Form 990

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)

20**06**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

o Treasury
Service

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

Ā	For the	2006 calendar year, or tax year beginning July 1 , 2006, and	ending	June 30	, 20 07
			Unioning		identification number
_	Check if ap	use IRS Project for Noighborhood Afternoon Inc.	ŀ	62	1710735
=	Address (print or Number and street for P.O. how if mail is not delivered to street address:	Room/suite	E Telephone	
=	Name ch	type. 1997 Promeford Avenue Suite C	, , , , , , , , , , , , , , , , , , , ,	(615)	385-7067
=	Initial retu	Specific City or town state or country and ZIP + 4			ethod: Cash Accrual
\equiv	Final retu	tions. Machaille Tal 27204		_	(specify) ►
=	Amended	Total Maria Carlotte	H and I are no		section 527 organizations
Ш	Applicatio	 Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). 			r affiliates? 📋 Yes 📝 No
G	Website	► www.projectforneighborhoodaftercare.com	H(b) If "Yes,"	enter number o	of affiliates >
<u> </u>	TT C D S I C C	WHIT PROJECTION CONTINUES OF THE PROPERTY OF T	H(c) Are all aff	filiates included	d? Yes No
J	Organiza	ation type (check only one) ► 🗸 501(c) (3) ◄ (insert no.) 🗌 4947(a)(1) or 📗 527	(If "No," a	attach a list. Se	ee instructions.)
ĸ	Check h	ere > if the organization is not a 509(a)(3) supporting organization and its gross	H(d) Is this a se	eparate return fil	ed by an
	receipts	are normally not more than \$25,000. A return is not required, but if the organization chooses			group ruling? Yes No
_	to file a r	eturn, be sure to file a complete return.		cemption Numb	
	Gross r	eceipts: Add lines 6b, 8b, 9b, and 10b to line 12 ► 780,630			organization is not required n 990, 990-EZ, or 990-PF).
_	art	Revenue, Expenses, and Changes in Net Assets or Fund Bala			
L	$\overline{}$		nces loce u	1 1	0113.7
		Contributions to donor advised funds	25,3	11	
	_	Contributions to donor advised funds	23,3		
	ĭ	birect public support (not included of line (a)			
	l.	induced public support (not included on line rd)			
		Government contributions (grants) (not included on line 1a)		- 10 l	25,311
		Total (add lines 1a through 1d) (cash \$ noncash \$)		752,104
		Program service revenue including government fees and contracts (from Pa		3	732,104
		Membership dues and assessments	. 4	3,215	
		Interest on savings and temporary cash investments	. 5	3,213	
	l l	Dividends and interest from securities	. 3		
		Gross rents			
		Less: rental expenses			
		Net rental income or (loss). Subtract line 6b from line 6a		6c 7	
٥	7 ع	Other investment income (describe (A) Securities	(B) Other	' 	
e in evidence	8a	Gross amount from sales of assets other		\dashv \mid	
å	- 1	than inventory			
	1	Less: cost or other basis and sales expenses. Rain or (loss) (attach schedule)		 - - -	
		Call of (1033) (attach schedule)		-	
		Net gain or (loss). Combine line 8c, columns (A) and (B)		. 8d	
	9	Special events and activities (attach schedule). If any amount is from gaming, che	eck here 🕨 L	J	
	a	Gross revenue (not including \$ of			
		contributions reported on line 1b)	·		
	b	Less: direct expenses other than fundraising expenses		9c	
		Net income or (loss) from special events. Subtract line 9b from line 9a		. 30	
	1	Gross sales of inventory, less returns and allowances			
		2000: 000: 0: g0000 00:0;		100	
		Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b			
	11	Other revenue (from Part VII, line 103)		. 11	780,630
-	12			13	780,830
	g 13	Program services (from line 44, column (B))		14	77,651
	14 15 16	Management and general (from line 44, column (C))		15	21,223
	ē 15	Fundraising (from line 44, column (D))		16	LIILES
ı	ப் 16 17	Payments to affiliates (attach schedule)		. —	828,813
_	-			40	(48,183)
	488ets 19 19 19 19 19 19 19 19 19 19 19 19 19			. 12	190,923
	ซี 19	Net assets or fund balances at beginning of year (from line 73, column	(A))	20	130,323
:	ے 20 21 ک	Other changes in net assets or fund balances (attach explanation). Net assets or fund balances at end of year. Combine lines 18, 19, and 20		20	142,740

