Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency
specifications. When using Acrobat 5.x products, uncheck the "Shrink oversized pages to paper size" and
uncheck the "Expand small pages to paper size" options, in the Adobe "Print" dialog. When using Acrobat
6.x and later products versions, select "None" in the "Page Scaling" selection box in the Adobe "Print" dialog.
PUBLIC DISCLOSURE COPY

# \*\* PUBLIC DISCLOSURE COPY \*\*

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)

Open to Public Inspection

OMB No. 1545-0047

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

_	Ear tha	$20$ 12 calendar year, or tax year beginning $\mathrm{JUL}1,2012$	JUN 30, 2013	
В	Check if applicable:	C Name of organization	D Employer identifi	cation number
7.7	Address	NACIULLE DEEDADAMODY CHADMED COHOOL		
	⊾_change □Name			240540
누	change □Initial	Doing Business As		342540
L	return		uite <b>E</b> Telephone numbe	
Ļ	Termin- ated	1500 SOIN AVENUE NORTH	615-	921-8440
L	Amende return	City, town, or post office, state, and ZIP code	<b>G</b> Gross receipts \$	2,362,580.
	Applica	NASHVILLE, IN 37209	H(a) Is this a group re	eturn
	pending	F Name and address of principal officer:RAVI GUPTA	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates inc	luded? Yes No
Τ.	Tax-exe	mpt status: X 501(c)(3)	<del></del>	list. (see instructions)
		WWW.NASHVILLEPREP.ORG	H(c) Group exemptio	
			ear of formation: 2010	
		Summary		
_		Briefly describe the organization's mission or most significant activities: TO SERVE	EDUCATIONALL	Υ
Activities & Governance	' テ	JNDERSERVED STUDENTS TO PREPARE THEM SUCCESS	FILLY FOR COL	LEGE.
nar	_			
Ver		Check this box Lift the organization discontinued its operations or disposed of r	_	12
Ĝ	1		3	12
જ		Number of independent voting members of the governing body (Part VI, line 1b)		22
ijes		otal number of individuals employed in calendar year 2012 (Part V, line 2a)		
፷		otal number of volunteers (estimate if necessary)		10
Act	7a ⊺	otal unrelated business revenue from Part VIII, column (C), line 12		0.
	bΝ	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
			Prior Year	Current Year
<u>e</u>	8 0	Contributions and grants (Part VIII, line 1h)	1,407,279.	2,356,201.
enc	9 F	Program service revenue (Part VIII, line 2g)	3,949.	6,363.
Revenue	10 li	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	666.	16.
ш	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-896.	0.
	1	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,410,998.	2,362,580.
	-	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
ý		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	654,736.	1,130,779.
JSe		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
Expenses		otal fundraising expenses (Part IX, column (D), line 25) 8,981.		-
Ж		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	660,317.	954,651.
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,315,053.	
	1		95,945.	277,150.
<u>_ S</u>		Revenue less expenses. Subtract line 18 from line 12	Beginning of Current Year	
Net Assets or Fund Balances	00 7	Tabel accepts (Doub V. Burs 4.0)	362,977.	End of Year 884,637.
Asse Bala	20 T	otal assets (Part X, line 16)	35,287.	279,797.
let /	21 T	otal liabilities (Part X, line 26)	327,690.	604,840.
	22   N art	Net assets or fund balances. Subtract line 21 from line 20	321,090.	004,040.
				. Lancard and a second back of the factor
		ties of perjury, I declare that I have examined this return, including accompanying schedules and sta		y knowledge and belief, it is
true	, correct,	, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer nas any knowledge.	
		Signature of officer	I Date	
Sig	n	•	Date	
Hei	e	RAVI GUPTA, EXECUTIVE DIRECTOR		
		Type or print name and title	I Doto	I DTIN
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Pai	-	TODD JONES TODD JONES	01/31/14 if self-employ	P00362611
Pre		Firm's name ▶ CARR, RIGGS & INGRAM, LLC	Firm's EIN ▶	72-1396621
Use	Only	Firm's address 3011 ARMORY DRIVE, SUITE 190		
_		NASHVILLE, TN 37204	Phone no. (	615) 665-1811
Ma	v the IR	S discuss this return with the preparer shown above? (see instructions)	•	X Yes No

·C	(Code:	) (Expenses \$	including grants of \$	

) (Revenue \$

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

Total program service expenses ▶

(Expenses \$ including grants of \$

1,495,923.

# Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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 I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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 II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
_	as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a	Х	
b	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	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in		37	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446	Х	
100	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>	11f		
ıza	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	44.		. v
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	10		<u> </u>
.0	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			<del></del>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20</b> b		

# Form 990 (2012) NASHVILLE PREPARAT Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	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	22		X
23	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	23		X
24a	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			v
	Schedule K. If "No", go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	0.4		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	25a		х
h	disqualified person during the year? If "Yes," complete Schedule L, Part I  Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		21
ь	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schodulo I Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	200		
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			37
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			Х
22	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		21
J <del>-1</del>	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
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, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form **990** (2012)

# Form 990 (2012) NASHVILLE PREPARATORY CHARTER SO Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 19			
b				
С				
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 22			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		Х
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	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)?	4a		Х
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	, , , , , , , , , , , , , , , , , , , ,	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5с		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			ĺ
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			v
а		7a		X
b	, , , , , , , , , , , , , , , , , , , ,	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7-		х
	to file Form 8282?  If "Yes." indicate the number of Forms 8282 filed during the year  7d	7c		
d e		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 <del>f</del>		X
g		7g		<del></del> -
h		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
		9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans  The whole accounts of vector and lead to the second seco			
	Enter the amount of reserves on hand  Did the ergonization receive any payments for indeed tapping convices during the tay year?	14-		Х
	Did the organization receive any payments for indoor tanning services during the tax year?  If "Vos." has it filed a Form 790 to report these payments? If "No." provide an explanation in Schedule O.	14a		
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

27-3342540

Page 6

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

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
	<del> </del>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 12			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct 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 governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	401		
44.	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	Х	
	Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14		Х
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		Х
	Other officers or key employees of the organization	15b		Х
	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		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	ıvailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
40	Own website Another's website X Upon request Other (explain in Schedule O)	-1 <i>e</i> :		
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	ז נוnan	icial	
20	statements available to the public during the tax year.  State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion: 🕨		
20	CFO BUSINESS STRATEGIES, INC 615-591-1381	IOII.		

7107 CROSSROADS BLVD, SUITE 103, BRENTWOOD, TN

37027

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

Check if Schedule O contains a response to any question in this Part VII

#### 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.
- 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, if any. See instructions for definition of "key employee."
- 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.

Color	(A)	(B)			_ ((	C)			(D)	(E)	(F)
Week (list any hours for related organizations below line)	Name and Title	_	(do	not c	Pos heck	ntior more	<b>)</b> than	one	•		
Company   Comp									1	·	
C1			tor								
C1			rdirec				pa			_	
C1			stee or	nstee			ensat		(W-2/1099-MISC)		organization
C1			al trus	onal tr		loyee	comp				
C1			dividu	stitutio	fficer	sy emp	ghest	rmer			organizations
CHAIR	(1) JOHN SPRAGENS	,	드	드	0	<u>~</u>	王占	요			
C(2) NEELY WILLIAMS		2,30	$\mathbf{x}$						0.	0.	0.
VICE CHAIR		2.50	1							•	•
Columbde   Columbde	VICE CHAIR		$\mathbf{x}$						0.	0.	0.
CAYSTAL BRADFORD   2.50	(3) BOB BERSTEIN	2.50									
PARENT BOARD MEMBER	BOARD MEMBER		x						0.	0.	0.
Source   S	(4) CRYSTAL BRADFORD	2.50									
BOARD MEMBER	PARENT BOARD MEMBER		X						0.	0.	0.
Color   Colo	(5) HAL CATO	2.50									
BOARD MEMBER			Х						0.	0.	0.
Column	(6) CHRIS SLOAN	2.50							_	_	_
BOARD MEMBER			X						0.	0.	0.
RON CORBIN   2.50		2.50	l								
BOARD MEMBER   X			X						0.	0.	0.
Source   S		2.50	١								•
BOARD MEMBER         X         0.         0.         0           (10) BRENTON HARRISON         2.50         0.         0.         0           BOARD MEMBER         X         0.         0.         0           (11) WENDY THOMPSON         2.50         0.         0.         0           BOARD MEMBER         X         0.         0.         0           (12) VINCE DURNAN         2.50         0.         0.         0           BOARD MEMBER         X         0.         0.         0           (13) RAVI GUPTA         80.00         0.         0         0		0.50	X						0.	0.	0.
Columbia   Columbia		2.50	١								_
BOARD MEMBER         X         0.         0.         0           (11) WENDY THOMPSON         2.50         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.           (12) VINCE DURNAN         2.50         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.           (13) RAVI GUPTA         80.00         0.         0.         0.		2.50	X	-					0.	0.	0.
Column   C		2.50	<b>↓</b>							0	_
BOARD MEMBER         X         0.         0.         0.           (12) VINCE DURNAN         2.50         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.           (13) RAVI GUPTA         80.00         0.         0.         0.		2.50	<u> </u>						0.	0.	0.
(12) VINCE DURNAN         2.50           BOARD MEMBER         X         0.         0.         0           (13) RAVI GUPTA         80.00         0         0         0		2.50	₩.							0	0.
BOARD MEMBER         X         0.         0.         0           (13) RAVI GUPTA         80.00         <		2.50	<u> </u>						0.	0.	0.
(13) RAVI GUPTA 80.00		2.50	\v						0	0	0.
		80.00	1				<u> </u>			•	•
		0000	1		x				85.473.	0.	19.098.
									03/1/30	•	13,030.
			1								
			T								
			1								
			L	L		L	L				

