			** PUBLIC DISCLOSURE COPY	Y **		
	Q	90	Return of Organization Exempt Fro			OMB No. 1545-0047
Forr	n J	30	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Co	•		
		of the Treasury nue Service	Do not enter social security numbers on this form as it	-	-	Open to Public Inspection
			► Go to www.irs.gov/Form990 for instructions and the ar year, or tax year beginning JUN 1, 2018 and endi		AY 31, 2019	Inspection
	heck if	_	f organization		D Employer identific	ation number
а	pplicabl	e:	°			
	Addre] Chang	e NASH	VILLE BALLET			
	Name chang Initial	e Doing b	usiness as and street (or P.O. box if mail is not delivered to street address) Roor	m/suite		440788
	_return Final	E Telephone number	297–2966			
	Ireturn. termin		REDMON STREET		G Gross receipts \$	7,615,507.
	ated Amen return		own, state or province, country, and ZIP or foreign postal code VILLE , TN 37209		H(a) Is this a group re	
			nd address of principal officer: JENNIFER PURYEAR			? Yes X No
	pendi		AS C ABOVE		H(b) Are all subordinates in	
		empt status:		527		list. (see instructions)
			NASHVILLEBALLET.COM		H(c) Group exemption	
			X Corporation Trust Association Other ►	L Year o	of formation: 1986 N	State of legal domicile: ${f TN}$
Ра	rt I	Summary		ਸਾ		
e	1	Briefly describ	e the organization's mission or most significant activities: CREATE , S AN ESSENTIAL AND INSPIRING ELEMENT	, PE. P OF	OUR COMMUN	1 & PROMOTE
nan			$x \models \square$ if the organization discontinued its operations or disposed of			
ver			ting members of the governing body (Part VI, line 1a)			46
ថ			lependent voting members of the governing body (Part VI, line 1b)			45
es 8			of individuals employed in calendar year 2018 (Part V, line 2a)			183
Activities & Governance			of volunteers (estimate if necessary)			300
Acti			d business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated	business taxable income from Form 990-T, line 38	<u></u>		0.
		O and the diama			Prior Year 1,974,411.	Current Year 2,594,216.
anı			and grants (Part VIII, line 1h) ce revenue (Part VIII, line 2g)		3,490,109.	3,717,012.
Revenue		•	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, and 7d)		-153,402.	41,308.
Å			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		419,292.	325,628.
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,730,410.	6,678,164.
			nilar amounts paid (Part IX, column (A), lines 1-3)		0.	1,200,125.
	14	Benefits paid	to or for members (Part IX, column (A), line 4)		0.	0.
ses	15	Salaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10) $_{\ldots\ldots\ldots}$		3,052,101.	3,233,107.
Expenses	16a	Professional f	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) 570, 884	🖵	0.	0.
Exp	b	Total fundrais	ing expenses (Part IX, column (D), line 25)	•	3,122,709.	3,457,604.
			es (Part IX, column (A), lines 11a-11d, 11f-24e) s. Add lines 13-17 (must equal Part IX, column (A), line 25)		6,174,810.	7,890,836.
		-	expenses. Subtract line 18 from line 12		-444,400.	-1,212,672.
or					ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (I	Part X, line 16)		11,828,916.	10,442,638.
it As			(Part X, line 26)		3,930,324.	3,788,489.
			fund balances. Subtract line 21 from line 20		7,898,592.	6,654,149.
	nrt II	Signature		1 - 4 - 1	and a stand of the stand	den av de de la 11, 11, 11, 11, 11, 11, 11, 11, 11, 11
			I declare that I have examined this return, including accompanying schedules and			⁷ knowledge and belief, it is
ưue,	correc	n, and complete	. Declaration of preparer (other than officer) is based on all information of which p	neparer	nas any knowledge.	

Sign Here	Signature of officer JENNIFER PURYEAR, BOAR Type or print name and title	D PRESIDENT	Date					
Print/Type preparer's name Preparer's signature Date Check PTIN								
Paid FRANCES E. LEAHY FRANCES E. LEAHY 10/14/19 for P00713593								
Preparer								
Use Only Firm's address 555 GREAT CIRCLE ROAD								
NASHVILLE, TN 37228 Phone no.615-242-7351								
May the IRS discuss this return with the preparer shown above? (see instructions)								
832001 12-3	832001 12-31-18 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018)							

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

SEE SCHEDULE 0 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2? Yes If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes If "Yes," describe these new services accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, i revenue, if any, for each program service reported. a (code:		990 (2018) NASHVILLE BALLET	58-1440788	Pa
Briefly describe the organization's mission: SEE SCHEDULE Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990 E2? If Yes,* describe these new services on Schedule O. Did the organization cases conducting, or make significant changes in how it conducts, any program services? IVes If Yes,* describe these changes on Schedule O. Describe the organization cases conducting, or make significant changes in how it conducts, any program services, as measured by expenses section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, revenue, if any, for each program service reported. a (Code:) (Expenses \$ 6,863,017. including grants of \$ 1,200,125.) (Revenue \$ 3,749, SEE SCHEDULE O	Par			
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Did the organization cease conducting, or make significant changes in how it conducts, any program services?		prior Form 990 or 990-EZ?	Yes	Х
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SEE SCHEDULE O	-	revenue, if any, for each program service reported.	3 7/0	<u>Q /</u>
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	4c	(Code:) (Expenses \$ including grants of \$) (Revenue	ie \$	
		·		
	4 -			
d Other program services (Describe in Schedule O.)	4d		Ň	
(Expenses \$ including grants of \$) (Revenue \$) e Total program service expenses ► 6,863,017.	40	C 0 C 2 0 1 F)	
e Total program service expenses ► 6,863,017. Form 9	4e	Total program service expenses P 0,005,017.	Lower C	
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NASHVILLE BALLET

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	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			x
	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			x
-	during the tax year? If "Yes," complete Schedule C, Part II	4		
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? <i>If</i> "Yes," <i>complete Schedule C, Part III</i>	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		
0	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u>'</u>		
U	Schedule D, Part III	8		x
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			x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		
	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	Х	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			x
	Schedule D, Parts XI and XII	12a		
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	101	х	
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Δ	x
13	Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
14a	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	148		- 23
b	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	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 other assistance to or for any	115		<u> </u>
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
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Form	990	(2018)	

NASHVILLE BALLET

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals 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			l
	Schedule K. If "No," go to line 25a	24a		X
b	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			
	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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			37
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	37	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X	
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	v	X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
•	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
20	If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
~~	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		x
04	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24	x	
25.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34	- 23	x
		35a		- 23
u	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?	330		
00	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	50		
57	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	- 57		
00	Note. All Form 990 filers are required to complete Schedule O	38	x	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 131			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
-	(gambling) winnings to prize winners?	1c	Х	
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Form 990	(2018)) NASHVILLE	BALLET	
Part V	St	atements Regarding Other	IRS Filings and Tax	c Compliance (continued)

NASHVILLE BALLET

28 Enter the number of employees reported on form W-3, Transmital of Wage and Tax Statements, 2a 183 29 It aleat one is reported on line 2a, did the organization file all required federal employment tax returns? 2a X 30 Did the organization have unrulated business gross income of \$1,000 or more during the year? 3a X 44 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a framatial account in a foreign contry. 4a X 45 If 'Yes, 'reft the mane of the foreign contry. 5a X 56 Was the organization have an ophybicit dax short any time during the axyear? 5a X 58 einstructions for filling requirements tor FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X 50 Bank and pairs only the organization factor the ange and any time during the axyear? 5a X 60 Bost the organization any tax to decirable accontributors? 5b X 70 Organization any tax to dedicable accontributors? 5b X 71 Yes, ' indicable the organization include with very solicitation an express statement that such contributors or gifts were not tax dedicables acchirable contributors? 7a X 70 </th <th></th> <th></th> <th></th> <th>Yes</th> <th>No</th>				Yes	No	
b If a less to ne is reported on line 2 a, diff the organization file all required to enfiel (see Instructions) 20 X Note, If the sum of lines 1 and 2 is greater than 250, you may be required to enfiel (see Instructions) 30 X Diff the organization have unrelated business greater than 250, you may be required to enfiel (see Instructions) 30 X At any time during the calandary sun, diff the organization have an interest in, or a signature or other authority over, a financial account? 44 X b If 'ves, "instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FEAR). 56 X See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FEAR). 56 X D Id any taxable party notify the organization file more 1886 f? 56 X D Id any taxable party notify the organization file more 1886 f? 56 X D Id any taxable party notify the organization file more subcets that are contributions? 66 X D If 'ves, "id difte organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under sector 170(c). 70 70 X D Id the organization necke a gavint in excess 01 Sn made partly as a contribution and partly for goods and services provided 1 the parefile as the any contribution of quality inderes	2a					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Image: Control of Control of Control of Control Contro Control Control Control Control Control Contro Contro		filed for the calendar year ending with or within the year covered by this return 2a 2a 183				
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16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?			15			
	16		16		х	
		If "Yes," complete Form 4720, Schedule O.	.0			

Form **990** (2018)

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Form 990 (2018)

NASHVILLE BALLET

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.

