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)

JUN

30,

and ending

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

A For the 2005 calendar year, or tax year beginning

The organization may have to use a copy of this return to satisfy state reporting requirements. 2005

JUL 1,

Open to Public Inspection

В	Check if applicable	Please	loyer id	lentification number			
	Addres		2_14	581766			
	change □Name						
	change Initial	See   Number and Silver (of 1.0. DOX if mail is not delivered to silver address)   Notification	elephone number 615–880–2610				
	return Final	Instrus		nod: X Cash Accrual			
	—return ☐Amende —return	NASHVILLE, TN 37219	other specify)	• • • • • • • • • • • • • • • • • • •			
	Applica pending	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts Hand Lare not applicable to					
		must attach a completed Schedule A (Form 990 or 990-EZ).  H(a) Is this a group return for	r affilia	tes? Yes X No			
		►WWW.NPLF.ORG H(b) If "Yes," enter number of	f affiliat	es▶_N/A			
J	Organiza	tion type (check only one) ► X 501(c) ( 3 ) ◀ (insert no.) 4947(a)(1) or 527 H(c) Are all affiliates included	l? 1	N/A Yes No			
K	Check he	re I if the organization's gross receipts are normally not more than \$25,000. The H(d) Is this a separate return	filed by	/ an or			
	-	ion need not file a return with the IRS; but if the organization chooses to file a return, be ganization covered by a	group	ruling? Yes X No			
	sure to fi	le a complete return. <b>Some states require a complete return</b> .	_	N/A			
			-	ion is <b>not</b> required to attach			
		ceipts: Add lines 6b, 8b, 9b, and 10b to line 12 > 2,075,879. Sch. B (Form 990, 990-	EZ, or 9	990-PF).			
P	_	Revenue, Expenses, and Changes in Net Assets or Fund Balances					
	1	Contributions, gifts, grants, and similar amounts received:					
	a	Direct public support 1a 650,580.					
		Indirect public support 1b Sovernment contributions (grants) 1c					
	C	Government contributions (grants)  Total (add lines 1a through 1c) (cash \$ 643,915. noncash \$ 6,665. )	1d	650,580.			
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	030,300.			
	3	Membership dues and assessments	3				
	4	Interest on savings and temporary cash investments	4	223,363.			
	5	Dividends and interest from securities	5	181,799.			
	6 a	Dividends and interest from securities  Gross rents SEE STATEMENT 1 6a 16,851.					
	b	Less: rental expenses 6b					
	C	Net rental income or (loss) (subtract line 6b from line 6a)	6c	16,851.			
•	7	Other investment income (describe )	7	· · · · · · · · · · · · · · · · · · ·			
Revenue	8 a	Gross amount from sales of assets other (A) Securities (B) Other					
eve		than inventory 973,725. 8a					
<b>~</b>	b	Less: cost or other basis and sales expenses 855,358. 8b					
	C	Gain or (loss) (attach schedule) 118,367. 8c					
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	118,367.			
	9	Special events and activities (attach schedule). If any amount is from <b>gaming</b> , check here					
	a	Gross revenue (not including \$ of contributions of contributions					
	١.	reported on line 1a) 9a 29,320.					
		Less: direct expenses other than fundraising expenses 9b 69,809.		.40 400 -			
		Net income or (loss) from special events (subtract line 9b from line 9a)  SEE STATEMENT 3	9c	<40,489.>			
		Gross sales of inventory, less returns and allowances 10a Less: cost of goods sold 10b					
		Less: cost of goods sold 10b	10c				
	11	Other revenue (from Part VII, line 103)	11	241.			
	12	<b>Total revenue</b> (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	1,150,712.			
_	13	Program services (from line 44, column (B))	13	1,067,824.			
Ses	14	Management and general (from line 44, column (C))	14	191,834.			
Expenses	15	Fundraising (from line 44, column (D))	15	61,083.			
Α̈́	16	Payments to affiliates (attach schedule)	16	. ,			
	17	Total expenses (add lines 16 and 44, column (A))	17	1,320,741.			
	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	<170,029.>			
et	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	9,962,040.			
Net Assets	20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 4	20	61,020.			
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	9,853,031.			
5230	001	Ι ΗΔ		Form <b>990</b> (2005)			

Form **990** (2005)