Par	Statement of All organizations Functional Expenses organizations ar	nd section 49	947(a)(1) nonexempt	charitable trusts but	are required for seconditional for others. (S	tion 501(c)(3) and (4) See the instructions.)
	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule (cash \$ noncash \$)				
00L	If this amount includes foreign grants, check here	_				
220	Other grants and allocations (attach schedule (cash \$ noncash \$		į.	Ì		
	If this amount includes foreign grants, check here			ŀ		(고향음)는 그런 그
23	Specific assistance to individuals (attack schedule)	h as			'i	
24	Benefits paid to or for members (attack schedule)	h				
25a	Compensation of current officers, directors key employees, etc. listed in Part V-A (attacschedule)	s, h	107,639	99,028	6,458	2,153
b	Compensation of former officers, directors key employees, etc. listed in Part V-B (attac schedule)	s, h				
С		o id				
26	Salaries and wages of employees not include on lines 25a, b, and c	d	488,919	451,023	28,703	9,193
27	Pension plan contributions not included of lines 25a, b, and c					
28	Employee benefits not included on line 25a – 27		12,865	7,201	4,247	1,417
29	Payroll taxes		45,388	41,830	2,690	868
30	Professional fundraising fees					
31	Accounting fees					
32	Legal fees	. 32				
33	Supplies		24,509	22,891	1,040	
34	Telephone		16,233	12,837	2,265	1,131
35	Postage and shipping		13,140	7 624	3,548	1,971
36	Occupancy		13, 140	7,621	3,346	1,971
37	Equipment rental and maintenance	• —	2,021	1,778	112	131
38	Printing and publications		4,637	3,542	877	
39 40	Travel	•	.,,		27.	
41	Interest	·				
42	Depreciation, depletion, etc. (attach schedul	•	6,127	3,186	2,206	735
43	Other expenses not covered above (itemize					
a	Con Etatomont 1 attached	احمدا	107,335	79,002	25,505	2,828
b		43b				
С		43c				
d		43d				
е						
f	•••••					
g		43g			<u> </u>	-
44	Total functional expenses. Add lines 2: through 43g. (Organizations completing columns (B)-(D), carry these totals to line	ng				
	13–15)	. 44	828,813	729,939	77,651	21,22
Are If "Y	nt Costs. Check ► ☐ if you are following any joint costs from a combined educational camp (es," enter (i) the aggregate amount of these joint the amount allocated to Management and general	oaign and fu	undraising solicitatio		to Program service	

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

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

	·		
Wh	at is the organization's primary exempt purpose? ▶	See Statement 2 - attached	Program Service
		rements in a clear and concise manner. State the number	Expenses (Required for 501(c)(3) and
of o	clients served, publications issued, etc. Discuss achieven	ments that are not measurable. (Section 501(c)(3) and (4)	(4) orgs., and 4947(a)(1) trusts: but optional for
org	anizations and 4947(a)(1) nonexempt charitable trusts must	t also enter the amount of grants and allocations to others.)	others.)
_			
		•••••	
		•••••••••••	
	(Grants and allocations \$) If this amount includes foreign grants, check here	729,939
b			
	(Grants and allocations \$) If this amount includes foreign grants, check here]
С			
	70) If this amount includes foreign grants, check here	_
	(Grants and allocations \$) If this amount includes foreign grants, check here	<u> </u>
d			
		•••••	
]
	(Grants and allocations \$) If this amount includes foreign grants, check here	اد
е	Other program services (attach schedule)		
	(Grants and allocations \$) If this amount includes foreign grants, check here >	<u>_</u>
f	Total of Program Service Expenses (should equal	line 44, column (B), Program services)	729,939

Form 990 (2006)