Sec	Check if Schedule O contains a response or note to any line in this Part VI			
	tion A. doverning body and Management		Yes	Γ
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 46		100	t
	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.			
h	Enter the number of voting members included in line 1a, above, who are independent 1b 45			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
2		2		ľ
2	officer, director, trustee, or key employee?	2		╉
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			I
	of officers, directors, or trustees, or key employees to a management company or other person?	3		╀
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		┦
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		┦
6	Did the organization have members or stockholders?	6		4
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			l
	more members of the governing body?	7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			l
	persons other than the governing body?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			T
	The governing body?	8a	х	I
h	Each committee with authority to act on behalf of the governing body?	8b	X	t
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	0.0		t
5	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		
	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		
	tion B. Tonoico (mis Section D requests information about policies not required by the internal nevenue code.)		Yes	1
0-	Did the experimetion have lead charters by another or efficience	10-	res	┨
	Did the organization have local chapters, branches, or affiliates?	10a		┨
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		4
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			ļ
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			Ι
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	1
4	Did the organization have a written document retention and destruction policy?	14	Х	t
15	Did the process for determining compensation of the following persons include a review and approval by independent			t
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			I
_		45.0	х	ł
	The organization's CEO, Executive Director, or top management official	15a	X	┨
b	Other officers or key employees of the organization	15b	~	╁
	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			ļ
	taxable entity during the year?	16a		1
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		
ec	tion C. Disclosure			
7	List the states with which a copy of this Form 990 is required to be filed $igarbox{TN}$			
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A if applicable), 990, and 990 T (Section 501(c)(3)	s only	avail	а
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
3		u iii lafl	cial	
0	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	LISA FRENCH, EXECUTIVE DIRECTOR - 615-297-2966			
	3630 REDMON STREET, NASHVILLE, TN 37209			_
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_	6			
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Part VII	Compensation of Officers,	Directors,	Trustees,	Key Employ	ees, Highest	Compensated
	Employees, and Independe	ent Contrac	ctors			

Check if Schedule O contains a response or note to any line 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. Т

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average		not c		more	than		Reportable	Reportable	Estimated
	hours per					is bot pr/trus		compensation	compensation	amount of
	week (list any	tor						from the	from related organizations	other compensation
	hours for	Individual trustee or director				eq		organization	(W-2/1099-MISC)	from the
	related	stee or	ustee			en sat		(W-2/1099-MISC)		organization
	organizations	al trus	onal tr		loyee	comp				and related
	below line)	dividu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
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BOARD MEMBER	1.00	x						0.	0.	0.
(2) LANCE BLOOM	1.00									
BOARD MEMBER		x						0.	0.	0.
(3) ELIZABETH CATO	1.00									
BOARD MEMBER		x						0.	0.	0.
(4) KERRI CAVANAUGH	1.00									
BOARD MEMBER		X						0.	0.	0.
(5) MONICA CINTADO-SCOKIN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(6) LAURA COOPER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) ALLISON COTTON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) LAURA CURRIE	1.00									
VICE PRESIDENT		х		Х				0.	0.	0.
(9) SAM DASHIELL	1.00									
BOARD MEMBER		X						0.	0.	0.
(10) PATRICIA EASTWOOD	1.00									0
BOARD MEMBER	0.25	X						0.	0.	0.
(11) LAURIE ESKIND	1.00									0
BOARD MEMBER	1.00	X						0.	0.	0.
(12) CATHERINE GEMMATO-SMITH BOARD MEMBER	0.25	x						0.	0.	0.
(13) SUZAN GIBBS ILIC	1.00	^						0.	0.	0.
BOARD MEMBER	1.00	x						0.	0.	0.
(14) GERRY HAYDEN	1.00								••	
BOARD MEMBER	1.00	x						0.	0.	0.
(15) KAY HELLER	1.00									
BOARD MEMBER		x						0.	0.	0.
(16) ANNA HEMNES	1.00									
BOARD MEMBER		x						0.	0.	0.
(17) KINDY HENSLER	1.00					1				
BOARD MEMBER		x						0.	0.	0.
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(24) MARY MORGAN KETCHEL 1.00 x 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	(23) BRANT PHILLIPS	1.00												
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(25) NEIL KRUGMAN 1.00 X 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	(24) MARY MORGAN KETCHEL	1.00												
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Name and business address Description of services Compensation NASHVILLE SYMPHONY, ONE SYMPHONY PLACE, NASHVILLE, TN 37201-2031 SYMPHONY FOR BALLET SEASON 418,506. BELMONT UNIVERSITY LODGING FOR SI 241,355. 1900 BELMONT BLVD, NASHVILLE, TN 37206 STUDENTS 241,355. 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 2		-	-								•			
Name and business address Description of services Compensation NASHVILLE SYMPHONY, ONE SYMPHONY PLACE, NASHVILLE, TN 37201-2031 SYMPHONY FOR BALLET SEASON 418,506. BELMONT UNIVERSITY LODGING FOR SI 241,355. 1900 BELMONT BLVD, NASHVILLE, TN 37206 STUDENTS 241,355. 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 2	(A)								(B)			(C)	
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BELMONT UNIVERSITY LODGING FOR SI 1900 BELMONT BLVD, NASHVILLE, TN 37206 STUDENTS 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶		SYMPHONY	Z I	PLZ	ACI	Ξ,				BALLET				
1900 BELMONT BLVD, NASHVILLE, TN 37206 STUDENTS 241,355. 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 2	F											418	3,5	06.
Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 2										SI				
\$100,000 of compensation from the organization 2	1900 BELMONT BLVD, NASHV	ILLE , 1	ΓN	37	72(06			STUDENTS			241	L , 3!	55.
\$100,000 of compensation from the organization 2														
\$100,000 of compensation from the organization 2														
\$100,000 of compensation from the organization 2														
\$100,000 of compensation from the organization 2														
\$100,000 of compensation from the organization 2														
\$100,000 of compensation from the organization 2	• Total number of independent contract (الانتقاد م	o+ ''		d + -	41	oc "			are their				
			IOT II	mte	u to	tho	se II: 2	stec	a above) who received m	lore than				
			ידי	NUZ	<u>\</u> T		N S	SH	EETS			Form C	90 (2	2018)

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Part VII Section A. Officers, Directors, T	rustees, Key E	mplo	oyee	s, a	nd I	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average			Pos	ition	1		Reportable	Reportable	Estimated
	hours	(c	heck	all t	that	app	oly)	compensation	compensation	amount of
	per							from	from related	other
	week	5				loyee		the	organizations	compensation
	(list any	irecto				emp		organization	(W-2/1099-MISC)	from the organization
	hours for related	e or c	tee			satec		(W-2/1099-MISC)		and related
	organizations	truste	al trus		yee	mpen				organizations
	below	d ual 1	ution	L	mplo	st co	5			e gamzatorio
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) DIONNE LUCAS	1.00									
BOARD MEMBER		X						0.	0.	0.
(28) MELISSA MAHANES	1.00									
BOARD MEMBER		X						0.	0.	0.
(29) ADRIENNE MCRAE	1.00									
BOARD MEMBER		X						0.	0.	0.
(30) DON MOODY	1.00									
BOARD MEMBER		X						0.	0.	0.
(31) ROGER MOORE	1.00									
BOARD MEMBER		x						0.	0.	0.
(32) JIM MUNRO	1.00									
BOARD MEMBER	0.25	x						0.	0.	0.
(33) ANISSA NELSON-CARLISLE	1.00									
BOARD MEMBER		x						0.	0.	0.
(34) STEPHEN PELUSO	1.00									
BOARD MEMBER	0.25	x						0.	0.	0.
(35) JENNIFER PURYEAR	1.00									
PRESIDENT		X		Х				0.	0.	0.
(36) BROOKE TRUSLEY	1.00									
BOARD MEMBER		x						0.	0.	0.
(37) GRACE RICH FRENCH	1.00									
BOARD MEMBER		x						0.	0.	0.
(38) SHARON SANDAHL	1.00									
BOARD MEMBER		x						0.	0.	0.
(39) SHANNON SANDERS	1.00									
BOARD MEMBER		x						0.	0.	0.
(40) JOHN CARTER CASH	1.00									
BOARD MEMBER		x						0.	0.	0.
(41) DALLAS WILT	1.00									
BOARD MEMBER		x						0.	0.	0.
(42) DAN SLIPKOVICH	1.00							-		
BOARD MEMBER	0.25	x						0.	0.	0.
(43) JOE SOWELL	1.00							-		-
BOARD MEMBER		x						0.	0.	0.
(44) JULIE STADLER	1.00									,
BOARD MEMBER		x						0.	0.	0.
(45) JOHNNA WATSON	1.00									
BOARD MEMBER		x						0.	0.	0.
(46) HEATHER THORNE	1.00									
SECRETARY		x		х				0.	0.	0.
					•		-			
Total to Part VII, Section A, line 1c										
•		_		_	_	_	_			