232007 12-10-12 Form **990** (2012)

									ER SCHOOL	27-3	342	540	Pa	age <b>8</b>
Pai	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ghe	st C	Compensated Employe	es (continued)				
	(A)	(B)			(0	C)			(D)	(E)			(F)	
	Name and title	Average	(do	not c	Pos heck	ition more	l than	one	Reportable	Reportable	,	Es	timate	ed
		hours per	box	, unle	ss pe	rson i	is bot or/trus	h an	compensation	compensation			ount	of
		week (list any	<b>—</b>	J				1	from	from related			other	tion
		hours for	lirect						the organization	organization (W-2/1099-MI			pensa om th	
		related	e or 0	stee			ısatec		(W-2/1099-MISC)	(** 2/ 1033 1411	50)		anizat	
		organizations	truste	al tru		yee	nd m c		(** = *********************************			_	d relat	
		below	Individual trustee or director	Institutional trustee	eL	Key employee	Highest compensated employee	Jer				orga	ınizati	ons
		line)	Indi	Insti	Officer	Key	High	Former						
			ł											
			ł											
			ł											
			1											
			1											
			1											
							<u> </u>		05 452			1		
	Sub-total								85,473.		0.	1	9,0	
	Total from continuation sheets to Part V								85,473.		0.	1	9,0	0
	Total (add lines 1b and 1c)									000 - 1		Т.	9,0	90
2	Total number of individuals (including but r	not limited to tr	iose	IISTE	ea ai	DOVE	e) wr	no r	eceived more than \$100	,uuu of reportab	ie			(
	compensation from the organization											T	Yes	No
3	Did the organization list any <b>former</b> officer,	director or tri	ısta	s ke	av er	mnlo	WAA	or	highest compensated e	mnlovee on	ľ			
Ū	line 1a? If "Yes," complete Schedule J for s											3		Х
4	For any individual listed on line 1a, is the si													
	and related organizations greater than \$15	-		-						<b>3-</b>		4		Х
5	Did any person listed on line 1a receive or									idual for services	;			
	rendered to the organization? If "Yes," con	nplete Schedul	e J f	or s	uch	pers	son .					5		Х
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co	mpensated in	depe	ende	ent c	ontr	racto	ors t	that received more than	\$100,000 of con	npens	ation f	rom	
	the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	rithir	n the organization's tax	year.				
	(A)		37/	~***	_				(B)			(C		_
	Name and business	address	М	INC	<u> </u>			_	Description of s	services		omper	isatio	[]
								$\dashv$						
								$\dashv$						
2	Total number of independent contractors (	including but r	ot li	mite	d to	tho	se lis	stec	d above) who received n	nore than				
	\$100,000 of compensation from the organi	zation >				(	0							