Pa	<u>rt IV</u>	Balance Sheets (See the instructions	.)	· -			
N	ote:	Where required, attached schedules and amounts column should be for end-of-year amounts only.	within	he description	(A) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing			4,687	45	(7,302)
	46	Savings and temporary cash investments .		1	133,190	46	58,629
	47.	A converte vecesively le	47a	20.986			
		Accounts receivable	47b	0		47c	20,986
	D	Less, allowance for doubtful accounts.	1			77.0	20,000
	48a	Pledges receivable	48a				
		Less: allowance for doubtful accounts .	48b			48c	
	49	Grants receivable			48,498	49	61,869
	50a	Receivables from current and former officers					
		key employees (attach schedule)				50a	
	b	Receivables from other disqualified persons				50b	
	E4.0	4958(f)(1)) and persons described in section 495 Other notes and loans receivable (attach	10(0)(3)	b) (a.tacii scriedule)		000	
S	Sia	schedule)	51a				
ssets	Ь	Less: allowance for doubtful accounts .	51b			51c	
Ä		Inventories for sale or use				52	
	53				2,045	53	6,545
	54a	Investments—publicly-traded securities				54a	
	b	Investments—other securities (attach sched	ule) l	► □ Cost □ FMV		54b	
	55a	Investments—land, buildings, and	1				
		equipment: basis	55a				
	b	Less: accumulated depreciation (attach	55b		II.	55c	
		schedule)		!		56	
	56	Investments—other (attach schedule)	 57a	37,622		1	
		Land, buildings, and equipment: basis . Less: accumulated depreciation (attach	10.0	31,702			
	"	schedule)	57b	28,149	13,601	57c	9,473
	58	Other assets, including program-related inve	estmer	nts			
		(describe ▶)	1,175	+	1,175
	59	Total assets (must equal line 74). Add lines	45 th	rough 58	203,196	+	151,376
	60	Accounts payable and accrued expenses .			5,125	+	8,636
	61	Grants payable				61	
	62	Deferred revenue		62			
bilities	63	Loans from officers, directors, trustees, ar		63			
		schedule)		64a			
Lia		Tax-exempt bond liabilities (attach schedule Mortgages and other notes payable (attach				64b	
	65	Other liabilities (describe >			7,148		
				,			
_	66	Total liabilities. Add lines 60 through 65		<u> </u>	12,273	66	8,636
	Org	panizations that follow SFAS 117, check here	▶ 🗌	and complete lines			
Ś		67 through 69 and lines 73 and 74.			400.00	, , , , ,	143 740
nce	67	Unrestricted			190,923		142,740
<u>a</u>	68	Temporarily restricted				68 69	
8	69	Permanently restricted		and the second s		103	
Fund Balances	Org	ganizations that do not follow SFAS 117, chec complete lines 70 through 74.	ck here	e ► ∟ and			
7	70	Capital stock, trust principal, or current fun	de			70	
		Paid-in or capital surplus, or land, building,				71	
Not Assets	72	Retained earnings, endowment, accumulat				72	
۸	73	Total net assets or fund balances. Add li	nes 67	through 69 or lines		İ	
Ž		70 through 72. (Column (A) must equal line					
		equal line 21)			190,92		
	74	Total liabilities and net assets/fund balance	ces. A	U lines od and /3	203,19	o 74	151,376

га	LIV-A	instructions.)	ted Financial Statem	ents With Reve	nue pe	r Retu	ırn (S	iee the
a	Total rev	enue, gains, and other support per audite	ed financial statements			а		858,353
b		included on line a but not on Part I, line						
1		alized gains on investments		b1				
2		services and use of facilities		b2				
3	Recover	es of prior year grants		b3				
4	Other (sp	pecify): Donated Food	••••••					
		··		b4	77,723			
		s b1 through b4				<u>b</u>		77,723
C						С		780,630
d		included on Part I, line 12, but not on lin		ايسا				
1		ent expenses not included on Part I, line (d1		}		
2	Other (s)	pecify):		d2				
	Add line	s d1 and d2				d		
е	Total re	venue (Part I. line 12). Add lines c and d						780,630
_	rt IV-B	venue (Part I, line 12). Add lines c and d Reconciliation of Expenses per Au	dited Financial Stater	nents With Exp	enses	er Re	eturn	700,000
а		penses and losses per audited financial s				а		906,536
b	Amounts	s included on line a but not on Part I, line	17:					
1	Donated	services and use of facilities		b1	-	↓ ¦		
2		ar adjustments reported on Part I, line 20		b2	,			
3		reported on Part I, line 20		b3		.		
4	Other (s	pecify): Donated Food	• • • • • • • • • • • • • • • • • • • •					
				b4	77,723			
	Add line	s b1 through b4				b		77,723
C	Subtrac	t line b from line a				С		828,813
d	Amount	s included on Part I, line 17, but not on li	ne a:					
1	Investm	ent expenses not included on Part I, line	6b	d1				
2	Other (s	pecify):						
				d2				
_		es d1 and d2			_	d		030 043
Pa	rt V-A	Current Officers, Directors, Trustees				e 20.0	fficer	director trustee
		or key employee at any time during the ye						director, irastee
		(A) Name and address	(B)	(C) Compensation	(D) Contribu			(E) Expense account
		(A) Name and address	Title and average hours per week devoted to position	(If not paid, enter -0)		ans & def: rsation pla		and other allowances
Illi	a Moore		Executive Director,					
281	07 Bransfo	rd Ave, Suite C, Nashville, TN 37204	40hrs	\$50,560		\$	1,942	0
	meron Dral		Director of Finance.					İ
28	07 Bransfo	rd Ave, Suite C, Nashville, TN 37204	40 hrs	\$40,521		\$	1,080	0
	roline Crac		Development Director,					
28	07 Bransfo	rd Ave, Suite C, Nashville, TN 37204	30 hrs	16,558			0	0
			-					
	. 1:-4 -67	t - C D't		 				
26	e List of Bo	pard of Directors - attached	-					
							_	
		•••••	-		}			
_				1				
			1					
				<u> </u>	<u> </u>			
					1			
					<u> </u>			
					1			