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Form 990 NASHVIL	LE BALLE ¹		ovee	s, a	nd F	liah	est	Compensated Employ	58-144 ees (continued)		
(A)	(B)	<u> </u>	,	(C				(D)	(E)	(F)	
Name and title	Average		Position			I		Reportable	Reportable	Estimated	
	hours	(cl				app	ly)	compensation	compensation	amount of	
	per							from	from related	other	
	week	5				loyee		the	organizations	compensatio	
	(list any	irecto				emp		organization	(W-2/1099-MISC)	from the	
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related	
	organizations	ru ste	l trus		ee	npen				organizations	
	below	dual t	tiona		loldu	st cor	-			organization	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				
47) PAUL VASTERLING	40.00	-	_	0	-	-	4				
ARTISTIC DIRECTOR	0.25			x				128,018.	0.	13,417	
48) LISA FRENCH	40.00										
XECUTIVE DIRECTOR	0.25			x				121,000.	0.	10,908	
		<u> </u>									
		1									
otal to Part VII, Section A, line 1c								249,018.		24,325	

(B) (C) (D) Revenue excluded (A) Related or Unrelated Total revenue from tax under exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b 41,229 c Fundraising events 1c 50,734. d Related organizations 1d 324,224. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 2,178,029 similar amounts not included above 86,071 g Noncash contributions included in lines 1a-1f: \$ 2,594,216. h Total. Add lines 1a-1f ... ► Business Code 611600 1,821,223.1,821,223. 2 a SCHOOL TUITION Program Service Revenue 711120 TICKET SALES 1,757,375.1,757,375. b c PROGRAM RENTALS & TOUR 900099 120,275. 120,275. COMMUNITY ENGAGEMENT 900099 18,139. 18,139. d е f All other program service revenue 3,717,012. g Total. Add lines 2a-2f . ► Investment income (including dividends, interest, and 3 40,638 40,638. other similar amounts) ► 4 Income from investment of tax-exempt bond proceeds ► 5 Royalties ► (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses c Rental income or (loss) ► d Net rental income or (loss) . 7 a Gross amount from sales of (i) Securities (ii) Other 657,837. assets other than inventory b Less: cost or other basis 657,167. and sales expenses **c** Gain or (loss) 670. 670. 670. d Net gain or (loss) ► 8 a Gross income from fundraising events (not Revenue including \$ 41,229. of contributions reported on line 1c). See Part IV, line 18 _____ a 542,571 Other b Less: direct expenses b 249,776. 292,795. 292,795. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses c Net income or (loss) from gaming activities ► 10 a Gross sales of inventory, less returns 63,233 and allowances а 30,400. b Less: cost of goods sold b 32,833. 32,833. c Net income or (loss) from sales of inventory ► Miscellaneous Revenue Business Code 11 a b С d All other revenue ► e Total. Add lines 11a-11d 6,678,164.3,749,845. 0. 334,103. Total revenue. See instructions 12 Form 990 (2018)

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Form 990 (2018)

NASHVILLE BALLET

Check if Schedule O contains a response or note to any line in this Part VIII

Part VIII Statement of Revenue NASHVILLE BALLET

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a respo Do not include amounts reported on lines 6b, Zh. Sh. ond 10h of Port VIII	nse or note to any line in (A) Total expenses	(B) Program service	(C) Management and general expenses	(D) Fundraising
7b, 8b, 9b, and 10b of Part VIII.		ĕxpenses	general expenses	expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,200,125.	1,200,125.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors,				
trustees, and key employees	272,691.	99,058.	91,826.	81,807
6 Compensation not included above, to disqualified				
persons (as defined under section $4958(f)(1)$) and				
persons described in section 4958(c)(3)(B)	2,498,017.	2,132,788.	124,956.	240,273
7 Other salaries and wages	2,490,017.	2,132,700.	124,950.	240,273
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	14,198.	12,736.	348.	1.114
9 Other employee benefits	229,670.	189,972.	15,550.	<u> </u>
10 Payroll taxes	218,531.	177,011.	16,826.	24,694
11 Fees for services (non-employees):		, -		,
a Management				
b Legal	13,973.	13,473.	500.	
c Accounting	21,665.		21,665.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	6,056.		6,056.	
g Other. (If line 11g amount exceeds 10% of line 25,	120 040	74 0 6 1	c 02c	
column (A) amount, list line 11g expenses on Sch O.)	136,949. 355,548.	74,961. 342,398.	<u>6,936</u> 7,837.	<u>55,052</u> 5,313
12 Advertising and promotion	555,540.	542,590.	1,057.	J,JIJ.
13 Office expenses14 Information technology				
14 Information technology15 Royalties				
16 Occupancy	466,369.	426,684.	13,938.	25,747
17 Travel	162,364.	152,503.	5,464.	4,397.
18 Payments of travel or entertainment expenses		-		-
for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	79,378.	64,067.	6,149.	9,162.
21 Payments to affiliates	455 445	404 201	1 = 0.40	26 100
22 Depreciation, depletion, and amortization	455,445.	404,301.	15,042.	36,102
23 Insurance	45,807.	34,952.	6,026.	4,829
24 Other expenses. Itemize expenses not covered 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.)				
a ARTIST FEES, LICENSES,	716,246.	708,165.	8,081.	0.
b THEATER AND PRODUCTION	565,185.	563,528.	480.	1,177.
c BANK & TICKET FEES	198,191.	180,104.	7,199.	10,888
d EQUIPMENT AND SUPPLIES	134,637.	52,543.	79,218.	2,876.
e All other expenses	99,791.	33,648.	22,838.	43,305
25 Total functional expenses. Add lines 1 through 24e	7,890,836.	6,863,017.	456,935.	570,884
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)				Form 990 (2018

NASHVILLE BALLET

		Check if Schedule O contains a response or note to any line in this Part X		1	
			(A) Beginning of year		(B) End of year
	.				-
	1	Cash - non-interest-bearing			724,031. 990,184.
	2	Savings and temporary cash investments			
	3	Pledges and grants receivable, net			540,426.
	4	Accounts receivable, net	143,307.	4	190,285.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete		_	
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributir	ng		
		employers and sponsoring organizations of section 501(c)(9) voluntary		-	
ets		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	204 012	8	135,119.
	9	Prepaid expenses and deferred charges		9	305,808.
	10a	Land, buildings, and equipment: cost or other	1		
		basis. Complete Part VI of Schedule D			7 452 662
		Less: accumulated depreciation 10b 3,821,358	1 001 007		7,452,663.
	11	Investments - publicly traded securities			0.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	104 100
	15	Other assets. See Part IV, line 11	11 000 010		104,122.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	004 000		10,442,638.
	17	Accounts payable and accrued expenses			197,611.
	18	Grants payable		18	1,169,429.
	19	Deferred revenue		19	1,109,429.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,			
bilit		key employees, highest compensated employees, and disqualified persons.			
Lial		Complete Part II of Schedule L		22	2,421,449.
	23	Secured mortgages and notes payable to unrelated third parties			2,421,449.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of		05	
	00	Schedule D	3,930,324.	25 26	3,788,489.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and		20	5,700,405.
		complete lines 27 through 29, and lines 33 and 34.			
ces	27		6,054,873.	27	5,613,812.
alan	28	Unrestricted net assets			0.
ΪB _α	20				1,040,337.
nnc	29	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here		29	1,040,007.
Ē		and complete lines 30 through 34.			
s S	20			20	
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
t As	31	Paid-in or capital surplus, or land, building, or equipment fund		31 32	
Net	32	Retained earnings, endowment, accumulated income, or other funds			6,654,149.
	33	Total net assets or fund balances		33	10,442,638.
	34	Total liabilities and net assets/fund balances		34	<u>10,442,050</u>

Form 990 (2018)

13

Form 990 (2018)

Part X Balance Sheet

Form	1990 (2018) NASHVILLE BALLET	58-	144078	8	Page 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,6	78,	164.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,8	90,	836.
3	Revenue less expenses. Subtract line 2 from line 1	3			672.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			592.
5	Net unrealized gains (losses) on investments	5		29,	974.
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		-1,	797.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	6,6	54,	149.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
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	0.	- [Ye	es No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed				
	separate basis, consolidated basis, or both:				
b	Were the organization's financial statements audited by an independent accountant?			b Ž	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
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?		2	cΣ	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Aud	dit		
	Act and OMB Circular A-133?		3	a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red auc	lit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				
			Fo	rm 99	0 (2018)

832012 12-31-18

SCHEDULE A	
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Department of the Treasury

Internal Revenue Service

1	Form	990	or	990-EZ	1
1		000	U 1		۰,

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2018
Open to Public Inspection