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

	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	( <b>D</b> ) Fundraising
22	Grants and allocations (attach schedule)				STATEMENT 7	
	(cash \$884,031 • noncash \$ 0 •					
	If this amount includes foreign grants, check here	22	884,031.	884,031.		
23	Specific assistance to individuals (attach					
	schedule)	23				
24	Benefits paid to or for members (attach					
	schedule)	24				
25	Compensation of officers, directors, etc. * *	25	79,233.	0.	39,617.	39,616.
26	Other salaries and wages	26	217,461.	175,835.	29,138.	12,488.
27	Pension plan contributions	27	1,665.		1,165.	500.
28	Other employee benefits	28	1,170.		819.	351.
29	Payroll taxes	29	17,125.	7,958.	5,274.	3,893.
	Professional fundraising fees	30				
31	Accounting fees	31				
32	Legal fees	32				
	Supplies	33	3,361.		3,361.	
	Telephone	34	410.		410.	
	Postage and shipping	35	359.		359.	
	Occupancy	36				
	Equipment rental and maintenance	37				
38	Printing and publications	38	946.		946.	
39	Travel	39				
	Conferences, conventions, and meetings	40				
41	Interest	41	65,236.		65,236.	
42	Depreciation, depletion, etc. (attach schedule)	42	1,798.		1,798.	
43	Other expenses not covered above (itemize):					
á	1	43a				
t		43b				
(		43c				
(	1	43d				
6		43e				
f		43f				
Ç	SEE STATEMENT 5	43g	47,946.		43,711.	4,235.
44	Total functional expenses. Add lines 22					
	through 43. (Organizations completing					
	columns (B)-(D), carry these totals to lines					
	13-15)	44		1,067,824.	191,834.	61,083.
	int Costs. Check  if you are following					
	any joint costs from a combined educational campai					Yes X No
lf "۱	Yes," enter (i) the aggregate amount of these joint cos	ts \$ _		ii) the amount allocated to	Program services \$	<b>N/A</b> ;
(iii	) the amount allocated to Management and general \$		N/A ; and (	v) the amount allocated to	Fundraising \$	N/A

\* SEE STATEMENT 6

523011 02-03-06

### 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.

What is the organization's primary exempt purpose? ► SEE STATEMENT 8	Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but
a TO BENEFIT THE NASHVILLE PUBLIC LIBRARY IN A WAY THAT ENHANCES THE APPEARANCE OF THE LIBRARY AND ALSO PROPERLY	
RELEASES MONIES ACCORDING TO DONOR RESTRICTIONS.	
(Grants and allocations \$ 884,031.) If this amount includes foreign grants, check here ▶	
b	
(Grants and allocations \$ ) If this amount includes foreign grants, check here	
c	
(Grants and allocations \$ ) If this amount includes foreign grants, check here	
d	
(Grants and allocations \$ ) If this amount includes foreign grants, check here	
e Other program services (attach schedule)	$\Box$
(Grants and allocations \$ ) If this amount includes foreign grants, check here  Total of Program Service Expenses (should equal line 44, column (B), Program services)	<u> </u>

Form **990** (2005)

#### Part IV Balance Sheets (See the instructions.) Note: Where required, attached schedules and amounts within the description column (A) (B) Beginning of year should be for end-of-year amounts only. End of year 133,950. 45 45 Cash - non-interest-bearing 14,115,860. 3,881,518. 46 Savings and temporary cash investments 46 47 a Accounts receivable 47a b Less: allowance for doubtful accounts 47b 47c 48 a Pledges receivable ..... 501,462. 48a 20,084. b Less: allowance for doubtful accounts 1,864,935. 481,378. 48b 48c 49 Grants receivable 49 50 Receivables from officers, directors, trustees, and key employees ..... 50 51 a Other notes and loans receivable 51a b Less: allowance for doubtful accounts 51b 51c Inventories for sale or use 52 52 Prepaid expenses and deferred charges 53 53 Investments - securitieSTMT 9 STMT 10 ▶ ☐ Cost X FMV 3,996,991. 5,347,381. 54 54 55 a Investments - land, buildings, and equipment: basis 55a b Less: accumulated depreciation 55b 55c 0. 0. 56 Investments - other **57 a** Land, buildings, and equipment: basis 8.991. 57a b Less: accumulated depreciation STMT 11 4,626. 6,163. 4,365. 57b 57c 10,174. 4,439. Other assets (describe ► RENT RECEIVABLE 58 58 19,994,123. 9,853,031. 59 Total assets (must equal line 74). Add lines 45 through 58 59 60 Accounts payable and accrued expenses 61 Grants payable 61 62 62 Deferred revenue Loans from officers, directors, trustees, and key employees 63 63 64 a Tax-exempt bond liabilities 64a 10,000,000. b Mortgages and other notes payable STMT 12 64b 32,083. 65 65 Other liabilities (describe 10,032,083. 0. Total liabilities. Add lines 60 through 65) ....... Organizations that follow SFAS 117, check here \( \bigvee X \) and complete lines 67 through 69 and lines 73 and 74. Net Assets or Fund Balances 485,150. 980,226. 67 67 Unrestricted 6,996,956. 6,297,871. 68 68 Temporarily restricted 2,479,934. 2,574,934. Permanently restricted 69 Organizations that do not follow SFAS 117, check here and complete lines 70 through 74. Capital stock, trust principal, or current funds 70 Paid-in or capital surplus, or land, building, and equipment fund ..... 71 71 Retained earnings, endowment, accumulated income, or other funds 72 72 73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; 9,853,031. column (A) must equal line 19; column (B) must equal line 21) 9,962,040. 73 9,853,031. Total liabilities and net assets/fund balances. Add lines 66 and 73 19,994,123.