Part	V-A Current Officers, Directors, Trustees, a	nd Key Employee	es (continued)			Yes	No
	Enter the total number of officers, directors, and trustemeetings	•	•	business at board			
	b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)						✓
	Do any officers, directors, trustees, or key employmensated employees listed in Schedule A, Par independent contractors listed in Schedule A, Par organizations, whether tax exempt or taxable, that at the definition of "related organization.". If "Yes," attach a statement that includes the information.	rt I, or highest contilled or II-B, received related to the or	mpensated proferive compensations and compensations See	essional and other on from any other the instructions for	75c		✓
d Pari	V-B Former Officers, Directors, Trustees, and Key officer, director, trustee, or key employee receiv person below and enter the amount of compens	y Employees That Rived compensation or	Received Compendent other benefits (de	sation or Other Bene escribed below) during	the ye	ear, lis	
) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E)	Expen	other
					_		
			_				
			_				
Par	t VI Other Information (See the instructions.))				Yes	No
76	Did the organization make a change in its activities detailed statement of each change				76		1
77	Were any changes made in the organizing or govern If "Yes," attach a conformed copy of the changes.				77	-	1
7 8a	Did the organization have unrelated business gross this return?				78a		1
b	If "Yes," has it filed a tax return on Form 990-T for				78b		<u> </u>
79	Was there a liquidation, dissolution, termination, or a statement				79		1
	Is the organization related (other than by association common membership, governing bodies, trustees organization?	s, officers, etc., to	any other exe	empt or nonexempt	80a	-	✓
b	If "Yes," enter the name of the organization ▶						
	Enter direct and indirect political expenditures. (See Did the organization file Form 1120-POL for this ye	e line 81 instruction	s.) <u>[81a</u>		81b	-	/

	NO CONTRACTOR OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY	1	1	
Par	t VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	1	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)			
	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	1	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	- ✓-	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
D	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		1.0	
С	Dues, assessments, and similar amounts from members			
d	Section 162(e) lobbying and political expenditures		I	12.
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			
	Taxable amount of lobbying and political expenditures (line 35d less 85e)		İ	
	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
_	· · · · · · · · · · · · · · · · · · ·			
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a			
b	Gross receipts, included on line 12, for public use of club facilities 86b			
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	1.42 1.	.15	
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a		✓
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b		1
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0; section 4915 ▶ 0.			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		1
С	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 •0	-		
لم	Enter: Amount of tax on line 89c, above, reimbursed by the organization			1
	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	-	1
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	-	V
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings		-	
-00	at any time during the year?			<u> </u>
90a	List the states with which a copy of this return is filed ▶ Tennessee	- • • • • •	• • • • • •	•••••
	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)			108
91a	The books are in care of ▶ Illia Moore Telephone no. ▶ (615)		85-70	b7
	Located at ► 2807 Bransford Ave., Suite C, Nashville, TN ZIP + 4 ►	204		
t	At any time during the calendar year, did the organization have an interest in or a signature or other authority		Yes	No
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		+-	1
	account)?	_		· V
	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.			