Name of the organization	
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Nam	e of t	he organization אזא כע	17	₽M					r identification number $58-1440788$	
Pa	rt I	Reason for Public	VILLE BALL			in month C			0-1440/00	
								S.		
	organ	ization is not a private found								
1		A church, convention of ch					1)(A)(i).			
2		A school described in sect								
3		A hospital or a cooperative	hospital service org	anization described in s	ection 170	0(b)(1)(A)(i	ii).			
4		A medical research organiz	ation operated in co	onjunction with a hospita	l describe	d in sectio	on 170(b)(1)(A)(iii). Enter	the hospital's name,	
		city, and state:								
5		An organization operated for	or the benefit of a co	ollege or university owne	d or opera	ted by a g	overnmental	unit descrit	oed in	
		section 170(b)(1)(A)(iv). (Complete Part II.)								
6		A federal, state, or local go	vernment or govern	mental unit described in	section 17	70(b)(1)(A)	(v).			
7	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in								
		section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)					
9		An agricultural research org	ganization described	l in section 170(b)(1)(A)((ix) operate	ed in conju	unction with a	land-grant	college	
		or university or a non-land-	grant college of agrid	culture (see instructions)	. Enter the	name, cit	y, and state c	of the colleg	je or	
		university:								
10		An organization that norma	Illy receives: (1) more	e than 33 1/3% of its sup	oport from	contributi	ons, member	ship fees, a	and gross receipts from	
		activities related to its exen								
		income and unrelated busi								
		See section 509(a)(2). (Co		, , , , , , , , , , , , , , , , , , ,			2	0	,	
11		An organization organized		sively to test for public sa	afety. See	section 50	09(a)(4).			
12		An organization organized						arry out the	e purposes of one or	
		more publicly supported or		•				-		
		lines 12a through 12d that								
а		Type I. A supporting orga							/ giving	
		the supported organization								
		organization. You must o								
b		Type II. A supporting org			tion with it	ts support	ed organizati	on(s). bv ha	avina	
		control or management of								
		organization(s). You mus								
с		Type III functionally inte			in connec	tion with	and functiona	ally integrat	ed with	
-		its supported organizatio							,	
d		Type III non-functionally						orted organ	ization(s)	
		that is not functionally int								
		requirement (see instruct								
۵		Check this box if the orga	,	•		-				
Ũ		functionally integrated, o					x 1900 i, 1900	, rype in		
f	Ente	er the number of supported of		, , ,	0 0					
		vide the following information							•	
3		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount o	f monetary	(vi) Amount of other	
		organization		(described on lines 1-10 above (see instructions))	Yes	ing document? No	support (see i	nstructions)	support (see instructions)	
Tate										
Tota	<u> </u>						L		I	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018 15

Schedule A (Form 990 or 990 EZ) 2018 NASHVILLE BALLET

58-1440788 Page 2

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2,176,988.	2,954,689.	1,806,672.	1,974,411.	2,594,216.	11,506,976.
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 \dots						
4	Total. Add lines 1 through 3	2,176,988.	2,954,689.	1,806,672.	1,974,411.	2,594,216.	11,506,976.
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)						602,745.
	Public support. Subtract line 5 from line 4.						10,904,231.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	2,176,988.	2,954,689.	1,806,672.	1,974,411.	2,594,216.	11,506,976.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots	20,578.	29,029.	30,766.	31,246.	40,638.	152,257.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on \dots		384,009.	267,549.	393,066.	292,795.	1,337,419.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	17,909.	16,582.	15,960.	4,201.		54,652.
11	Total support. Add lines 7 through 10						13,051,304.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 16	,678,119.
13	First five years. If the Form 990 is for	the organization's	s first, second, third	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
0-	organization, check this box and stop	here					
	ction C. Computation of Publ						
	Public support percentage for 2018 (I					14	83.55 %
	Public support percentage from 2017					15	87.73 %
16a	33 1/3% support test - 2018. If the c	-					
	stop here. The organization qualifies						
b	33 1/3% support test - 2017. If the c						
	and stop here. 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 th						
	organization meets the "facts-and-circ						
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b		nd see instruction	

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990 EZ) 2018 NASHVILLE BALLET

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

58-1440788 Page 3

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

See	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	3 (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						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b	L					
	Public support. (Subtract line 7c from line 6.)						
	indar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	3 (f) Total
	Amounts from line 6	(a) 2014	(6) 2013	(0) 2010	(0) 2017	(e) 2010	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
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	rd, fourth, or fifth	tax year as a secti	ion 501(c)(3) or	rganization,
	check this box and stop here						>
See	ction C. Computation of Publ	ic Support Pe	ercentage				
15	Public support percentage for 2018 (line 8, column (f), d	divided by line 13,	column (f))		15	%
	Public support percentage from 2017					16	%
See	ction D. Computation of Inve	stment Incom	ne Percentage				
	Investment income percentage for 20		B				%
	Investment income percentage from					18	%
198	33 1/3% support tests - 2018. If the						
	more than 33 1/3%, check this box a						►
Ľ	33 1/3% support tests - 2017. If the						
20	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	n dia not check a	DOX ON INC. 14, 19	a, or 190, Check 1			
8320	23 10-11-18			17	Sci	neaule A (Forr	m 990 or 990-EZ) 2018

09381014 781331 16435-16435 2018.04030 NASHVILLE BALLET

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

832024 10-11-18

Schedule A (Form 990 or 990-EZ) 2018

18 NACHI

			Vee	Na
	Lies the eventiation constant a gift or contribution from any of the following persons (Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	44-		
b	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above?If "Yes" to a, b, or c, provide detail in Part VI. tion B. Type I Supporting Organizations	11c		
Sec	tion B. Type I Supporting Organizations		Vee	Na
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	L The organization is the parent of each of its supported organizations. Complete line 3 below.			
с	L The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
~	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
832024	5 10-11-18 Schedule A (Form 9		0-F7	2018
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Schedule A (Form 990 or 990 EZ) 2018 NASHVILLE BALLET

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	v integrate	d Type III supporting or	nanization (see

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2018

832026 10-11-18

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Sect	ion D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish exe						
2	Amounts paid to perform activity that directly furthers exemp						
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purpose	IS					
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.						
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which the	ne organization is responsive	e				
	(provide details in Part VI). See instructions.						
9	Distributable amount for 2018 from Section C, line 6						
10	Line 8 amount divided by line 9 amount						
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018			
_1	Distributable amount for 2018 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2018 (reason-						
	able cause required- explain in Part VI). See instructions.						
3	Excess distributions carryover, if any, to 2018						
a	From 2013						
b	From 2014						
C	From 2015						
d	From 2016						
e	From 2017						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
h	Applied to 2018 distributable amount						
i	Carryover from 2013 not applied (see instructions)						
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2018 from Section D,						
	line 7: \$						
-	Applied to underdistributions of prior years						
-	Applied to 2018 distributable amount						
	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2018, if						
	any. Subtract lines 3g and 4a from line 2. For result greater						
	than zero, explain in Part VI. See instructions.						
6	Remaining underdistributions for 2018. Subtract lines 3h						
	and 4b from line 1. For result greater than zero, explain in						
	Part VI. See instructions.						
7	Excess distributions carryover to 2019. Add lines 3j						
	and 4c.						
8	Breakdown of line 7:						
	Excess from 2014						
	Excess from 2015						
	Excess from 2016						
	Excess from 2017						
e	Excess from 2018						

Schedule A (Form 990 or 990-EZ) 2018

832027 10-11-18

Schedule A (Form 990 or 990-EZ) 2018 NASHVILLE BALLET

	Section D, line (See instruction	es 5, 6, and 8; and	Part V, Section	E, lines 2, 5, an	1a, 11b, and 11c; Pa 1c, 2a, 2b, 3a, and 3 d 6. Also complete t	his part for an	y additional inform	mation.
32028 10-11-1	8						Schedule A (Fori	m 990 or 990-EZ)
					22			

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

1

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Employer identification number

58-144078	8

NASHVILLE	BALLET

Drganization type (check one):					
Section:					
X 501(c)(3) (enter number) organization					
4947(a)(1) nonexempt charitable trust not treated as a private foundation					
527 political organization					
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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't 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 its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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) (2018)

Name of organization

Page 2 Employer identification number

58-1440788

NASHVILLE BALLET

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 161,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 2 X Person Payroll 80,000. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 3 X Person Payroll 448,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Х 4 Person Payroll 339,021. Noncash \$ omplete Part II for

			noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5		\$ <u>208,450.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6		\$148,224.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

24 35 2018.04030 NASHVILLE BALLET

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823452 11-08-18

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

NASHVILLE BALLET

58-1440788

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7		\$ <u>158,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll On Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
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		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
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		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

09381014 781331 16435-16435 2018.04030 NASHVILLE BALLET

25

823452 11-08-18

Schedule B (Form 990, 990-EZ, or 990-PF)	(2018)
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Name of organization

Employer identification number

NASHVILLE BALLET

58 - 1440788

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
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		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Page 4

Intermediate Exclusively religious, charitable, etc., contributions to organizations described in section 501(07), 80, or 1(90 that total more than 51,000 theorem and mark that the total of 51,000 or test of wayner, that the total of 51,000 or test of	art III	LLE BALLET	s to organizations described in	section 501(c)(7) (8) or (10) the	58 - 1440788
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Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.