		<u> </u>		PARATORY	CHARTER S	CHOOL	27-3342	2540 Page 9
Pa	rt VII	Statement of Rever	nue					
		Check if Schedule O cont	ains a response	to any question	in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	b c d e f 2 a b c d e f	Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abor Noncash contributions included in lines Total. Add lines 1a-1f STUDENT MEALS	ts, and ve If EXCLUD	Business Code 611110	2,356,201. 6,363. 6,363.	6,363.		
Other Revenue	3 4 5 6 a b c d 7 a b c d 8 a b c c d 8 a b c c d 8 a b c c d 0 c d o d o d o d o d o d o d o a d o c d o a d o c o d o d o a d o a d o a d o a d o a d o a d o a d o a d o a d o a d o a d o a d o a d o a d o a a d o a a d o a a a a	Investment income (including other similar amounts)	dividends, interest.  x-exempt bond p  (i) Real  (i) Securities  (i) Securities  g events (not of 1c). See  a b draising events stivities. See  a b draising activities returns  a c b s of inventory e	est, and proceeds (ii) Personal (ii) Other	16.			16.
	11 a b c							

d All other revenue

Total revenue. See instructions.

e Total. Add lines 11a-11d

0.

6,363.

2,362,580.

# Form 990 (2012) NASHVILLE PRE Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	mplete column (A).						
	Check if Schedule O contains a response to any question in this Part IX									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses					
1	Grants and other assistance to governments and		·		·					
	organizations in the United States. See Part IV, line 21									
2	Grants and other assistance to individuals in									
	the United States. See Part IV, line 22									
3	Grants and other assistance to governments,									
	organizations, and individuals outside the									
	United States. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,	101 500		101 500						
	trustees, and key employees	101,629.		101,629.						
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)	707 005	C 4 4 0 0 7	142 000						
7	Other salaries and wages	787,095.	644,087.	143,008.						
8	Pension plan accruals and contributions (include	75 027	E7 10E	10 740						
_	section 401(k) and 403(b) employer contributions)	75,937.	57,195.	18,742.						
9	Other employee benefits	94,052. 72,066.	75,078. 53,413.	18,974.						
10	Payroll taxes	12,000.	33,413.	10,033.						
11	Fees for services (non-employees):									
	Management									
b	•	90,523.		82,890.	7,633.					
_	Accounting	90,323.		02,090.	7,055					
d	Lobbying Professional fundraising services. See Part IV, line 17									
e f	Investment management fees									
g										
9	column (A) amount, list line 11g expenses on Sch 0.)	52,438.		52,438.						
12	Advertising and promotion	01 100	00.000	60.000						
13	Office expenses	81,128.	20,220.	60,908.						
14	Information technology	27,681.	6,688.	20,993.						
15	Royalties	224 214	170 271	44 042						
16	Occupancy	224,214.	179,371.	44,843.						
17	Travel	158,675.	158,675.							
18	Payments of travel or entertainment expenses	2 006	2 006							
	for any federal, state, or local public officials	3,906. 2,833.	3,906.	2,833.						
19	Conferences, conventions, and meetings	4,033.		4,033.						
20	Interest  Payments to offiliates									
21	Payments to affiliates	18,287.	14,326.	3,961.						
22 23		3,725.	2,761.	964.						
23 24	Other expenses. Itemize expenses not covered	3,723	2,701	2041						
27	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)									
а	SCHOOL NUTRITION	121,601.	121,601.							
b	INSTRUCTIONAL EXPENSES	112,519.	112,519.							
c	STAFF DEVELOPMENT	46,083.	46,083.							
d	STUDENT RECRUITMENT	8,199.	, ,	8,199.						
	All other expenses	2,839.		1,491.	1,348.					
25	Total functional expenses. Add lines 1 through 24e	2,085,430.	1,495,923.	580,526.	8,981.					
26	Joint costs. Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.									
	Check here if following SOP 98-2 (ASC 958-720)									
		·	·		Farm <b>QQ</b> (2012)					