Part IV-A	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the
	instructions )

	m 990 (2005) NASHVILLE PUBLIC LIBR						L / 66	Page <b>5</b>
Pa	art IV-A Reconciliation of Revenue per Audited Fina instructions.)	ncial Statements W	/ith	Revenue po	er Re	eturn	(See the	Э
a	Total revenue, gains, and other support per audited financial stateme	ents				a :	1,25	2,356.
b	Amounts included on line a but not on Part I, line 12:							
1	Net unrealized gains on investments		b1	68,5	54.			
	Donated services and use of facilities							
4	Other (specify): SEE STATEMENT 13		b4	64,0	67.			
	Add lines <b>b1</b> through <b>b4</b>					b		2,621.
C	Subtract line <b>b</b> from line <b>a</b>					c :	1,11	9,735.
d	Amounts included on Part I, line 12, but not on line a:							
1	Investment expenses not included on Part I, line 6b		d1					
2	Other (specify): SEE STATEMENT 15		d2	30,9	77.			
	Add lines d1 and d2					d		0,977.
е	Total revenue (Part I, line 12). Add lines c and dart IV-B Reconciliation of Expenses per Audited Fina				<b>•</b>	e :	1,15	0,712.
a	Total expenses and losses per audited financial statements					a i	1,36	1,365.
b	Amounts included on line <b>a</b> but not on Part I, line 17:							
	Donated services and use of facilities		b1					
	Prior year adjustments reported on Part I, line 20							
3	Losses reported on Part I, line 20		b3					
4	OH		b4	64,0	67.			
	Add lines <b>b1</b> through <b>b4</b>					b		4,067.
C	Subtract line <b>b</b> from line <b>a</b>					С	1,29	7,298.
	Amounts included on Part I, line 17, but not on line a:							
	Investment expenses not included on Part I, line 6b		d1					
2	Other (specify): SEE STATEMENT 16		d2	23,4	43.			
	Add lines d1 and d2					d		3,443.
е	Total expenses (Part I, line 17). Add lines c and d							0,741.
Pa	art V-A Current Officers, Directors, Trustees, and Ke				an of	ficer, c	lirector,	trustee,
	or key employee at any time during the year even if they we				<b>/D</b> \o		.   /	F\
	(A) Name and address	(B) Title and average hours per week devoted to position	)   (I	f not paid, enter	emplo plans	ntribution byee bene & deferre	efit a	E) Expense ccount and
		position	+	-0)	comper	nsation p	lans Olffe	er allowances
				71 250	-	10	,	0.00
SE	E STATEMENT 17		+	71,250.	/	,12	3 •	860.
			+					
			+				_	
		1	1					

Form **990** (2005)

Par	t V-A	Current Officers, Directors, Trustees, and Ke	y Employees (continu	ied)			Yes	No
75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board								
meetings								1
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees								
•		Schedule A, Part I, or highest compensated professional and						1
		or II-B, related to each other through family or business relat	tionships? If "Yes," attach	a statement that i	dentifies			
	the indi	viduals and explains the relationship(s)				75b		X
C	Do any	officers, directors, trustees, or key employees listed in Form	990, Part V-A, or highest c	ompensated empl	oyees			
		Schedule A, Part I, or highest compensated professional and						1
		or II-B, receive compensation from any other organizations,	whether tax exempt or tax	cable, that are relat	ted to this			
	-	ation through common supervision or common control?				75c		Х
		delated organizations include section 509(a)(3) supporting org						1
		attach a statement that identifies the individuals, explains the relations s the compensation arrangements, including amounts paid to each in			ization(s), and			1
		a averagination have a visitan anothint of interest maliniO				754	Х	
	t V-B		y Employees That E			75d		
ı aı	t V-D	<b>Benefits</b> (If any former officer, director, trustee, or key en						ring
		the year, list that person below and enter the amount of col						
		(A) Name and address	(D) I same and Advances	(0) Commonation	(D) Contributions t		<b>E)</b> Expe	
		(A) Name and address NONE	(B) Loans and Advances	(C) Compensation	plans & deferred compensation plan	I at	ccount er allow	and Jances
		1,01,2			compensation plai	3 0 1110	01 4110 11	arrooo
						$\top$		
						┿		
						+		
						+		
						$\top$		
Par	t VI 📗	Other Information (See the instructions.)					Yes	No
76	Did the	organization engage in any activity not previously reported to	the IRS? If "Yes," attach	a detailed				
	descrip	tion of each activity				76		Х
77	Were ar	ny changes made in the organizing or governing documents t	out not reported to the IRS	S?		77		Х
		attach a conformed copy of the changes.				78a		
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?								X
					N/A	78b		77
79		ere a liquidation, dissolution, termination, or substantial contr			F	79		Х
ви а		rganization related (other than by association with a statewid				00		v
		rship, governing bodies, trustees, officers, etc., to any other of	exempt or nonexempt org	anization?		80a		X
D	IT Yes,	enter the name of the organization N/A	and chack whather it is	avemet as	nonovomnt			
81 a	Enter di	rect or indirect political expenditures. (See line 81 instruction	_ and check whether it is L	exempt <b>or</b>	$\square$ nonexempt $0$ .			
			,			81b		x
	b Did the organization file Form 1120-POL for this year? 81b   523161/02-03-06 Form 9							