	Form	990	(2006)	
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Part	VI Other Information (continued)					Yes No
	At any time during the calendar year, did the of the office of the foreign country	/ ▶				
	Section 4947(a)(1) nonexempt charitable trusts and enter the amount of tax-exempt interest re	eceived or accru	ed during the	tax year	here ▶ 92	▶□
Part	VII Analysis of Income-Producing Act	ivities (See the	instructions.)		
Note:	Enter gross amounts unless otherwise	Unrelated b	usiness income	Excluded by sect	ion 512, 513, er 514	(E)
indica	-	(A)	(B)	(C)	(D)	Related or exempt function
93	Program service revenue:	Business code	Amount	Exclusion code	Amount	income
а	Registration Fees					62,417
b						
۲, C				1		
d		_		- 		
e	Nondiana (Nondiania)			1		
f	Medicare/Medicaid payments		 	+		689,687
9	Fees and contracts from government agencies	·	 			003,007
94	Membership dues and assessments			14	3,215	
95	Interest on savings and temporary cash investments	§ 	-	14	3,213	
96	Dividends and interest from securities		1		- ""	
97	Net rental income or (loss) from real estate:		 			
а	debt-financed property		<u> </u>		_	
b	not debt-financed property					
98	Net rental income or (loss) from personal property		ļ			-
99	Other investment income		-		···	
100	Gain or (loss) from sales of assets other than inventory	/				
101	Net income or (loss) from special events .		ļ			
102	Gross profit or (loss) from sales of inventory					
103	Other revenue: a					
b	;	_				<u></u>
С						
d		_ [<u> </u>			
е					,	
104	Subtotal (add columns (B), (D), and (E)) .				3,215	752,104
105	Total (add line 104, columns (B), (D), and (E)) <i></i>			. •	755,319
Note:	Line 105 plus line 1e, Part I, should equal the	amount on line	12, Part I.			
Part	VIII Relationship of Activities to the Ac	complishment	of Exempt Pu	rposes (See th	ne instructions.)	
Line	No. Explain how each activity for which incom	ne is reported in c	olumn (E) of Part	VII contributed		
			_ 	cii pui posesj.		
93				41-1 :-		
93	g Grant funds from Metro Nashville & Davidsor	i county to provid	e artercare servi	ce to children ir	public schools	
	IV Information Deposition Toyoble Cub	aidianiaa and D	ionogod En	tition /Con the	instructions)	
Par	Information Regarding Taxable Sub (A)	(B)				(E)
	Name, address, and EIN of corporation,	Percentage of wnership interest	(C Nature of		(D) Total income	(E) End-of-year assets
N/A		%				
		%			<u> </u>	
		%				
		%				
Par	Information Regarding Transfers Ass	ociated with Per	sonal Benefit (Contracts (See	the instructions.)	
(a) (b)	Did the organization, during the year, receive any funds, Did the organization, during the year, pay pro	emiums, directly	or indirectly, o			☐ Yes ☑ No ☐ Yes ☑ No
No	te: If "Yes" to (b), file Form 8870 and Form 4	720 (see instruct	ions).			

Part	Information Regarding is a controlling organizati			plete only if the organization
106	Did the reporting organization mathe Code? If "Yes," complete the	ake any transfers to a cont	rolled entity as defined in sec	Yes No (13) of (13)
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
а		-		
b		•		
С		-		
	Totals			
107	Did the reporting organization re 512(b)(13) of the Code? If "Yes,"			
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a		-		
b				
С				
	Totals			
108	Did the organization have a bind rents, royalties, and annuities de	escribed in question 107 ab	ove?	Yes No ring the interest.
Plea Sign Here	and belief, it is true, courect, and compared in the state of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer and signature of officer a	Exective Dic	than officer) is based on all informat	tements, and to the best of my knowledge ion of which preparer has any knowledge
Paid Prepa	FIGURE 10/ YOURS & Informace	n Financial Resources, Inc.	Date Check if self-employed >	Preparer's SSN or PTIN (See Gen. Inst. X)
Use C	JBIV if self-employed).	ding Trans Co., Nastiv Ne, Til	EIN Phon	ne no. ► (U 5.
				Form QQD #2006

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)
(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

2006

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Project For Neighborhood Aftercare, Inc.			62	1710735
Part I Compensation of the Five High (See page 2 of the instructions. I	est Paid Employees Of ist each one. If there ar	ther Than Offic e none, enter "I	ers, Directors, None.")	and Trustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans deterred compensation	
None				
Total number of other employees paid over \$50,000 .				
Part II-A Compensation of the Five High (See page 2 of the instructions. Lis				
(a) Name and address of each independent contractor	r paid more than \$50,000	(b) Type	of service	(c) Compensation
None				
Total number of others receiving over \$50,000 for professional services	•	, 148 ii.	141 <u></u>	
Part II-B Compensation of the Five High (List each contractor who perform firms. If there are none, enter "No	med services other than	professional ser		
(a) Name and address of each independent contract	or paid more than \$50,000	(b) Typ	e of service	(c) Compensation
None		_		
		-		
		-		
		-		
		-		
Total number of other contractors receiving over \$50,000 for other services	•			