# Form 990 (2012) Part X Balance Sheet

Pai	πX	Balance Sneet						
		Check if Schedule O contains a response to any	y question	n in this Part X				
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year	
	1	Cash - non-interest-bearing			251,454.	1	442,677.	
	2	Savings and temporary cash investments				2		
	3	Pledges and grants receivable, net			9,757.	3	0.	
	4	Accounts receivable, net			8,389.	4	52,967.	
	5	Loans and other receivables from current and for						
		trustees, key employees, and highest compensations						
		Part II of Schedule L				5		
	6	Loans and other receivables from other disquali						
		section 4958(f)(1)), persons described in section	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing					
		employers and sponsoring organizations of sec	tion 501(c	c)(9) voluntary				
		employees' beneficiary organizations (see instr).				6		
Assets	7	Notes and loans receivable, net			7			
Ass	8	Inventories for sale or use				8		
	9	B ::		22,617.	9	35,831.		
	10a	Land, buildings, and equipment: cost or other						
		basis. Complete Part VI of Schedule D	10a	312,020.				
	b	Less: accumulated depreciation	10b	28,147.	70,760.	10c	283,873.	
	11	Investments - publicly traded securities				11		
	12	Investments - other securities. See Part IV, line				12		
	13	Investments - program-related. See Part IV, line				13		
	14	Intangible assets			14			
	15	Other assets. See Part IV, line 11		0.	15	69,289.		
	16	Total assets. Add lines 1 through 15 (must equ	362,977.	16	884,637.			
	17	Accounts payable and accrued expenses	35,287.	17	279,797.			
	18	Grants payable				18		
	19	Deferred revenue				19		
	20	Tax-exempt bond liabilities				20		
es	21	Escrow or custodial account liability. Complete				21		
Liabilities	22	Loans and other payables to current and former	r officers,	directors, trustees,				
iab		key employees, highest compensated employee	es, and di	squalified persons.				
_		Complete Part II of Schedule L				22		
	23	Secured mortgages and notes payable to unrela	ated third	parties		23		
	24	Unsecured notes and loans payable to unrelate	d third pa	rties		24		
	25	Other liabilities (including federal income tax, pa	yables to	related third				
		parties, and other liabilities not included on lines	s 17-24). (	Complete Part X of				
		Schedule D			25 005	25	000 000	
	26	Total liabilities. Add lines 17 through 25			35,287.	26	279,797.	
		Organizations that follow SFAS 117 (ASC 958		here 🕨 🔼 and				
ses		complete lines 27 through 29, and lines 33 ar			227 600		604 940	
lan	27	Unrestricted net assets			327,690.	27	604,840.	
Ва	28	Temporarily restricted net assets				28		
pur	29					29		
Ę.		Organizations that do not follow SFAS 117 (A	SC 958),	check here				
o s		and complete lines 30 through 34.				00		
set	30	Capital stock or trust principal, or current funds				30		
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or ed				31		
Net	32	Retained earnings, endowment, accumulated in			327,690.	32	604,840.	
_	33	Total net assets or fund balances			362,977.	33	884,637.	
	34	Total liabilities and net assets/fund balances			304,311.	34	004,03/.	

Ра	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,36		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,08		
3	Revenue less expenses. Subtract line 2 from line 1	3			<del>50.</del>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	32	7,6	90.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	60	4,8	40.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X 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
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit			
	Act and OMB Circular A-133?		3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit			
	or guidite, explain why in Schodule O and describe any stone taken to undergo such guidite		26		

#### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(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