Pa	rt VI Other Information (continued)		Yes	No
	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	Х	
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.) 82b 18,923.			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Х	
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	Х	
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		Х
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not			
	tax deductible? N/A	84b		
85	501(c)(4), (5), or (6) organizations. <b>a</b> Were substantially all dues nondeductible by members? N/A	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  N/A	85b		
	If "Yes" was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a			
	waiver for proxy tax owed for the prior year.			
C	Dues, assessments, and similar amounts from members 85c N/A			
d	Section 162(e) lobbying and political expenditures 85d N/A			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)  85f  N/A			
a	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?  N/A	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? N/A	85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on			
	line 12			
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A			
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.) 87b N/A			
88	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	88		Х
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:			
	section 4911 $\triangleright$ 0 • ; section 4912 $\triangleright$ 0 • ; section 4955 $\triangleright$ 0 •			
b	501(c)(3) and 501(c)(4) organizations. 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		Х
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under			
	sections 4912, 4955, and 4958			0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.
90 a	List the states with which a copy of this return is filed ▶TN			
b	Number of employees employed in the pay period that includes March 12, 2005 90b			7
91 a	The books are in care of ► BARBARA SAMMONS  Telephone no. ► 615-88			
	Located at ► 615 CHURCH STREET, NASHVILLE, TN ZIP+4 ► 3	721	9	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	
	account)?	91b		Х
	If "Yes," enter the name of the foreign country  N/A			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
C	At any time during the calendar year, did the organization maintain an office outside of the United States?	91c		X
	If "Yes," enter the name of the foreign country  N/A		_	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here		. <b>&gt;</b> [	
	and enter the amount of tax-exempt interest received or accrued during the tax year 92	N/		
		Form	990	(2005)

Part VI	Analysis of Income-Producing	Activities	(See the instructions	.)		
Note: Fn	ter gross amounts unless otherwise	Unrela	ted business income	Excluded	d by section 512, 513, or 514	/E\
indicated	<del>-</del>	(A)	(B)	_(C)	(D)	(E) Related or exempt
	ram service revenue:	Business code	Amount	Exclu- sion	Amount	function income
	rani service revenue.	Couc		code		Tuneden meenie
å		-				
ь		-				
°. —		-				
d		_				
е		_				
	care/Medicaid payments					
-	and contracts from government agencies $_{\hdots}$					
<b>94</b> Mem	bership dues and assessments					
	st on savings and temporary cash investments			14	223,363. 181,799.	
96 Divid	ends and interest from securities			14	181,799.	
<b>97</b> Net r	ental income or (loss) from real estate:					
a debt-	financed property					
	lebt-financed property			16	16,851.	
	ental income or (loss) from personal property					
99 Othe	r investment income					
<b>100</b> Gain	or (loss) from sales of assets					
other	than inventory			18	118,367.	
	ncome or (loss) from special events			01	118,367. <40,489.	>
	s profit or (loss) from sales of inventory				•	
	r revenue:	•				
	SCELLANEOUS INCOME -					
	LE OF POSTERS	-				241.
c <u></u>		_				
d		-				
e		-				
	otal (add columns (B), (D), and (E))	-		0.	499,891.	241.
	I (add line 104, columns (B), (D), and (E))					500,132
Note: Line	e 105 plus line 1d, Part I, should equal the an	mount on line 1	2 Part I			3007132
	II Relationship of Activities to th			mnt Purn	OSAS (See the instructi	ons l
Line No.	Explain how each activity for which income is re					
Tille No.	exempt purposes (other than by providing fund			iuteu iiriportai	illy to the accomplishment	of the organization 5
	THESE AMOUNTS HELP BEN		,	DDOMO	שב החבר אוא כחו <i>ו</i>	TITE DIDITC
	LIBRARY.	EFII, S	OFFORT AND	PROMO	TE THE MASHV	THUE PUBLIC
	DIBRAKI•					
Dort IV	Information Degerding Toyokl	a Cubaidia	ioo and Diarage	rded Ent	itioo (Ossallas isalas dis	1
Part IX	(A) Regarding Taxable (B)		(C)	arded Ent	(D)	ns.)
Name, a	ddress, and EIN of corporation, Percentage of		Nature of activities		Total income	End-òf-year
partn	ership, or disregarded entity ownership inte					assets
		%				
	N/A	%				
		%				
		%				
Part X	Information Regarding Transfe	ers Associa	ited with Persoi	nal Benef	it Contracts (See the	<del></del>
(a) Did t	the organization, during the year, receive any funds	s, directly or ind	rectly, to pay premiums	s on a persona	al benefit contract?	Yes X No
<b>(b)</b> Did t	the organization, during the year, pay premiums, d	lirectly or indired	tly, on a personal benef	fit contract?		Yes X No
Note: If	"Yes" to (b), file Form 8870 and Form 4720 (	`	,			
Please	Under penalties of perjury, I declare that I have examined correct, and complete. Declaration of preparer (other than	this return, includir officer) is based or	ng accompanying schedules all information of which pro	s and statements eparer has any k	s, and to the best of my knowled nowledge.	ge and belief, it is true,
Sign					· ·	
Here	Signature of officer		Date	Type or pri	nt name and title.	
Daid	Preparer's			Date	Check if self-	Preparer's SSN or PTIN
Paid	signature				employed	
Preparer's	Firm's name (or LATTIMORE BLA	CK MORG	AN S. CATN	D C	EIN ►	
	LATITHORE DIA	CIC HOICE	MI & CAIII,	F . C .	LIIV	
Use Only	yours if self-employed), address, and					

