

Form **990-EZ****Short Form**
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

OMB No. 1545-1150

2009**Open to Public Inspection**Department of the Treasury
Internal Revenue Service**A** For the 2009 calendar year, or tax year beginning **07/01**, 2009, and ending **06/30**, 20 **10****B** Check if applicable:

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

Please use IRS label or print or type. See Specific Instructions.

C Name of organization**ARTS & BUSINESS COUNCIL OF GREATER NASHVILLE INC**

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

211 Commerce Street Suite 100

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

Nashville, TN 37201-1802**D** Employer identification number**20-3255129****E** Telephone number**615-743-3055****F** Group Exemption Number ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting Method: ☒ Cash ☐ Accrual
Other (specify) ▶**I** Website: ▶ **www.abcnashville.org****J** Tax-exempt status (check only one) — ☒ 501(c) (**3**) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**H** Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **305,493****Part I** **Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	281,481
	2	Program service revenue including government fees and contracts	2	5,985
	3	Membership dues and assessments	3	14,900
	4	Investment income	4	0
	5a	Gross amount from sale of assets other than inventory	5a	0
	b	Less: cost or other basis and sales expenses	5b	0
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ▶ <input type="checkbox"/>		
	a	Gross revenue (not including \$ 0 of contributions reported on line 1)	6a	0
	b	Less: direct expenses other than fundraising expenses	6b	0
Expenses	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	0
	7a	Gross sales of inventory, less returns and allowances	7a	0
	b	Less: cost of goods sold	7b	0
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0
	8	Other revenue (describe ▶ See Statement 2)	8	3,127
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶	9	305,493
	10	Grants and similar amounts paid (attach schedule)	10	0
	11	Benefits paid to or for members	11	0
	12	Salaries, other compensation, and employee benefits	12	193,196
	13	Professional fees and other payments to independent contractors	13	4,845
Net Assets	14	Occupancy, rent, utilities, and maintenance	14	22,098
	15	Printing, publications, postage, and shipping	15	1,376
	16	Other expenses (describe ▶ See Statement 3)	16	94,747
	17	Total expenses. Add lines 10 through 16 ▶	17	316,262
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-10,769
Net Assets	19	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	50,450
	20	Other changes in net assets or fund balances (attach explanation)	20	0
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21	39,681

Part II **Balance Sheets.** If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	50,450	39,681
23 Land and buildings	0	0
24 Other assets (describe ▶)	0	0
25 Total assets	50,450	39,681
26 Total liabilities (describe ▶)	0	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	50,450	39,681

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

What is the organization's primary exempt purpose? **Promoting and supporting the arts in Greater Nashville**
 Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
 (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28	Corporate Creativity: ABC presents events throughout the year that provide opportunities for business employees to celebrate, recognize and display their creativity including the Bowtie Awards, the Music City Corporate Band Challenge and ArtWorks. These programs benefit an estimated 100,000 people a year. (Grants \$ <u>148,943</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	148,943
29	Volunteer Lawyers & Professionals for the Arts: Provides pro bono legal and business assistance to low-income artists of all disciplines and emerging nonprofit arts organizations located in the Greater Nashville area. Benefits an estimated 50,000 people. (Grants \$ <u>72,560</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	72,560
30	ABC Seminars and Arts-Based Learning for Business: Creates opportunities for the arts community to learn from business people, as well as opportunities for businesses to tap into the creative potential of their employees through innovative learning experiences. Benefits an estimated 5,000 people. (Grants \$ <u>5,400</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	5,400
31	Other program services (attach schedule) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32	Total program service expenses (add lines 28a through 31a)	32	226,903

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
H Lee Barfield II 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Board Member, 5	0	0	0
Joseph Barker 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Board Member, 5	0	0	0
Lee Beaman 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Board Member, 5	0	0	0
Jack Bovender 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Board Member, 5	0	0	0
Connie Bradley 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Board Member, 5	0	0	0
Michael Bressman 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Board Member, 5	0	0	0
Ramon Cisneros 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Board Member, 5	0	0	0
Ronald Corbin 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Board Member, 5	0	0	0
Elizabeth Courtney 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Secretary, 5	0	0	0
Mike Curb 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Board Member, 5	0	0	0
Marty Dickens 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Board Member, 5	0	0	0
Laurie Eskind 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Board Member, 5	0	0	0
Robert Fisher 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Board Member, 5	0	0	0
Howard Gentry 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Board Member, 5	0	0	0
Martha Ingram 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Honorary Chairman, 5	0	0	0
Alyne Massey 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Board Member, 5	0	0	0
Robert McCabe 211 Commerce Street Suite 100, Nashville, TN 37201-1802	Treasurer, 5	0	0	0
(Continued on Statement 4)				

Part V Other Information (Note the statement requirements in the instructions for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	✓
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	✓
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
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	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0		
b Did the organization file Form 1120-POL for this year?	37b	✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 39a		
b Gross receipts, included on line 9, for public use of club facilities 39b		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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 990-EZ? If "Yes," complete Schedule L, Part I	40b	✓
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ 0		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e	✓
41 List the states with which a copy of this return is filed. ▶ TN		
42a The organization's books are in care of ▶ Connie Valentine Telephone no. ▶ 615-743-3055 Located at ▶ 211 Commerce St Suite 100, Nashville, TN 37201-1802 ZIP + 4 ▶ 37201-1802		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	✓
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 Foreign Bank and Financial Accounts .		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	✓
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 ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	✓
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	✓

Part VI

Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51.