Name of the organization

Employer identification number

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes' on Form 980, Part IV, lies 6. I Total number at end of yes: (a) Donor advised funds (b) Funds and other accounts Aggregate value of contributions to (dumg year) (a) Donor advised funds (b) Funds and other accounts Aggregate value of contributions to (dumg year) (b) Humb and the sasets held in donor advised funds (c) Donor advised funds B tothe organization inform at grantes, concer, and donor advisors in writing that grant funds can be used only for charatabe purposes and not the benefit Of the donor of advisor, of ran writing that grant funds can be used only for charatabe purposes. (ves		NASHVILLE BALLET			58-1440788
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 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 95	7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	ation easeme	nts during the year
 and section 170(h)(4)(B)(ii)? Yes No 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in For		►\$			
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 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X (ii) Assets included in Form 990, Part X 2 If the organization required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X 		and section 170(h)(4)(B)(ii)?			YesNo
conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X \$ (iii) Assets included on Form 990, Part X \$ (iii) Assets included on Form 990, Part X \$ (iii) Assets included on Form 990, Part X \$ (iii) Assets included on Form 990, Part X \$ (iii) Assets included on Form 990, Part X \$ (iii) Ass	9				and balance sheet, and
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 \$ Assets included in Form 990, Part X \$ Assets included in Form 990, Part X \$<th></th><th>include, if applicable, the text of the footnote to the organization</th><th>ation's financial statements that describes</th><th>the organiza</th><th>tion's accounting for</th>		include, if applicable, the text of the footnote to the organization	ation's financial statements that describes	the organiza	tion's accounting for
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 historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X \$ Assets included in Form 990, Part X 		Complete if the organization answered "Yes" on Forn	n 990, Part IV, line 8.		
 the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X c S 	1a	If the organization elected, as permitted under SFAS 116 (As	SC 958), not to report in its revenue stater	ment and bal	ance sheet works of art,
 b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X c S 		historical treasures, or other similar assets held for public ex	hibition, education, or research in furthera	ince of public	service, provide, in Part XIII,
 treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X b Assets included in Form 990, Part X b Assets included in Form 990, Part X 		the text of the footnote to its financial statements that descr	ribes these items.		
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 relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X b Assets included in Form 990, Part X 					
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the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X	2				
a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X	-				:=
b Assets included in Form 990, Part X 🕨 \$	я			•	\$

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	chedule D (Form 990) 2018 NASHVILLE BALLET 58-1440788 Page 2								
Pa	t III Organizations Maintaining C	Collections of Ar	t, Historical Tr	easures, or Ot	her Simila	ar Asse	ts(contin	ued)	
3	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items								
	(check all that apply):								
а	Public exhibition d Loan or exchange programs								
b									
с	Preservation for future generations								
4	Provide a description of the organization's c	ollections and explair	n how they further t	he organization's ex	kempt purpo	ose in Par	t XIII.		
5	During the year, did the organization solicit of								
	to be sold to raise funds rather than to be m	aintained as part of t	he organization's co	ollection?			Yes		No
Pa	t IV Escrow and Custodial Arran), Part IV,	line 9, or		
	reported an amount on Form 990, Pa		0			, ,	,		
1a	Is the organization an agent, trustee, custod	ian or other intermed	iarv for contribution	is or other assets n	ot included				
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIII					·····			
~			lowing table.				Amount		
c	Beginning balance				1c		7 4110 4110		
	Additions during the year								
	Distributions during the year								
f	Ending balance				16 1f				
	Did the organization include an amount on F						Yes		No
	If "Yes," explain the arrangement in Part XIII.				• • • • • • • • •	····· —			Ī
Pai									_
		(a) Current year	(b) Prior year	(c) Two years back	-	/ears back	(e) Four	vears	back
19	Beginning of year balance	1,095,624.	1,062,168.	894,449	., ,	92,103.			153.
b	Contributions	168,045.	21,158.			68,510.			100.
	Net investment earnings, gains, and losses	-2,194.	57,656.	86,087		53,855.			925.
	Grants or scholarships	2,191.	57,000.		•			,	, , , , , , , , , , , , , , , , , , , ,
e	Other expenditures for facilities	1,200,125.	45,358.	20 544		20 010		٩	075.
	and programs	1,200,123.	45,550.	20,544	•	20,019.		, د	,075.
	Administrative expenses	61,350.	1,095,624.	1,062,168		94,449.		202	103.
g	End of year balance	,			•	94,449.		292,	103.
2	Provide the estimated percentage of the cur	rent year end balance		a)) neid as:					
	Board designated or quasi-endowment		_%						
b	Permanent endowment ► 100.00	%							
С	Temporarily restricted endowment	%							
-	The percentages on lines 2a, 2b, and 2c sho								
за	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administered for	r the organiz	zation	Г	~	
	by:							Yes X	No
	(i) unrelated organizations						3a(i)	X	
	(ii) related organizations						3a(ii)	X	
b	If "Yes" on line 3a(ii), are the related organiza					••••••	3b	Δ	
	Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment.								
Fai					V 15 - 10				
	Complete if the organization answere					<u> </u>			
	Description of property	(a) Cost or ot	• • •		Accumulate		(d) Book	value	е
	basis (investment) basis (other) depreciation								
	Land			<u> </u>	E01 2	0.4	<u> </u>		0 5
	Buildings		8,22	6,979. 1	,591,3	<u>°4 •</u>	6,635	5,5	32.
	Leasehold improvements			~ ~ ~ ~ ~	100 5	1			<u></u>
d	Equipment				,183,7		/96	<u>, 5</u>	37.
	Other			6,793.	46,2		20),5	<u>31.</u>
Tota	Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part .	X, column (B), line 1	0c.)			7,452		
					:	Schedule	D (Form	990)	2018

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.					
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value			
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) 🕨					
Part VIII Investments - Program Related.					

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Other Liabilities. Part X

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. Liability for uncertain tax positions. 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 🚺

Schedule D	(Form 990)	018
Schedule D	F0111 330	2010

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Sche	edule D (Form 990) 2018 NASHVILLE BALLET		58-1440788 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stat	ements With Reve	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	tements With Expe	enses per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.	
1	Total expenses and losses per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	
Pa	rt XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

THE ORIGINAL PRINCIPAL IS INVESTED INDEFINITELY AND INCOME GENERATED FROM

THE PRINCIPAL IS USED TO SUPPORT THE MISSION OF NASHVILLE BALLET.

PART X, LINE 2:

MANAGEMENT PERFORMS AN EVALUATION OF ALL INCOME TAX POSITIONS TAKE	N OR
EXPECTED TO BE TAKEN IN THE COURSE OF PREPARING THE BALLET'S INCOM	Ε ΤΑΧ
RETURNS TO DETERMINE WHETHER THE INCOME TAX POSITIONS MEET A "MORE	LIKELY
THAN NOT" STANDARD OF BEING SUSTAINED UNDER EXAMINATION BY THE APP	LICABLE
TAXING AUTHORITIES. MANAGEMENT HAS PERFORMED ITS EVALUATION OF ALL	INCOME
TAX POSITIONS TAKEN ON ALL OPEN INCOME TAX RETURNS AND HAS DETERMI	NED THAT
THERE WERE NO POSITIONS TAKEN THAT DO NOT MEET THE "MORE LIKELY TH	AN NOT"
832054 10-29-18 Schedule I) (Form 990) 2018
9381014 781331 16435-16435 2018.04030 NASHVILLE BALLET	16435-11

Schedule D (Form 990) 2018 NASHVIL	лгър	BALLET
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Part XIII Supplemental Information (continued)

STANDARD. ACCORDINGLY, THERE ARE NO PROVISIONS FOR INCOME TAXES, PENALTIES

OR INTEREST RECEIVABLE OR PAYABLE RELATING TO UNCERTAIN INCOME TAX

POSITIONS IN THE ACCOMPANYING FINANCIAL STATEMENTS.

Schedule D (Form 990) 2018

832055 10-29-18

SCHEDULE G	HEDULE G Supplemental Information Regarding Fundraising or Gaming Activities					vities	OMB No. 1545-0047		
(Form 990 or 990-EZ)	Complete if the	, or if the	2018						
	organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ.							Open to Public	
Department of the Treasury Internal Revenue Service	P P							Inspection	
Name of the organization		LE BALLET					Employer ide	ntification number	
Part I Fundrais		Complete if the organization answe	ered "Y	'es" 0	n Form 990 Part IV	line 1			
	complete this par			00 0					
		sed funds through any of the followir e Solicitat			Check all that apply overnment grants				
	email solicitations			0	nment grants				
c 🔄 Phone solici		g 🗔 Special							
d In-person so		or oral agreement with any individual	(inclu	dina o	fficers directors tru	stees	s or		
		art VII) or entity in connection with p					Yes	No	
	•	viduals or entities (fundraisers) pursu	uant to	agree	ements under which	the f	undraiser is to t	be	
compensated at le	east \$5,000 by the	organization.	1		1				
(i) Name and addres	s of individual	(ii) Activity	(iii) Did fundraiser have custody		(iv) Gross receipts	tò (Amount paid or retained by)	(vi) Amount paid to (or retained by)	
or entity (fund	draiser)	(ii) iointy	or cor	trol of utions?	from activity		fundraiser ted in col. (i)	organization	
			Yes	No					
Total									
3 List all states in wh or licensing.	ich the organizatio	on is registered or licensed to solicit	contrib	oution	s or has been notifie	d it is	exempt from r	egistration	
LHA For Paperwork R	eduction Act Not	ice, see the Instructions for Form	990 or	990-	EZ. S	Sche	dule G (Form 9	990 or 990-EZ) 2018	