Name of the organization

NASHVILLE PREPARATORY CHARTER SCHOOL

Employer identification number 27 – 3342540

Part I	Reason	for Public Char	<b>ity Status</b> (All organiz	ations mu	st complet	e this part	:.) See inst	tructions.				
he orgar	nization is not a	private foundation	because it is: (For lines	1 through	11, check	only one b	ox.)					
1 📺	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E.)											
3	A scribor described in section 170(b) (1)(A)(ii). (Attach Scribed in section 170(b)(1)(A)(iii).  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
<u>ا</u> ا	•	•	operated in conjunction					/h\/ 1\/ A\/;;	i) Entort	the beenite	l'e nam	20
4 📖	city, and stat		operated in conjunction	WILLI A 1105	pital desci	indea iii <b>se</b>	Clion 170	וואאוו אמוי	i). Linter t	ine nospita	ıı 5 man	i <del>c</del> ,
5 🔲	•		benefit of a college or ur	niversity o	wned or or	perated by	a governi	mental uni	t describ	ed in		
<b>5</b>	•	(b)(1)(A)(iv). (Comple	•	involutely of	Wilca or of	ociated by	a govern	mornar am	1 4000110	00 111		
6			ent or governmental uni	t describe	d in <b>sectio</b>	n 170/h)/	IVAV <sub>V</sub> )					
7			eives a substantial part					or from the	general i	nublic desi	crihed i	ín
. —		<b>b)(1)(A)(vi).</b> (Comple		or its supp	ort nom a	governine	intal unit c	)	general	public desi	onbed i	''
8 🗌			ection 170(b)(1)(A)(vi).	(Complete	Part II \							
9 🗆			eives: (1) more than 33			rom contri	hutions n	nomborshi	n foos ar	nd aross ro	ocinto	from
<b>9</b>												
			nctions - subject to certa									
			axable income (less sect	uononia	x) Irom bu	Siriesses a	acquired b	ly trie orga	mzation	arter Jurie	30, 197	5.
40		<b>509(a)(2).</b> (Complete	·				500/ W	• `				
10	•		perated exclusively to te	•	•			•				
11 📖	•		perated exclusively for the						•			or
			ations described in secti		•		2). See <b>se</b> o	ction 509(	<b>a)(3).</b> Che	eck the box	k that	
			organization and compl									
	a	•	•	ype III - Fu	•	-		• • •		n-functiona		-
e 📖	By checking	this box, I certify tha	at the organization is not	controlled	I directly o	r indirectly	by one o	r more dis	qualified	persons ot	her tha	ın
	foundation m	anagers and other t	han one or more publicly	y supporte	d organiza	ations des	cribed in s	ection 509	9(a)(1) or	section 50	9(a)(2).	
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting of	rganization, check th	nis box									. Ш
g	Since August	t 17, 2006, has the c	organization accepted ar	ny gift or c	ontribution	from any	of the foll	owing per	sons?			
	(i) A perso	n who directly or ind	irectly controls, either al	one or tog	ether with	persons o	lescribed	in (ii) and (	iii) below,	,	Yes	No
	the gove	erning body of the si	upported organization?							11g(i)		
			n described in (i) above?									
			person described in (i) o									
h			about the supported or								<u> </u>	
				ga <u>-</u> a	(=).							
(i) Name	of cupported	/ii\ EINI	(III) Type of organization	(iv) Is the c	rganization	(v) Did voi	ı notify the	(vi) Is organizațio	the	(vii) Amoun	t of mo	notary
` '	ganization (m) 2.11 (m) 1.356 of organization (described on lines 1-9			sted in your			organizatio (i) organiz	on in col.	` '	oport	iciai y	
org			governing	document?	(i) of your	support?	U.S	.?	34)	Jport		
(see instructions))  Yes No Yes No Yes No												
									<del>                                     </del>			

 $\mbox{\sc LHA}$  For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

# 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4.						
	ction B. Total Support		•	•		•	
Cale	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	, ,	, ,	, ,		, ,	,,
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
_	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	<b>Total support.</b> Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instructi	ons)			12	
	First five years. If the Form 990 is for					L	
	organization, check this box and stor	-			•		
Sec	ction C. Computation of Publ						
14	Public support percentage for 2012 (	ine 6, column (f) d	ivided by line 11,	column (f))		14	%
	Public support percentage from 2011					15	%
	33 1/3% support test - 2012. If the o					nore, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization	1			
b	33 1/3% support test - 2011. If the						
	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes						
_	more, and if the organization meets the	-					
	organization meets the "facts-and-circ		•				
18	Private foundation. If the organization						
_				, ,,	,		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Se	qualify under the tests listed be ction A. Public Support	elow, please com	piete Part II.)				
_	endar year (or fiscal year beginning in)	(a) 2002	(b) 2000	(a) 2010	(4) 2011	(a) 2012	(f) Total
		(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(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 per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
	Public support (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
	ndar year (or fiscal year beginning in) ▶	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(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						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
	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, thi	d, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	zation,
	check this box and stop here						<b>&gt;</b>
Se	ction C. Computation of Publi	c Support Pe	ercentage				
15	Public support percentage for 2012 (li	ine 8, column (f) c	divided by line 13,	column (f))		15	%
16	Public support percentage from 2011	Schedule A, Part	t III, line 15			16	%
Se	ction D. Computation of Inves	tment Incom	ne Percentage				
17	Investment income percentage for 20	<b>12</b> (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
	Investment income percentage from 2					18	%
	33 1/3% support tests - 2012. If the						17 is not
	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2011. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						

#### \*\* PUBLIC DISCLOSURE COPY \*\*

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

**Employer identification number** 

**2012** 

NASHVILLE PREPARATORY CHARTER SCHOOL 27-3342540 Organization type (check one): Filers of Section: X 501(c)( 3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year. contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

### NASHVILLE PREPARATORY CHARTER SCHOOL

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 20,000.	Person X Payroll Oncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$15,722 <b>.</b>	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	* 109,572.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 233,730.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u>1,869,993</u> .	Person X Payroll

### NASHVILLE PREPARATORY CHARTER SCHOOL

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 85,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization | Employer identification number