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	NASHVILLE PUBLIC LIBRA	RY	FOUNDATION		62 1681	766
Part I	Compensation of the Five Highest Paid (See page 1 of the instructions. List each one. If there are no		nter "None.")	Officers, Dire		
	(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 & deferred compensation	(e) Expense account and other allowances
NONE						
Total number over \$50,000	of other employees paid	▶	0			
Part II-A	Compensation of the Five Highest Paid (See page 2 of the instructions. List each one (whether indiv				ional Servic	es
	(a) Name and address of each independent contractor paid m	nore th	an \$50,000	<b>(b)</b> Type of s	service	(c) Compensation
NONE						
\$50,000 for pr	of others receiving over rofessional services		0			
Part II-B	Compensation of the Five Highest Paid (List each contractor who performed services other than prefirms. If there are none, enter "None." See page 2 of the instructions.	ofessio	onal services, whether individu		ervices	
	(a) Name and address of each independent contractor paid m	nore th	an \$50,000	<b>(b)</b> Type of s	service	(c) Compensation
NONE						
	of other contractors receiving over ther services	<b></b>	0			

_	1	6	8	1	7	6	6	Page	2
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P	art III	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During th	e year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence			
		inion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the			
		activities 🕨 \$ \$ (Must equal amounts on line 38, Part VI-A, or			
	line i of P	,	1		X
	-	ions that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations			
		"Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	trustees, person is	e year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," detailed statement explaining the transactions.)			
а		nange, or leasing of property?	2a		Х
	,				
b	Lending (	of money or other extension of credit?	2b		X
C	Furnishin	g of goods, services, or facilities? SEE STATEMENT 18	2c	Х	
d	Payment	of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	Х	
	T	of any and of the transport of the trans			
		of any part of its income or assets? nake grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how	2e		X
3 a	-	mine that recipients qualify to receive payments.)	3a		х
h		ave a section 403(b) annuity plan for your employees?	3b		X
		e year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c		X
		naintain any separate account for participating donors where donors have the right to provide advice			
	-	e or distribution of funds?	4a		х
b		rovide credit counseling, debt management, credit repair, or debt negotiation services?			Х
	art IV	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
	art IV	Theason for 14011-1 fivate i outification status (see pages 3 unough 6 of the instructions.)			
The	organizat	on is not a private foundation because it is: (Please check only <b>ONE</b> applicable box.)			
5		A church, convention of churches, or association of churches. Section $170(b)(1)(A)(i)$ .			
6		A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city,			
		and state			
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv).			
11	a X	(Also complete the <b>Support Schedule</b> in Part IV-A.)  An organization that normally receives a substantial part of its support from a governmental unit or from the general public.			
''	a <u>21</u>	Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)			
11	h 🔲	A community trust. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)			
12		An organization that normally receives: (1) more than 33 1/3% 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 1/3% 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 <b>Support Schedule</b> in Part IV-A.)			
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations describ	bed in:		
		(1) lines 5 through 12 above; or (2) sections $501(c)(4)$ , (5), or (6), if they meet the test of section $509(a)(2)$ . Check the box that describes the test of section $509(a)(2)$ .	bes		
		the type of supporting organization: Type 1 Type 2 Type 3			
		Provide the following information about the supported organizations. (See page 6 of the instructions.)	(F.)		la a r
		(a) Name(s) of supported organization(s)		e num om abo	
	4   ,				
1	4	An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)			

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ı u		e worksheet in the insti				
	ndar year (or fiscal year	(a) 2004	( <b>b</b> ) 2003	(c) 2002	( <b>d</b> ) 2001	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,267,438.	948,395.		1,677,981.	5,222,000.
16	Membership fees received		2 2 2 7 2 2 2 2			
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		104.	375.	28,363.	28,842.
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 by the organization after June 30, 1975	503,431.	119,161.	181,110.	105,505.	909,207.
19	Net income from unrelated business activities not included in line 18		223,2020	101/1101	200,000	30372070
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					
23	Total of lines 15 through 22			1,509,671.		6,160,049.
24	Line 23 minus line 17			1,509,296.		6,131,207.
25	Enter 1% of line 23	17,709.	10,677.	15,097.	18,118.	
26	Organizations described on lines 1					122,624.
b	Prepare a list for your records to sho			,		
	unit or publicly supported organization	,	•	ded the amount shown in		2 112 760
	Do not file this list with your return				26b	3,113,760. 6,131,207.
	Total support for section 509(a)(1) t				≥ 26c	0,131,20/.
a	Add: Amounts from column (e) for li		09,207.	3,113,76	<u> </u>	4,022,967.
_	Dublic cupport (line OCe minus line C	22	26b			2,108,240.
•	Public support (line 26c minus line 2  Public support percentage (line 26c					34.3854%
27	Organizations described on line 12					
	records to show the name of, and to					
	•	N/A	aon your nom, ouon aloq	damied person. De not n	To time not with your rota	THE EIROF THE SUM OF
	(2004)	•	(2	002)	(2001)	
b	For any amount included in line 17 th					
	and amount received for each year, t				•	•
	described in lines 5 through 11b, as		•		• · · ·	•
	the larger amount described in <b>(1)</b> o (2004)			,		
С	Add: Amounts from column (e) for li		(-			
	` '	20		21	27c	N/A
d	Add: Line 27a total	an	d line 27b total	······	▶ 27d	N/A
е	Public support (line 27c total minus	line 27d total)			▶ 27e	N/A
f	Total support for section 509(a)(2) t				N/A	
g	Public support percentage (lin				<b>▶</b> 27g	N/A %
h	Investment income percentage	e (line 18, column (e)	(numerator) divided b	oy line 27f (denomina	tor)) > 27h	N/A %
28 L	Jnusual Grants: For an organization	n described in line 10, 11,	or 12 that received any u	inusual grants during 200	1 through 2004, prepare	a list for your records to