Par	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$\Bigsim \mathbb{\text{S}} = \frac{\text{(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)}}	_1		✓_
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	-		Ev Santa Latin
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
а	Sale, exchange, or leasing of property?	2a		✓
b	Lending of money or other extension of credit?	2b		1
С	Furnishing of goods, services, or facilities?	2c		1
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		1
е	Transfer of any part of its income or assets?	2e		√
3а	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a		1
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		1
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		/
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		1
	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a 4b		1
С	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		1
d	Enter the total number of donor advised funds owned at the end of the tax year			0
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			0
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			0
ç	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year			0

Par	't IV	Reason for Non-Private	Foundation S	tatus (See pages 4 t	through 7 of	the instruct	ions.)		
l cer	tify t	hat the organization is not a private	e foundation beca	ause it is: (Please check	only ONE app	licable box.)			
5		A church, convention of churches,	or association of	f churches. Section 170((b)(1)(A)(i).				
6		A school. Section 170(b)(1)(A)(ii). (A	Also complete Pa	rt V.)					
7		A hospital or a cooperative hospital	al service organiz	ation. Section 170(b)(1)(/	A) (iii).				
8		A federal, state, or local governme	ent or governmen	tal unit. Section 170(b)(1)(A)(v).				
9		A medical research organization op and state ▶							
10		An organization operated for the be (Also complete the Support Sched		or university owned or op	erated by a go	vernmental uni	it. Section 170(b)(1)(A)(iv)		
11a	V	An organization that normally receit 170(b)(1)(A)(vi). (Also complete the			governmental	unit or from th	e general public. Section		
11b		A community trust. Section 170(b)	(1)(A)(vi). (Also co	mplete the Support Sch	nedule in Part	IV-A.)			
12	An organization that normally receives: (1) more than 33%% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33%% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)								
13									
		Provide the following infor	mation about th	e supported organizati	ions. (See pag	e 7 of the inst	ructions.)		
Provide the following information about the supported organizations. (See page 7 of the in (a) (b) (c) (d) Name(s) of supported organization(s) Employer identification number (EIN) (Described in lines 5 through 12 above or IRC section) (See page 7 of the in (a) (b) (c) (d) Employer identification organization organization is the supporting organization's governing documents's contact the supported organization organization is the supporting organization's governing documents's governing documents's contact the supported organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organizati					upported on listed in opporting ration's	(e) Amount of support			
					Yes	No			
_		· · · · · · · · · · · · · · · · · · ·							
Tota	al.					<u>.</u> ≻			
		An experientian experient and and	needed to took for	s public actata Castina (E00(a)(4) (0 c =	nego 7 of N-	innam rational V		
<u> 14</u>	<u> </u>	An organization organized and or	perated to test to	public salety. Section :	509(a)(4). (5ee	page / or the	instructions.)		