- | | Yes | No |
|--|------------|-------------------------------------|
| 46 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 I | 46 | <input checked="" type="checkbox"/> |
| 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II | 47 | <input checked="" type="checkbox"/> |
| 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 48 | <input checked="" type="checkbox"/> |
| 49a Did the organization make any transfers to an exempt non-charitable related organization? | 49a | <input checked="" type="checkbox"/> |
| b If "Yes," was the related organization a section 527 organization? | 49b | |
- 50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

f Total number of other employees paid over \$100,000 ▶

- 51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000 ▶

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: Connie F. Valentine Date: 12-21-10
 Type or print name and title: Connie Valentine, President & CEO

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed: ☐
 Firm's name (or yours if self-employed), address, and ZIP + 4: _____ EIN: _____
 Phone no.: _____

May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ☐ No

Part II **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.)

Section A. Public Support

Calendar 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.")	0	33,010	78,532	82,730	281,481	475,753
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 Total. Add lines 1 through 3	0	33,010	78,532	82,730	281,481	475,753
5 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)						117,425
6 Public support. Subtract line 5 from line 4.						358,328

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	0	33,010	78,532	82,730	281,481	475,753
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0	0	0	0	0	0
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0
11 Total support. Add lines 7 through 10						475,753
12 Gross receipts from related activities, etc. (see instructions)					12	
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 <input checked="" type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33% support test—2009. If the organization did not check the box on line 13, and line 14 is 33% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33% support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 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% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2008. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

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.)

Section A. Public Support

Calendar 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						
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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar 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, and 12.)						
14 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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

- 19a 33⅓% support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33⅓%, and line 17 is not more than 33⅓%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐
- b 33⅓% support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓%, and line 18 is not more than 33⅓%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Statement 1 : Reasonable Cause Explanations

Statement 2 : Other Revenue Schedule

Statement 3 : Other Expenses Schedule

Statement 4 : Officers, Directors, Trustees and Key Employees Compensation

Statement 1
Form: 990-EZ
Page: 1
Line Number:

ARTS & BUSINESS COUNCIL OF GREATER NASHVILLE INC
20-3255129

Reasonable Cause Explanations

Explanation

The IRS accepted a Form 8868 (Request for Extension) for this filing per Notice Number CP211A dated December 6, 2010.

Statement 2

Form: 990-EZ

Page: 1

Line Number: Part I Line 8

ARTS & BUSINESS COUNCIL OF GREATER NASHVILLE INC

20-3255129

Other Revenue Schedule

Description	Amount
Miscellaneous Revenue	3,127
Total:	3,127

Statement 3

Form: 990-EZ

Page: 1

Line Number: Part I Line 16

ARTS & BUSINESS COUNCIL OF GREATER NASHVILLE INC**20-3255129****Other Expenses Schedule**

Description	Amount
Program events	71,431
Marketing	6,178
Office supplies	4,892
Meetings and travel	3,732
Taxes & Licenses	1,081
Programs	915
Insurance	701
Miscellaneous	5,817
Total:	94,747

Statement 4

Form: 990-EZ

Page: 2

Line Number: Part IV

ARTS & BUSINESS COUNCIL OF GREATER NASHVILLE INC

20-3255129

Officers, Directors, Trustees and Key Employees Compensation

		Title and Hours	Compensation	Benefits	Expense
Name	Michael Milom	Board Member 5	0	0	0
Address	211 Commerce Street Suite 100 Nashville, TN 37201-1802				
Name	Thomas Negri	Board Member 5	0	0	0
Address	211 Commerce Street Suite 100 Nashville, TN 37201-1802				
Name	Hazel O'Leary	Board Member 5	0	0	0
Address	211 Commerce Street Suite 100 Nashville, TN 37201-1802				
Name	Laurence Papel	Chairman 5	0	0	0
Address	211 Commerce Street Suite 100 Nashville, TN 37201-1802				
Name	Sharon Reavis	Board Member 5	0	0	0
Address	211 Commerce Street Suite 100 Nashville, TN 37201-1802				
Name	Carolyn Schott	Board Member 5	0	0	0
Address	211 Commerce Street Suite 100 Nashville, TN 37201-1802				
Name	Robert Spessard	Board Member 5	0	0	0
Address	211 Commerce Street Suite 100 Nashville, TN 37201-1802				
Name	Robert Sullivan	Board Member 5	0	0	0
Address	211 Commerce Street Suite 100 Nashville, TN 37201-1802				
Name	Casey Gill Summar	Director, VLPA 50	60,000	0	0
Address	211 Commerce Street Suite 100 Nashville, TN 37201-1802				
Name	Earl Swensson	Board Member 5	0	0	0
Address	211 Commerce Street Suite 100 Nashville, TN 37201-1802				
Name	Vaniese Tucker	Board Member 5	0	0	0
Address	211 Commerce Street Suite 100 Nashville, TN 37201-1802				
Name	Thor Urness	Board Member 5	0	0	0
Address	211 Commerce Street Suite 100 Nashville, TN 37201-1802				
Name	Connie Valentine	President & CEO	70,000	0	0

Statement 4

ARTS & BUSINESS COUNCIL OF GREATER NASHVILLE INC

50

Address 211 Commerce Street Suite 100
Nashville, TN 37201-1802

Name	Ming Wang	Board Member	0	0	0
		5			

Address 211 Commerce Street Suite 100
Nashville, TN 37201-1802

Name	Ted Welch	Board Member	0	0	0
		5			

Address 211 Commerce Street Suite 100
Nashville, TN 37201-1802

Name	Shirley Zeitlin	Board Member	0	0	0
		5			

Address 211 Commerce Street Suite 100
Nashville, TN 37201-1802

Total:			130,000	0	0
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