N/A

## (To be completed ONLY by schools that checked the box on line 6 in Part IV)

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
	instrument, or in a resolution of its governing body?	29		
30	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?	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	Records indicating the racial composition of the student body, faculty, and administrative staff?			
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
C	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?	33b		
C	Employment of faculty or administrative staff?			
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e		
f	Use of facilities?			
g	Athletic programs?			
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.)			
04 -	December a was instituted and financial sides as sistence from a growth of the same of the	0.4		
	Does the organization receive any financial aid or assistance from a governmental agency?			
b	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.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,			
	1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Schedule A (Form 990 or 990-EZ) 2005

## Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

N	7	Α

		<del> ` _ · _ · _ · _ · _ · _ · _ · _ · _ </del>	an engible organization that filed F				
Che	ck <b>&gt; a</b>	if the organization belon	gs to an affiliated group.	Check ▶ b	if you che	ecked <b>"a"</b> and "limited control"	provisions apply.
			Lobbying Expenditures tures" means amounts paid or incu			<b>(a)</b> Affiliated group totals	(b) To be completed for ALL electing organizations
36 37 38 39 40 41	Total lobb Total lobb Other exe Total exe Lobbying	bying expenditures to influence bying expenditures (add lines 3 empt purpose expenditures mpt purpose expenditures (add j nontaxable amount. Enter the	public opinion (grassroots lobbyin a legislative body (direct lobbying) 6 and 37) I lines 38 and 39) amount from the following table -		37 38 39	N/A	
42 43 44	Not over \$5 Over \$500, Over \$1,00 Over \$1,50 Over \$17,0 Grassroo Subtract	000 but not over \$1,000,000	The lobbying nontaxable am 20% of the amount on line 40 \$100,000 plus 15% of the excess of \$175,000 plus 10% of the excess of \$225,000 plus 5% of the excess of \$1,000,000 9% of line 41) I line 42 is more than line 36 I line 41 is more than line 38	over \$500,000 over \$1,000,000 ver \$1,500,000	41 42 43		
	Caution:	If there is an amount on ei	ther line 43 or line 44, you must	file Form 4720.			
			4-Year Averaging F	Period Under S	ection (	501(h)	

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

		Lobbying Exp	enditures During 4-Year A	veraging Period	N/A
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2005	<b>(b)</b> 2004	(c) 2003	( <b>d</b> ) 2002	<b>(e)</b> Total
45 Lobbying nontaxable amount					0
46 Lobbying ceiling amount (150% of line 45(e))					0
47 Total lobbying expenditures					0
48 Grassroots nontaxable amount					0
49 Grassroots ceiling amount (150% of line 48(e))					0
Grassroots lobbying expenditures					C

Part VI-B	Lobbying	Activity b	y Nonelecting	ı Public	Charities
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(For reporting only by organization)	ations that did not complete F	Part VI-A) (See page 1 <sup>-</sup>	1 of the instructions.)
--------------------------------------	--------------------------------	-------------------------------------	-------------------------

N/A

Du	ring the year, did the organization attempt to influence national, state or local legislation, including any attempt to	Yes	No	Amount
infl	uence public opinion on a legislative matter or referendum, through the use of:	103	140	Allivant
а	Volunteers			
b	Paid staff or management (Include compensation in expenses reported on lines <b>c</b> through <b>h</b> .)			
C	Media advertisements			
d	Mailings to members, legislators, or the public			
е	Publications, or published or broadcast statements			
	Grants to other organizations for lobbying purposes			
	Direct contact with legislators, their staffs, government officials, or a legislative body			
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
	Total lobbying expenditures (Add lines <b>c</b> through <b>h</b> .)			0.
	If "Ves" to any of the above, also attach a statement giving a detailed description of the lobbying activities			

# Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

	Excinpt Organiz	Lationo (occ page 12 of the moth	uctions.)				
<b>51</b> D	id the reporting organization d	irectly or indirectly engage in any of t	the following with any other	organization described in section			
	. ,	section 501(c)(3) organizations) or in		litical organizations?			
a T		ganization to a noncharitable exempt	•			Yes	No
					51a(i)		X
					a(ii)		X
	ther transactions:				1		
					b(i)		X
					b(ii)		X
					b(iii)		X
					b(iv)		X
					b(v)		X
					b(vi)		X
		mailing lists, other assets, or paid er		lways show the fair market value of the			Λ
		given by the reporting organization.	• •				
-		nent, show in column (d) the value of	-			N/A	
	(b)	(c)	the goods, other assets, or	(d)		11/12	
(a) Line no		Name of noncharitable exe	empt organization	Description of transfers, transactions, and sl	naring ar	rangen	ents
				anizations described in section 501(c) of the	1		,
C	ode (other than section 501(c)	(3)) or in section 527?		▶ ∟	Yes	X	No
b lt	"Yes," complete the following s	•	T				
	(a) Name of ord		<b>(b)</b> Type of organization	(c) Description of relationshi	n		
	Namo or org	guinzution	Typo or organization	Becomption of folditions.	Р		
523151			•	•			

Asset No.	Description	D: Acq	ate uired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	COMPUTER EQUIPMENT	070	103	SL	5.00	16	7,071.			7,071.	2,828.		1,414.
2	PRINTER AND FEEDER * TOTAL 990 PAGE 2	070	105	SL	5.00	16	1,920.			1,920.			384.
	DEPR						8,991.		0.	8,991.	2,828.	0.	1,798.