	IV-A Support Schedule (Complete only You may use the worksheet in the instructions					
Caler	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15	Gifts, grants, and contributions received. (Do					
	not include unusual grants. See line 28.).	719,359	657,435	775,667	686,20	2,838,667
16	Membership fees received	33,769	23,092	21,740	9,86	
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	550	1,000		•	1,550
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired					
19	by the organization after June 30, 1975 . Net income from unrelated business	2,416	1,483	1,110	1,4	72 6,481
	activities not included in line 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22	Other income. Attach a schedule. Do not					
	include gain or (loss) from sale of capital assets					3 3
23	Total of lines 15 through 22	756,094	683,010		697,5	
24	Line 23 minus line 17	755,544	682,010	+		
25_	Enter 1% of line 23	7,561	6,830	7,985	6,9	
26	Organizations described on lines 10 or 11:	a Enter 2% of	amount in colun	nn (e), line 24	> 2	6a 58,672
b	Prepare a list for your records to show the na governmental unit or publicly supported organ amount shown in line 26a. Do not file this list w	zation) whose tot	al gifts for 2002 t	through 2005 exce	eded the	6ь 0
	Total support for section 509(a)(1) test: Enter I				▶ 2	6c 2,933,617
d	Add: Amounts from column (e) for lines: 18 22	6,481	19 26b	<u> </u>	2	6d 6,484
е	Public support (line 26c minus line 26d total)					6e 2,927,133
f	Public support percentage (line 26e (numer	ator) divided by	line 26c (denom	ninator))	▶ 2	26f 99.78 %
27	Organizations described on line 12: a F person," prepare a list for your records to show Do not file this list with your return. Enter the	the name of, and ne sum of such a	total amounts re mounts for each	eceived in each ye year:	ar from, each '	'disqualified person."
b	(2005) (2004)	eived from each pe n year, that was mo s 5 through 11b, as d the larger amour	erson (other than fore than the larger well as individuals in (1)	disqualified persor r of (1) the amount s.) Do not file this I or (2), enter the s	ns"), prepare a on line 25 for t ist with your re sum of these d	list for your records to the year or (2) \$5,000. eturn. After computing lifferences (the excess
	(2005) (2004)				(2002)	
С	Add: Amounts from column (e) for lines: 15		21			27c
d					▶ 🖆	27d
e	Public support (line 27c total minus line 27d					27e
f	Total support for section 509(a)(2) test: Enter	amount from line	23, column (e) .	. ► 27f		i.e
g	Public support percentage (line 27e (nume	rator) divided by	line 27f (denom	ninator))	▶ 🛂	27g %
<u>h</u>		lumn (e) (numera	ator) divided by	line 27f (denomi	nator)). ►	27h%
28	Unusual Grants: For an organization descrit prepare a list for your records to show, for edescription of the nature of the grant. Do not	each year, the nar	me of the contrib	outor, the date an	d amount of	the grant, and a brief

Par	Private School Questionnaire (See page 9 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)			- 3
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,	29	Yes	No
30	other governing instrument, or in a resolution of its governing bcdy?	29	-	
	brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
а	and the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second o	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	33a		-
b	Admissions policies?	33ь		-
С	Employment of faculty or administrative staff?	33c	<u> </u>	+
d	Scholarships or other financial assistance?	33d	-	-
е	Educational policies?	33e		-
f	Use of facilities?	33f	-	
g	Athletic programs?	33g		-
h	Other extracurricular activities?	33h	-	-
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
			}	
		ł		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		-
t	Has the organization's right to such aid ever been revoked or suspended?	34b	,	-
25	If you answered "Yes" to either 34a or b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05			
35	of Rev. Proc. 75-50, 1975-2 C.R. 587, covering racial pondiscrimination? If "No." attach an explanation	35		

Par	VI-A Lobbying Expenditures by Ele (To be completed ONLY by an					instructions.))
Check	x ▶ a ☐ if the organization belongs to an affiliat					"limited control"	provisions apply.
	Limits on Lobbyin	•				(a) Affiliated group totals	(b) To be completed for all electing organizations
 36			·····	3	6		3
30 37	Total lobbying expenditures to influence public opinion (grassroots lobbying)						
38	Total lobbying expenditures (add lines 36 and 37)						
39	Other exempt purpose expenditures			ء ا	9		
40	Total exempt purpose expenditures (add lines 3						
41	Lobbying nontaxable amount. Enter the amount						
		bbying nontaxat					
	Not over \$500,000 20% o				-]
-	Over \$500,000 but not over \$1,000,000 \$100,00	-			11		
	Over \$1,000,000 but not over \$1,500,000 . \$175,0 Over \$1,500,000 but not over \$17,000,000 . \$225,0			,,,,,,			
		,000		1 1	l		
42	Grassroots nontaxable amount (enter 25% of lin	•		1	12		
43	Subtract line 42 from line 36. Enter -0- if line 42	is more than lin	e 36	4	13	-	
44	Subtract line 41 from line 38. Enter -0- if line 41	I is more than lin	e 38		14		
	Caution: If there is an amount on either line 43	or line 44, you m	nust file Form 47	20.			
	4-Year Ave	eraging Period			f the	five columns h	elow
	See the instructions for	or lines 45 throug	h 50 on page 1	3 of the instru	ction	ns.)	
		Lobi	bying Expenditu	ures During 4	-Ye	ar Averaging P	eriod
	Calendar year (or	(a)	(b)	(c)	ı	(d)	(e)
	fiscal year beginning in) ▶	2006	2005	2004		2003	Total
45	Lobbying nontaxable amount	4 - 10					
46	Lobbying ceiling amount (150% of line 45(e))	C = 1				_	
47	Total lobbying expenditures			_			
48	Grassroots nontaxable amount	N. 14 a	ren .				
49	Grassroots ceiling amount (150% of line 48(e))	日 8 日本 1 年 日 1 日本 1 日本 1 日本 1 日本 1 日本 1 日本 1 日本 1	# 1				ļ
50	Grassroots lobbying expenditures						
_	Lobbying Activity by Nonelection (For reporting only by organization)	cting Public C	harities not complete	Part VI-A) (See	page 13 of t	he instructions.)
Duri	ing the year, did the organization attempt to influ						
atte	mpt to influence public opinion on a legislative r	matter or referend	lum, through the	use of:		100 110	
а	Volunteers					- 🗸	4
b	•						
С					•		
d	• •					· ·	
e	- · · · · · · · · · · · · · · · · · · ·					- 2	
f	Di i i i i i i i i i i i i i i i i i i						
g h							
i	Total lobbying expenditures (Add lines c throu	gh h.)				L	
_	If "Yes" to any of the above, also attach a sta	tement giving a c	letailed descript	ion of the lobb	oying	g activities.	