832081 10-03-18

Schedule G (Form 990 or 990-EZ) 2018 NASHVILLE BALLET

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

			(a) Event #1 BALLET BALL	(b) Event #2	(c) Other events NONE 0	(d) Total events (add col. (a) through col. (c))
			(event type)	(event type)	(total number)	
	1	Gross receipts	577,442.			577,442
	2	Less: Contributions	41,229.			41,229
	3	Gross income (line 1 minus line 2)	536,213.			536,213
	4	Cash prizes				
0	5	Noncash prizes				
חווברו באחבוואבא	6	Rent/facility costs	33,128.			33,128
	7	Food and beverages	38,440.			38,440
- I	8	Entertainment	13,290.			13,290
	9	Other direct expenses	4 6 4 0 4 0			164,918
	11		line 3, column (d)	1 990, Part IV, line 19, or r	►	
Pai	11	Net income summary. Subtract line 10 from	line 3, column (d)			249,776 286,437 (d) Total gaming (add col. (a) through col. (c
	11	Net income summary. Subtract line 10 from II Gaming. Complete if the organization	line 3, column (d) a answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	286 , 4 37 (d) Total gaming (add
Pal	11 1	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	line 3, column (d) a answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	286 , 4 37 (d) Total gaming (add
Pal	11 tl	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue	line 3, column (d) n answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	286 , 4 37 (d) Total gaming (add
Pai	11 tl 1 2 3	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes	line 3, column (d) n answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	286,437 (d) Total gaming (add
Pal	11 tl 1 2 3	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes	line 3, column (d) n answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	286,437 (d) Total gaming (add
	11 1 2 3 4 5	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs	line 3, column (d) n answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	286,437 (d) Total gaming (add
	11 1 2 3 4 5 6	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	line 3, column (d) n answered "Yes" on Form (a) Bingo (a) Bingo	1990, Part IV, line 19, or r (b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming (c) Other gaming	286,437 (d) Total gaming (add

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? _____ Yes U No **b** If "Yes," explain:

832082 10-03-18

Schedule G (Form 990 or 990-EZ) 2018

Sch	edule G (Form 990 or 990-EZ) 2018 NASHVILLE BALLET 58-	1440	788	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	🗌 No
13	Indicate the percentage of gaming activity conducted in:			
a	I The organization's facility	13a		%
	An outside facility			%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	🗌 No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			
c	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor Mandatory distributions:			
	 Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the exemption of a state and other the state and the text of the state and the sta		Yes	□ No
Pa	organization's own exempt activities during the tax year ▶ \$ Int IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and P 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	'art III, li	nes 9,	9b, 10b,
8320	83 10-03-18 Schedule G (For 35	m 990 (or 990	-EZ) 2018
~ ~ `	55			

09381014 781331 16435-16435 2018.04030 NASHVILLE BALLET

832084 04-01-18	36	
		Schedule G (Form 990 or 990-EZ)

SCHEDULE I (Form 990)		Go	arants and Oth vernments, an ete if the organizatio	nd Individua	ls in the Ŭn " on Form 990, Pa	ited States		OMB No. 1545-0047 2018 Open to Public					
Department of the Treasury Internal Revenue Service		 Attach to Form 990. Go to www.irs.gov/Form990 for the latest information. 											
Name of the organizat	tion NASHVILLE	BALLET						Employer identification number 58-1440788					
Part I General Ir	nformation on Grants a												
	zation maintain records award the grants or assis						sistance, and the selec						
	: IV the organization's pro												
	nd Other Assistance to	_				anization answered "	es" on Form 990, Parl	t IV, line 21, for any					
1 (a) Name and ac	hat received more than t ddress of organization vernment	(b) EIN	(if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance					
NASHVILLE BALLET 3630 REDMON ST						FAIR MARKET		TRANSFER OF DONOR AND BOARD DESIGNATED ENDOWMENT TO SEPARATE					
NASHVILLE, TN 372	209	47-4340559	501(C)(3)	0.	1,200,125.	VALUE	INVESTMENTS	ENTITY, NASHVILLE BALLET					
	per of section 501(c)(3) a							<u>1.</u>					
	per of other organization k Reduction Act Notice			<u></u>				Schedule I (Form 990) (2018)					
			DLUMN (H) DE	SCRIPTION	IS								

NASHVILLE BALLET

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

DURING THE YEAR ENDED MAY 31, 2019, THE BALLET TRANSFERRED CERTAIN

DONOR-RESTRICTED AND BOARD-DESIGNATED NET ASSETS AND CORRESPONDING

INVESTMENTS TO THE NASHVILLE BALLET FOUNDATION UPON RECEIVING DONOR AND

BOARD APPROVAL.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: NASHVILLE BALLET FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TRANSFER OF DONOR AND BOARD

Schedule I (Eorm	000
Schedule I	FOUL	990

NASHVILLE BALLET

Part IV	Supplemental Information	ł.

DESIGNATED ENDOWMENT TO SEPARATE ENTITY, NASHVILLE BALLET FOUNDATION.

832291 04-01-18 Schedule I (Form 990)

SCHEDULE L		Tra	Insactior	ıs V	Vith	Inte	erested	Pe	ersons			ON	//B No.	1545-0	047
(Form 990 or 990-EZ)	Complete if	the o	organization and							26, 27	, 2 8a,		20	18	3
			28b, or 28c, o ► Atta				art V, line 38a Form 990-E2		l0b.			0	oen T	o Pul	alic
Department of the Treasury Internal Revenue Service	epartment of the freasury											-	spect		5110
Name of the organization											-			ion ni	umber
Dest L. Europe D			BALLET									407	88		
			ons (section 50												
Complete if 1	the organizatio		wered "Yes" on Relationship bety				ne 25a or 25i	b, or	Form 990-EZ, F	vart V,	line 40	JD.	(4)	Corr	octod?
(a) Name of disqualifi	ied person	(5)	person and or			inieu	(0	c) De	scription of trar	nsactio	n		(d) Corrected? Yes No		
													_		
													+	\rightarrow	
2 Enter the amount of	tax incurred by	the o	organization mar	agers	or dise	qualifie	d persons du	iring t	he year under					i	
											▶ \$				
3 Enter the amount of	tax, if any, on li	ine 2,	above, reimburs	sed by	the or	ganizat	ion				▶ \$				
Part II Loans to	and/or From	n Int	erested Per	sons	-										
			wered "Yes" on		-	′Part∖	/ line 38a or l	Form	990 Part IV lir	ne 26 [.]	or if th	ne oraz	nizati	on	
-	-), Part X, line 5, 6			.,	,					ie eige			
(a) Name of	(b) Relatio	onship (c) Purpose			an to or n the		Original	(f)	Balance due) In	(h) Approved by board or (i) Writt			Vritten
interested person with organ		ization	ization of loan		ization?	ł :	ipal amount			default?		cómm	ittee?	-	ement?
				То	From					Yes	No	Yes	No	Yes	No
Total							🕨 \$								
			nefiting Inter												
	-		wered "Yes" on							of		10			.f
(a) Name of interested person		(b) Relationship betwee interested person and the organization				(c) Amount of assistance		(d) Type of assistance			(e) Purpose of assistance			וו	
											-+				

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

Schedule L (Form 990 or 990-EZ) 2018

832131 10-25-18

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Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
OWEN THORNE	SON OF A BOARD MEMB	31,924.	DANCER PAID	2	Х

Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: OWEN THORNE

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SON OF A BOARD MEMBER

(D) DESCRIPTION OF TRANSACTION: DANCER PAID BY THE BALLET

Schedule L (Form 990 or 990-EZ) 2018

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
 Attach to Form 990.

Open to Public Inspection

	C 11	
Name	of the	organization
1 Junio	01 110	organization

Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number
58-1440788

|--|

Pa	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of dei noncash contribut		•	s	
1	Art - Works of art			· ···· · · · · · · · · · · · · · · · ·					
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	X	7	56.042.	FAIR MARKET	VAT	JUE		
10	Securities - Closely held stock		,						
11	Securities - Partnership, LLC, or								
12	trust interests Securities - Miscellaneous								
13	Qualified conservation contribution -								
15	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ► (GIFT CARDS/TI)	X	2	15.599.	FAIR MARKET	VAI	UE		
26	Other \blacktriangleright (LODGING)	X	1		FAIR MARKET				
27	Other (SUPPLIES)	X	2		FAIR MARKET				
28	Other (FOOD & BEVERA)	X	4		FAIR MARKET				
29	Number of Forms 8283 received by the organiz		the tax year for c	<u>·</u>					
	for which the organization completed Form 828								
							Yes	No	
30a	During the year, did the organization receive by	/ contributio	on any property re	oorted in Part I, lines 1 throug	oh 28. that it				
					-				
	must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?								
b	b If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance p	oolicy that re	equires the review	of any nonstandard contribu	itions?	31	х		
	Does the organization hire or use third parties of								
	contributions?		-			32a	x		
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of propert	y for which column (a) is che	cked,				
	describe in Part II.	()							

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

Schedule M (Form 990) 2018

832141 10-18-18

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE BALLET HAS REPORTED THE NUMBER OF CONTRIBUTIONS RECEIVED IN PART I

COLUMN B.

