 7-year property d 10-year property 15-year property 20-year property S/L 25-year property 27.5 yrs. S/L h Residential rental MM property ММ S/L 27.5 yrs. ММ S/L 39 yrs. Nonresidential real property MM S/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs. 40 yrs S/L 40-year Summary (See instructions.) Part IV Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 6,988 and on the appropriate lines of your return. Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

Form <b>990</b>	Special Ev	ents Schedule	2009
Form 990	For calendar year 2009, or tax year beginning	07/01/09 , and ending 06	30/10
Name NASHVILLE A INC.	DULT LITERACY COUNCIL,		Employer Identification Number 58-1488230
Gross receipts Less contributions Gross revenue Less direct expenses Net income (loss)	(A) (B) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	(C) Others 0 0 0 0 0 0 0 0 0	Total 26,754 0 26,754 0 26,754 0 1,547 0 25,207
Description: (A) (B) (C)	SPECIAL EVENT		
Others			