### NASHVILLE PREPARATORY CHARTER SCHOOL

Part II	Noncash Property (see instructions). Use duplicate copies of Part II	if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 _ _	

Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Name of organization **Employer identification number** 

NASHVI	LLE PREPARATORY CHARTE	R SCHOOL		27-3342540				
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and th the total of exclusively religious, charitable, etc	idual contributions to section 501(c) le following line entry. For organization, contributions of \$1,000 or less for	n(7), (8), or (10) organiza ns completing Part III, ent the year. (Enter this information o	tions that total more than \$1,000 for the ter sonce.)  \$\sim \$\sum_{\text{once.}} \rightarrow \text{\$\sum_{\text{once.}}} \rig				
	Use duplicate copies of Part III if additiona	al space is needed.						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	scription of how gift is held				
		(e) Transfer of gift	:					
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of t	ransferor to transferee				
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	scription of how gift is held				
	(e) Transfer of gift							
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of t	ransferor to transferee				
-								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held				
-		(e) Transfer of gift	:					
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of t	ransferor to transferee				
-								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held				
-		(e) Transfer of gift	:					

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

### **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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

2012
Open to Public Inspection

Name of the organization

NASHVILLE PREPARATORY CHARTER SCHOOL

Employer identification number 27-3342540

Pa	rt I	Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
		organization answered "Yes" to Form 990, Part IV, line	e 6.	
			(a) Donor advised funds	(b) Funds and other accounts
1	Tota	number at end of year		
2		egate contributions to (during year)		
3		egate grants from (during year)		
4		egate value at end of year		
5		he organization inform all donors and donor advisors in v	writing that the assets held in donor advise	ed funds
		ne organization's property, subject to the organization's	_	
6		he organization inform all grantees, donors, and donor a		
•		naritable purposes and not for the benefit of the donor o		
Pa		Conservation Easements. Complete if the org		
1	Purn	ose(s) of conservation easements held by the organizati		
	- G. P	Preservation of land for public use (e.g., recreation or e	` <u> </u>	torically important land area
		Protection of natural habitat	Preservation of a certi	
		Preservation of open space	Troservation of a defin	nod motorio structuro
2	Com	plete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last
_		of the tax year.	ica conservation contribution in the form	or a consorvation casement on the last
	uuy .	ino tax your.		Held at the End of the Tax Year
а	Tota	number of conservation easements		
h		acreage restricted by conservation easements		
c		ber of conservation easements on a certified historic str		
d		ber of conservation easements included in (c) acquired a		
u		` ' '	•	"e   2d
3		l in the National Registerber of conservation easements modified, transferred, rel		
Ū	year		cased, extinguished, or terrimated by the	organization during the tax
4	•	ber of states where property subject to conservation ea	sement is located	
5		the organization have a written policy regarding the per		
J		tions, and enforcement of the conservation easements if		Yes No
6		and volunteer hours devoted to monitoring, inspecting,		
7		unt of expenses incurred in monitoring, inspecting, and		
8		each conservation easement reported on line 2(d) above		
Ü		section 170(h)(4)(B)(ii)?		
9		art XIII, describe how the organization reports conservati		
3		de, if applicable, the text of the footnote to the organization	-	
		ervation easements.	ion s inancial statements that describes t	the organization's accounting for
Pai		Organizations Maintaining Collections or	f Art. Historical Treasures, or Ot	ther Similar Assets.
		Complete if the organization answered "Yes" to Form		
	If the	organization elected, as permitted under SFAS 116 (AS		nent and balance sheet works of art
		rical treasures, or other similar assets held for public exh	•	-
		ext of the footnote to its financial statements that descri		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
b		organization elected, as permitted under SFAS 116 (AS		and halance sheet works of art, historical
		ures, or other similar assets held for public exhibition, ed	• • • • • • • • • • • • • • • • • • • •	
		ng to these items:	ducation, or research in fartherance of put	one service, provide the following amounts
		Revenues included in Form 990, Part VIII, line 1		<b>•</b> •
2	٠,	e organization received or held works of art, historical tre	acurae or other cimilar accets for financial	
_		ollowing amounts required to be reported under SFAS 1		gain, provide
_				<b>&gt;</b> \$
a h		nues included in Form 990, Part VIII, line 1ts included in Form 990, Part X		
IJ	M336	to included in Form 330, Fail A		ΨΨ

Are there endowment funds not in the possession of the organization that are held and administered for the organization За Yes by: No (i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b