SCHEDULE M, LINE 32B:

GIFTS OF STOCK ARE TO BE TRANSFERRED INTO AN ESTABLISHED BROKERAGE ACCOUNT OPERATED BY NASHVILLE BALLET. IT IS THE POLICY OF NASHVILLE BALLET TO IMMEDIATELY LIQUIDATE ALL GIFTS OF STOCK/SECURITIES FOR ALL PURPOSES EXCEPT ENDOWMENT GIFTS. THE LIQUIDATION OF STOCK INTENDED FOR ENDOWMENT GIFTS WILL BE MANAGED BY THE CONTRACTED INVESTMENT MANAGER ACCORDING TO INVESTMENT POLICIES APPROVED BY THE INVESTMENT COMMITTEE OF THE BOARD. FOR INCOME TAX PURPOSES AND DONOR RECORDS, THE VALUE OF THE GIFT IS CALCULATED BASED ON PREVAILING IRS GUIDELINES. (TYPICALLY THE AVERAGE OF THE HIGH AND THE LOW ON THE DATE OF TRANSFER.) BROKERAGE FEES INVOLVED IN THE SALE OF STOCK ARE BORNE BY NASHVILLE BALLET AND NOT DEDUCTED FROM THE VALUE OF THE GIFT.

Schedule M (Form 990) 2018

832142 10-18-18

09381014 781331 16435-16435

SCHEDULE O

(Form 990 or 990-EZ) Department of the Treasury

Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ 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. Go to www.irs.gov/Form990 for the latest information.



NASHVILLE BALLET

58-1440788

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: OUR MISSION IS TO CREATE, PERFORM, TEACH, AND PROMOTE DANCE AS AN ESSENTIAL AND INSPIRING ELEMENT OF OUR COMMUNITY. THROUGH OUR SEASON PERFORMANCE REPERTORY, WE CREATE AND PRESENT OUTSTANDING WORKS OF ART IN COLLABORATION WITH OTHER NOTABLE NASHVILLE ARTISTS, INCLUDING THE NASHVILLE SYMPHONY AND LOCAL SINGER-SONGWRITERS. THESE INSPIRATIONAL WORKS OF ART REACH MORE THAN 35,000 MIDDLE TENNESSEANS EVERY YEAR. OUR SCHOOL OF NASHVILLE BALLET IS A NATIONALLY KNOWN LEADER IN CLASSICAL BALLET TRAINING AND TOP OF MIND LOCALLY FOR RECREATIONAL DANCING. OUR COMMUNITY ENGAGEMENT AND EDUCATIONAL PROGRAMS PERMEATE THE COMMUNITY AND REACH OVER 20,000 UNDERSERVED CHILDREN, YOUTH AND ADULTS IN MORE THAN 12 COUNTIES ACROSS TENNESSEE.

FORM 990, PART III, LINE 1

NASHVILLE BALLET'S MISSION IS TO CREATE, PERFORM, TEACH AND PROMOTE

DANCE AS AN ESSENTIAL AND INSPIRING ELEMENT OF OUR COMMUNITY. WE

FULFILL THAT MISSION BY OFFERING A DIVERSE RANGE OF DANCE PROGRAMS IN

OUR SEASON REPERTORY, EDUCATING CHILDREN AND ADULTS IN OUR SCHOOL OF

NASHVILLE BALLET AND BRINGING DANCE INTO THE COMMUNITY THROUGH

COMMUNITY ENGAGEMENT & PERFORMANCES.

FORM 990, PART III, LINE 4A

ARTISTIC: CREATE A WORLD-CLASS ARTISTIC BRAND BASED ON THE FOUNDATION

OF CLASSICAL BALLET AND CONTEMPORARY DANCE INNOVATION.

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2018)

 832211
 10-10-18

44 09381014 781331 16435-16435 2018.04030 NASHVILLE BALLET

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization NASHVILLE BALLET	Employer identification number 58-1440788
-NASHVILLE BALLET MADE ITS DEBUT AT THE WORLD-RENOWNED CH	AUTAUQUA
INSTITUTION IN CHAUTAUQUA, NY IN AUGUST 2018. DURING A WE	EK-LONG
RESIDENCY, THE COMPANY PERFORMED A COLLECTION OF MASTERWO	RKS FROM
GEORGE BALANCHINE, JIRI KYLIAN AND PAUL VASTERLING. ADDIT	IONALLY,
VASTERLING WORKSHOPPED LUCY NEGRO REDUX WITH POET CAROLIN	E RANDALL
WILLIAMS, COMPOSER RHIANNON GIDDENS, AND MEMBERS OF NASHV	ILLE BALLET'S
COMPANY.	
-PAUL VASTERLING CELEBRATED 20 YEARS AS ARTISTIC DIRECTOR	OF NASHVILLE
BALLET. IN HONOR OF THIS MILESTONE, PAUL VASTERLING'S 20T	H ANNIVERSARY
GALA PERFORMANCE PRESENTED AN EVENING OF MASTERWORKS, INC	LUDING SOME OF
VASTERLING'S OWN, HIGHLIGHTING THE PAST, PRESENT AND FUTU	RE OF
NASHVILLE BALLET. ADDITIONALLY, THROUGH GENEROUS COMMUNIT	Y SUPPORT, THE
PAUL VASTERLING ARTISTIC FUND WAS CREATED TO ENSURE THE F	UTURE OF THIS
ARTISTIC LEGACY.	
-IN FEBRUARY 2019, NASHVILLE BALLET PREMIERED LUCY NEGRO	REDUX. THIS
PROJECT NOT ONLY SOLD OUT ALL PERFORMANCES, IT ALSO RECEI	VED CRITICAL
ACCLAIM FROM THE NEW YORK TIMES. ADDITIONALLY, NASHVILLE	BALLET TOURED
THE WORK TO THE PRESTIGIOUS BIG EARS FESTIVAL IN KNOXVILL	E, TN IN MARCH
2019.	
SCHOOL OF NASHVILLE BALLET: BECOME A PREEMINENT SCHOOL OF	DANCE, NOTED
FOR ITS DEVELOPMENT OF DANCE ARTISTS STEEPED IN THE FOUND	ATION OF THE
BALLET TRADITION AND THEIR OWN HUMAN DEVELOPMENT.	
-THE SCHOOL OF NASHVILLE BALLET: AWARDED OVER \$200,000 IN	SCHOLARSHIPS
TO STUDENTS IN FY19! THIS INCLUDES 30 STUDENTS FROM RESID	ENCY SCHOOLS
PROGRAMS WHO RECEIVED OVER \$23,000 IN SCHOLARSHIPS AND TH	E YOUNG MEN'S
SCHOLARSHIP PROGRAM WHICH PROVIDED OVER \$80,000 IN SCHOLA	RSHIPS TO 63
YOUNG MEN.	
45	dule O (Form 990 or 990-EZ) (2018)
381014 781331 16435-16435 2018.04030 NASHVILLE BALLET	16435-11

Schedule O (Form 990 or 990-EZ) (2018)

09

Page **2**

Schedule O (Form 990 or 990-EZ) (2018)	Page
Name of the organization NASHVILLE BALLET	Employer identification number 58-1440788
-THE SCHOOL OF NASHVILLE BALLET SAW THE LARGEST CHILDREN'	S DIVISION
ENROLLMENT EVER, WITH REVENUE INCREASING OVER 25% THIS FI	SCAL YEAR.
-IN AN ONGOING EFFORT TO INCREASE ARTISTIC PERFORMANCE OF	PORTUNITIES
FOR NB2, 6 ORIGINAL WORKS WERE CREATED ON THEM OVER THE P	AST YEAR AND
WERE PERFORMED AT THE FRIST MUSEUM, ADVENTURE SCIENCE CEN	TER, AND
BALLET BALL.	
-NASHVILLE BALLET'S INCLUSIVE AND ACCESSIBLE ADAPTIVE DAM	CE PROGRAM
REACHING DIFFERENTLY-ABLED YOUTH (AGES 3-16) RECEIVING PE	DIATRIC
OUTPATIENT REHABILITATIVE SERVICES FOR A RANGE OF DIAGNOS	ES INCLUDING
DOWN SYNDROME AND AUTISM SPECTRUM DISORDER EXPANDED TO TW	O CLASSES OVER
TWO SEMESTERS WITH A PLAN TO CONTINUE NEXT YEAR.	
-AS AN INDICATION OF THE TREMENDOUS AND RIGOROUS TRAINING	AT THE SCHOOL
OF NASHVILLE BALLET, AT LEAST ONE ACADEMY LEVEL STUDENT W	AS PROMOTED TO
THE PROFESSIONAL TRAINING DIVISION, ONE STUDENT WAS PROMO	TED TO NB2
FROM THE PROFESSIONAL TRAINING DIVISION, AND ONE NB2 DANC	ER TO THE
COMPANY. THE LAST PROMOTION IS MOST IMPRESSIVE THAT THIS	DANCER BEGAN
TRAINING IN NASHVILLE BALLET'S OWN ACADEMY AND CONTINUES	TO FULFILL A
GOAL TO BUILD A PIPELINE FROM THE SCHOOL TO THE COMPANY.	
COMMUNITY ENGAGEMENT & EDUCATION: CULTIVATE, DEVELOP AND	POSITIVELY
IMPACT AN INCLUSIVE COMMUNITY THROUGH A DEEPENING ENGAGEM	ENT IN OUR
ART.	
-NASHVILLE BALLET WAS SUCCESSFULLY ABLE TO INCREASE THE R	ESPONSE RATE
OF POST-PROGRAM SURVEYS BY IMPLEMENTING NEW TECHNOLOGY WH	ICH SENDS
SURVEY LINKS DIRECTLY TO AUDIENCE MEMBERS' PHONES. SURVEY	RESPONSES
CONTINUE TO BE OVER 90% GOAL RATE OF POSITIVE FEEDBACK.	
-NOW IN ITS SECOND SEASON, ADULT LEARNING PROGRAM INSIDE	THE BALLET
WITH MITCHELL KORN CONTINUES TO ACCOMPLISH THREE STRATEGI	
832212 10-10-18 46 381014 781331 16435-16435 2018 04030 NACHVIILLE BALLET	dule O (Form 990 or 990-EZ) (2018
ATTIC TATION AND THE REAL PRANT AND A TRADUCT AND A SHALL BE RALL BUT	10/130-1