FORM 990	RENTAL	INCOME	<u> </u>			S'	TATEMENT	1
KIND AND LOCATION OF PROPERT	Y			i	ACTIVIT NUMBER		GROSS ENTAL INCO	ME
RETAIL SPACE - 615 CHURCH S' 37219	TREET, NA	SHVILLE	, TN	-	1		16,85	51.
TOTAL TO FORM 990, PART I, L	INE 6A						16,85	51.
FORM 990 GAIN (LOSS)	FROM PUBL	JICLY TF	ADED	SECURI	ries	S'	TATEMENT	2
DESCRIPTION	GRC SALES	SS PRICE		T OR BASIS	EXPEN OF SA		NET GAIN	•
VARIOUS SECURITIES	973	3,725.	85	5,358.		0.	118,36	57.
TO FORM 990, PART I, LINE 8	973	3,725.	85	5,358.		0.	118,36	57.
FORM 990 SPE	CIAL EVEN	ITS AND	ACTIV	TITIES		S'	TATEMENT	3
	GROSS ECEIPTS	CONTRIE		GROSS REVENU		RECT		2
LITERARY AWARD GALA	230,875.	201,5	555.	29,3	20. 69	,809	. <40,48	 89.>
TO FM 990, PART I, LINE 9	230,875.	201,5	555.	29,3	20. 69	,809	<40,48	39.> ===
FORM 990 OTHER CHANGE	S IN NET	ASSETS	OR FU	ND BAL	ANCES	S	TATEMENT	4
DESCRIPTION							AMOUNT	
UNREALIZED GAIN ON MARKETABLE PRIOR PERIOD ADJUSTMENT	E SECURIT	PIES					68,55 <7,53	
TOTAL TO FORM 990, PART I, L	INE 20						61,02	20.

FORM 990	ОТНЕ	R EXPENSES		STATEMENT	5
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISIN	1G
INSURANCE TAXES MISCELLANEOUS INVESTMENT FEES	2,141. 345. 3,829. 20,457.		2,141. 345. 3,829. 20,457.		
LEGAL AND PROFESSIONAL BANK FEES BOARD MEETING	8,969. 60.		8,969. 60.		
EXPENSE PROFESSIONAL DEVELOPMENT ANNUAL CAMPAIGN	3,831. 4,079. 4,235.		3,831. 4,079.	4,23	35.
TOTAL TO FM 990, LN 43	47,946.		43,711.	4,23	35.

	OFFICE	R COMPENSATIO PART II, LIN		ST	ATEMENT 6
NAME OF OFFICER	R, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS		TOTALS
TARI HUGHES		71,250.	7,123.	860.	79,233
A. PROGRAM SERV	/ICES				
B. MANAGEMENT A	AND GENERAL	35,625.	3,562.	430.	39,617
C. FUNDRAISING		35,625.	3,561.	430.	39,616
TOTAL OFFICER,	ETC., COMPENS	ATION INCLUDE	D ON PARTS V	-A AND V-B	39,616. 79,233.
·		ATION INCLUDE		<del>-</del>	•
FORM 990		GRANTS AND A		<del>-</del>	79,233
TOTAL OFFICER,  FORM 990  CLASSIFICATION  MAINTENANCE AND EDUCATION	CASH	GRANTS AND A  DONEE' BLIC 615 CH	LLOCATIONS	ST DONEE'S RELATIONSHIP	79,233

### **EXPLANATION**

THE NASHVILLE PUBLIC LIBRARY FOUNDATION IS ORGANIZED AND OPERATED EXCLUSIVELY FOR THE PURPOSE OF BENEFITING, PROMOTING, SUPPORTING, ENCOURAGING AND ENHANCING THE PROGRAMS AND FACILITIES OF THE NASHVILLE PUBLIC LIBRARY SYSTEM.

FORM 990 NON-GOVERNMENT SECURITIES				STATEMENT 9	
SECURITY DESCRIPTION COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES	
OTHER FMV SECURITIES-MUTUAL FUNDS & MMF CORPORATE BONDS FMV CORPORATE STOCK FMV	1,365,016.	1,050,981	940,288	. 940,288. 1,050,981. 1,365,016.	
TO FORM 990, LINE 54, COL B	1,365,016.	1,050,981	940,288	3,356,285.	
DESCRIPTION	COST/FMV	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES	
DESCRIPTION	COST/FMV				
U.S. GOVERNMENT SECURITIES	FMV	1,991,096.		1,991,096.	
TOTAL TO FORM 990, LINE 54, COL B		1,991,096.		1,991,096.	
FORM 990 DEPRECIATION OF	ASSETS NOT	HELD FOR IN	/ESTMENT	STATEMENT 11	
DESCRIPTION	COST OTHER		CUMULATED PRECIATION	BOOK VALUE	
COMPUTER EQUIPMENT PRINTER AND FEEDER		7,071. 1,920.	4,242.	2,829. 1,536.	
TOTAL TO FORM 990, PART IV, LN	N 57	8,991.	4,626.	4,365.	