Describe in Bort VIII the intended uses of the organization's endowment funds

4 Describe in Part Alli the intended uses	or the organization's endowment	iurias.			
Part VI Land, Buildings, and Equ	<b>uipment.</b> See Form 990, Part X	, line 10.			
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value	
1a Land					
<b>b</b> Buildings					
c Leasehold improvements					
d Equipment		185,956.	28,147.	157,809.	
e Other		126,064.		126,064.	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)					

Schedule D (Form 990) 2012

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

(8) (9) (10)(11)

TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A

Schedule D (Form 990) 2012

### **SCHEDULE E**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

**Schools** 

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

NASHVILLE PREPARATORY CHARTER SCHOOL

Employer identification number

Pai	rt I			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			
	other governing instrument, or in a resolution of its governing body?	1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3	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? If "Yes," please describe. If "No," please explain.	_		37
	If you need more space, use Part II SEE PART II	3		X
	SEE PART II			
4	Does the organization maintain the following?			
4	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Х	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b		X
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student	10		
·	admissions, programs, and scholarships?	4c	х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
_	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
	4B: NOT APPLICABLE - NO FINANCIAL ASSISTANCE OR SCHOLARSHIPS			
	ARE AWARDED. NASHVILLE PREPATORY IS A PUBLIC CHARTER SCHOOL			
	WITH NO TUITION REQUIREMENT.			
5	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	5a		X
	Admissions policies?	5b		X
	Employment of faculty or administrative staff?	5с		X
d	Scholarships or other financial assistance?	5d		X
е	Educational policies?	5e		X
f	Use of facilities?	5f		X
	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
_			v	
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	X	X
b	Has the organization's right to such aid ever been revoked or suspended?	6b		^
-	If you answered "Yes" to either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of	7	Х	
	Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	27	

Schedule E (Form 990 or 990-EZ) (2012) NASHVILLE PREPARATORY CHARTER SCHOOL 27-3342540 Page 2  Part II Supplemental Information. Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7,
as applicable. Also complete this part to provide any other additional information.
SCHEDULE E, LINE 3 - EXPLANATION OF NONDISCRIMINATION POLICY:
FROM THE SCHOOL'S WEBSITE "NASHVILLE PREPATORY CHARTER SCHOOL
DOES NOT DISCRIMINATE IN ADMISSION BY RACE, COLOR, RELIGION,
NATIONAL ORIGIN, SEX, HANDICAP, OR ANY CHARACTERISTIC AGAINST
WHICH DISCRIMINATION IS PROHIBITED BY APPLICABLE LAW, AND
OPEARATES AS A NONDISCRIMINATORY BASIS THROUGHOUT THE
INSTITUTION."
SCHEDULE E, LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:
THE SCHOOL IS A PUBLIC CHARTER SCHOOL AND RECEIVES FUNDING SIMILIAR TO
OTHER PUBLIC SCHOOL FROM THE STATE OF TENNESSEE THROUGH THE METROPOLITAN
NASHVILLE PUBLIC SCHOOL SYSTEM. THE SCHOOL HAS ALSO RECEIVED A CHARTER
SCHOOL PLANNING AND IMPLEMENTATION GRANT, TITLE I FUNDS, AND IDEA GRANT
FUNDS WHICH ARE PASS-THROUGH FUNDS FROM THE FEDERAL GOVERNMENT.

### SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2012
Open to Public Inspection

Name of the organization **Employer identification number** 27-3342540 NASHVILLE PREPARATORY CHARTER SCHOOL FORM 990, PART VI, SECTION A, LINE 3: CFO BUSINESS STRATEGIES, INC. PROVIDES BOOKKEEPING SERVICES FOR THE SCHOOL. FORM 990, PART VI, SECTION B, LINE 11: THE FINANCE COMMITTEE WILL CLOSELY REVIEW THE 990 AND NOTE ANY CHANGES THAT WOULD NEED TO BE REVISED. ONCE REVISED, THE FULL BOARD WILL REVIEW AND APPROVE THE FILING. FORM 990, PART VI, SECTION B, LINE 12C: ALL BOARD MEMBERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST STATEMENT. IF A CONFLICT OF INTEREST ARISES DURING THE YEAR, IT IS REQUIRED TO BE DISCLOSED. FORM 990, PART VI, SECTION C, LINE 19: THE SCHOOL'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST. FORM 990 PART XII, LINE 2C THE AUDIT SELECTION AND OVERSIGHT PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.