Par	t VII		n Regarding Tra ganizations (See	ansfers To and Transace page 13 of the instruction	ctions and	Relationships	With	Noncha	aritable
51		the reporting organ	nization directly or i	ndirectly engage in any of the (c)(3) organizations) or in section	following with				n section
а	Trar (i)		orting organization t	o a noncharitable exempt orga	nization of:		_		es No
b	(i)			noncharitable exempt organiza			-	b(i)	<u> </u>
	(iii)	Rental of facilities	, equipment, or other	able exempt organization			. –	b(ii) b(iii) b(iv)	1
	(v)	Loans or loan gua	arantees	hip or fundraising solicitations			. [b(v) b(vi)	√
	If th	e answer to any of ds, other assets, o	the above is "Yes," r services given by	ts, other assets, or paid emplo complete the following schedule the reporting organization. If to column (d) the value of the good	. Column (b) sh he organization	received less than	he fair n		
	9)	(b)		(c)		(d)			
Line	no.	Amount involved	Name of nonci	naritable exempt organization	Description of	transfers, transactions	s, and sha	ring arrang	gements
		-							
	des	cribed in section 5		affiliated with, or related to, on the than section 501(c)(3)) or :		• -] Yes	☑ No
		(a) Name of organi	zation	(b) Type of organization	:	(c) Description of re	lationship		
_									
_						9-2-87-61			
_									
					-				
									· · · · · · · · · · · · · · · · · · ·
_			· ·						

FEDERAL STATEMENTS FOR 6/30/2007- #990 PROJECT FOR NEIGHBORHOOD AFTERCARE EIN: #62-1710735

STATEMENT 1 - Form 990, Part 11, Line 43 - Other Functional Expenses

Description	Total Expenses	Program <u>Services</u>	Mgt. & General	Fund- <u>Raising</u>
Marketing \$	775	305	97	373
Bank Charges	800	13	787	
Dues & Subscriptions	1,603	1,011	592	
Employee Screening	508	508		
Equipment (non-capital)	1,179	940	239	
Field Trips	4,400	4,400		
Food	9,175	9,175		
Unrecoverable expense	16.791		16,791	
Incentives/Awards	12,831	12,831		
Insurance	24,651	23,946	470	235
Licenses & Permits	38		38	
Miscellaneous	666	112	554	
Penalties & Interest	2,850		2,850	
Professional Fees	4,250		2,125	2,125
Bus Lease	17,100	17,100		
Special Events	3,180	3,180		
Staff Training	4,444	4,279	70	95
Storage	708	354	354	
Community Service	848	848		
Meals & Entertainment	538		538	
Total \$	107,335	79,002	25,505	2,828

STATEMENT 2 - Form 990, Part III-Stmt of Program Service Accomplishments

To develop a partnership of students, teachers, grandparents, and others in making schools' neighborhood centers for a community of learning. Approx. 1,100 students were served in fiscal year end June 30, 2007.

STATEMENT 3-Form 990, Part IV, Line 57-Land Buildings and Equipment Cost Accum Book

- · · ·	<u>\$37,622</u>	\$28,149	<u>\$ 9,473</u>
Computer Equipment	33,018	24,464	8,554
Office Equipment & Furniture	\$ 4,604	\$3,685	\$ 919
	<u>Basis</u>	Deprec.	<u>Value</u>
	Cost	Accum.	BOOK