FORM 990	MORTGAGES PAYABLE	STATEMENT	12
DESCRIPTION		BALANCE DU	JE
SUNTRUST BANK			0.
TOTAL INCLUDED ON	FORM 990, PART IV, LINE 64B, COLUMN B		
FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT	13
DESCRIPTION		AMOUNT	
SPECIAL EVENTS EXI	PENSES RECLASSED TO PAGE 1 OF 990	64,0	67.
TOTAL TO FORM 990	, PART IV-A	64,0	67.
FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	14
DESCRIPTION		AMOUNT	
SPECIAL EVENTS EXI	PENSES RECLASSED TO PAGE 1 OF 990	64,0	67.
TOTAL TO FORM 990	, PART IV-B	64,0	67.
FORM 990	OTHER REVENUE INCLUDED ON FORM 990	STATEMENT	15
DESCRIPTION		AMOUNT	
PRIOR PERIOD ADJUS	MENT EXPENSES NETTED WITH INVESTMENT INCOME STMENT LASSED TO PAGE 1 OF 990		157. 534. 986.
TOTAL TO FORM 990	, PART IV-A	30,9	977.

FORM 990 OTHER EXPENS	SES INCLUDED ON FOR	м 990	STATI	EMENT 16
DESCRIPTION			Al	MOUNT
RECLASSIFY INVESTMENT EXPENSES RENTAL INCOME RECLASSED TO PAGE		MENT INCOME		20,457. 2,986.
TOTAL TO FORM 990, PART IV-B				23,443.
	ST OF OFFICERS, DIR S AND KEY EMPLOYEES		STATI	EMENT 17
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
KEITH B. SIMMONS 615 CHURCH STREET NASHVILLE, TN 37219	PRESIDENT 40.00	0.	0.	0.
BETH C. ALEXANDER 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
JUDY LIFF BARKER 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
GOVERNOR PHILIP N. BREDESEN 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
WILLIAM S. COCHRAN 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
JANETTA CONCEPCION 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
DOUGLAS CRUICKSHANKS, JR. 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
ANNE DAVIS 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.

NASHVILLE PUBLIC LIBRARY FOUNDATION			62-1681766	
GWENDOLYN SIMS DAVIS 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
JIM GAITTENS 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
FRANK GORDON 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
KATHY HARRELL 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
BILL KING 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
DONNA D. NICELY 615 CHURCH STREET NASHVILLE, TN 37219	EX-OFFICIO 3.00	0.	0.	0.
MAYOR BILL PURCELL 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
MARGARET ANN ROBINSON 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
MICHAEL J. SCHOENFELD 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
BYRON R. TRAUGER 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
DAVID C. TUNE 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
JUDITH P. TURNER 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
PHYLLIS BAKER VANDEWATER 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.

NASHVILLE PUBLIC LIBRARY FOUND	ATION		62-	1681766
KATY VARNEY 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
W. RIDLEY WILLS, II 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
DAVID K. WILSON 615 CHURCH STREET NASHVILLE, TN 37219	EMERITUS 3.00	0.	0.	0.
LINDE WILSON 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
ALAN R. YUSPEH 615 CHURCH STREET NASHVILLE, TN 37219	BOARD MEMBER 3.00	0.	0.	0.
TARI HUGHES 615 CHURCH STREET NASHVILLE, TN 37219	EXECUTIVE DIRECT 40.00	OR 71,250.	7,123.	860.
TOTALS INCLUDED ON FORM 990, PAR	 Г V-А	71,250.	7,123.	860.

SCHEDULE A

EXPLANATION OF TRANSACTIONS PART III, LINE 2C

STATEMENT

18

APPROXIMATELY \$4.8 MILLION IN CASH AND INVESTMENTS AS OF JUNE 30, 2006 (APPROXIMATELY \$3.8 MILLION AT JUNE 30, 2005), IS HELD IN A BROKERAGE ACCOUNT WITH A FINANCIAL INSTITUTION, OF WHICH A BOARD MEMBER IS SENIOR VICE PRESIDENT. FOR THE PERIOD ENDED JUNE 30, 2006, THE FOUNDATION PAID \$20,457 IN INVESTMENT FEES ON THE ACCOUNT (\$21,777 IN 2005).

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FOOTNOTES

STATEMENT 19

CONTRIBUTIONS REPORTED ON SCHEDULE B ARE REPORTED ON THE CASH BASIS OF ACCOUNTING. THEREFORE, DONATIONS COLLECTED IN THE CURRENT YEAR FROM PRIOR YEAR PLEDGES ARE INCLUDED ON SCHEDULE B. CONTRIBUTIONS ON PAGE 1 OF FORM 990 ARE REPORTED ON THE ACCRUAL BASIS METHOD OF ACCOUNTING. THEREFORE, THE DONATIONS ON SCHEDULE B MAY EXCEED DONATIONS ON FORM 990 IN YEARS WHEN COLLECTIONS OF PRIOR YEARS' PLEDGES EXCEED THE CURRENT YEAR'S PLEDGES RECEIVABLE.