09381014 781331 16435-16435 2018.04030 NASHVILLE BALLET

Schedule O (Form 990 or 990-EZ) (2018)

16435-11

Page 2

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization NASHVILLE BALLET	Employer identification number 58-1440788
CREATING ARTS ADVOCATES, REACHING THE SENIOR POPULATION A	ND SERVING AS
A PIPELINE CONVERTING PARTICIPANTS TO TICKET HOLDERS TO S	EE THE
PRODUCTION OF THE SAME THEMED SERIES.	
-SUCCESSFULLY PARTNERED WITH THE TREATMENT AND RESEARCH I	NSTITUTE FOR
AUTISM SPECTRUM DISORDERS (TRIAD) ALSO KNOWN AS THE INCLU	SION NETWORK
OF NASHVILLE, TO PRESENT OUR 2ND ANNUAL SENSORY FRIENDLY	PERFORMANCE IN
FEBRUARY. WITH THE HELP OF THE TRIAD SUPPORT MATERIALS WE	RE CREATED AND
PROVIDED FOR FAMILIES AND INDIVIDUALS TO PREPARE AND ENHA	NCE THEIR
EXPERIENCE. INSTRUCTORS FROM THE SCHOOL OF NASHVILLE BALL	ET'S ADAPTIVE
DANCE PROGRAM FACILITATED A POST-PERFORMANCE INTERACTIVE	EXPERIENCE.
-METRO NASHVILLE PUBLIC SCHOOLS' EXTENDED LEARNING PROGRA	M PARTNERED
WITH NASHVILLE BALLET TO CONTRACT A TEACHING ARTIST OF DA	NCE FOR
AFTERSCHOOL PROGRAMMING AT CUMBERLAND ELEMENTARY AND HATT	IE COTTON
ELEMENTARY FOR ONE HOUR, TWO TIMES PER WEEK FOR SIX WEEKS	. THIS
OPPORTUNITY ALLOWS NASHVILLE BALLET'S TEACHING ARTIST TO	IDENTIFY
POTENTIAL TALENT FROM THE COMMUNITY AND OFFER SCHOLARSHIP	S TO STUDENTS
TO TRAIN AT SCHOOL OF NASHVILLE BALLET.	
-NASHVILLE BALLET'S LONG RUNNING PROGRAM FOR EARLY READER	S, JUMP FROG
JUMP, WAS PRESENTED IN SPANISH AT PLAZA MARIACHI IN PARTN	ERSHIP WITH
THE HISPANIC FAMILY FOUNDATION. OVER 200 COPIES OF THE SP	ANISH-LANGUAGE
JUMP FROG JUMP BOOK WERE DISTRIBUTED TO MEMBERS OF THE AU	DIENCE THANKS
TO GENEROUS FUNDING FROM THE COMMUNITY FOUNDATION.	
AUDIENCE DEVELOPMENT AND BRANDING: CREATE MORE DEEPLY ENG	AGED

AUDIENCES.

832212 10-10-18

-EXCEEDED THE 2018-2019 SUBSCRIPTION GOAL BOTH IN REVENUE (115%) AND

GREW THE NUMBER OF HOUSEHOLDS TO 607, WITH A GOAL OF 600. ADDITIONALLY,

NASHVILLE BALLET ACHIEVED A RENEWAL RATE GOAL OF 60%.

Schedule O (Form 990 or 990-EZ) (2018)

47 09381014 781331 16435-16435 2018.04030 NASHVILLE BALLET

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization	Employer identification number
NASHVILLE BALLET	58-1440788
-SECURED A RECORD NUMBER OF LOCAL MEDIA OUTLETS TO COVER	THE SMASH HIT
LUCY NEGRO REDUX. DVL SEIGENTHALER AUGMENTED THESE EFFORT	'S AND
FACILITATED TWO FEATURES IN THE NEW YORK TIMES, SECURING	NATIONAL
COVERAGE FOR NASHVILLE BALLET THAT BROUGHT TICKET BUYERS	FROM ACROSS
THE COUNTRY.	

FORM 990, PART VI, SECTION B, LINE 11B:

THE COMPLETED FORM 990 IS REVIEWED BY THE FINANCE COMMITTEE UNDER THE DIRECTION OF THE EXECUTIVE DIRECTOR. ONCE THEIR REVIEW IS COMPLETE THE FINANCE COMMITTEE RECOMMENDS THAT BOTH THE EXECUTIVE DIRECTOR AND BOARD OF DIRECTORS ACCEPT THE COMPLETED FORM 990 AS PRESENTED. THE COMPLETED FORM 990 IS PROVIDED ELECTRONICALLY VIA E-MAIL TO ALL BOARD MEMBERS IN ADVANCE OF THE FILING. ANY BOARD MEMBERS WHO CANNOT RECEIVE DOCUMENTS ELECTRONICALLY ARE PROVIDED WITH A PAPER COPY.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD PRESIDENT AND OTHER BOARD OFFICERS REVIEW THE ANNUAL CONFLICT OF INTEREST DISCLOSURE STATEMENTS AND NOTE CONFLICTS SO THEY CAN ASK SELECT BOARD MEMBERS TO RECUSE THEMSELVES FROM PARTICIPATING IN DISCUSSIONS AND VOTES ON TOPICS WITH WHICH THEY HAVE PREVIOUSLY DISCLOSED A CONFLICT.

FORM 990, PART VI, SECTION B, LINE 15:

A COMMITTEE OF THE BOARD OF DIRECTORS ANNUALLY REVIEWS THE COMPENSATION OF THE ARTISTIC DIRECTOR AND THE EXECUTIVE DIRECTOR. THEY ALSO BENCHMARK THE

48

COMPENSATION AGAINST COMPENSATION PROVIDED TO SIMILAR POSITIONS IN

COMPARABLE DANCE COMPANIES

832212 10-10-18

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization NASHVILLE BALLET	Employer identification number $58-1440788$
FORM 990, PART VI, SECTION C, LINE 19:	
NASHVILLE BALLET MAKES ITS GOVERNING DOCUMENTS, CONFLICT	OF INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC	UPON REQUEST.
ANNUAL AUDITS AND SIGNIFICANT OTHER COMPANY INFORMATION I	S AVAILABLE
THROUGH THE WEBSITE HTTPS://GIVINGMATTERS.GUIDESTAR.ORG/	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN VALUE OF THE COMMUNITY FOUNDATION OF MIDDLE	
TENNESSEE ENDOWMENT	-1,797.
FORM 990, PART XII, LINE 2C:	
THE ORGANIZATION DID NOT CHANGE ITS OVERSIGHT PROCESS OR	SELECTION
PROCESS REGARDING THE SELECTION OF AN INDEPENDENT ACCOUNT	ANT.

SCH	EDUL	ΕR

(Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

2018 Open to Public Inspection

Employer identification number

58-1440788

Department of the Treasury Internal Revenue Service Name of the organization

NASHVILLE BALLET

Part I

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

	1	1	1		
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt Part II organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	foreign country) section status (if section entity		Direct controlling	conti	g) 512(b)(13) rolled itty?	
				501(c)(3))		Yes	No
NASHVILLE BALLET FOUNDATION - 47-4340559							
3630 REDMON ST.	PROVIDE SUPPORT FOR THE						
NASHVILLE, TN 37209	NASHVILLE BALLET	TENNESSEE	501(C)(3)	509(A)(3)	NASHVILLE BALLET	X	
	-						
	-						

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

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018 NASHVILLE BALLET

Schedule R (Form 990) 2018 NASH	VILLE BALLE	1							50-144	070	o Page 2
Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.											
(a)	(b)	(c)	(d)	(e)	(f)	(g)	1)	ו)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	Disprop alloca	ortionate tions?	Code V-UBI amount in box 20 of Schedule	General managi partner	or Percentage ownership
		country)		sections 512-514)		233013	Yes	No	K-1 (Form 1065)	Yes N	0
	-										

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		(i) ction (b)(13) trolled tity?	
		country)		of tructy		acceto		Yes	No	
									<u> </u>	
									<u> </u>	
									<u> </u>	

Schedule R (Form 990) 2018 NASHVILLE BALLET

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
	Gift, grant, or capital contribution to related organization(s)	1b	Х	
	Gift, grant, or capital contribution from related organization(s)	1c	Х	
	Loans or loan guarantees to or for related organization(s)	1d		X
	Loans or loan guarantees by related organization(s)	1e		X
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		Х
h	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
- 1	Performance of services or membership or fundraising solicitations for related organization(s)	11		X
n	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
	Sharing of paid employees with related organization(s)	10	Х	
р	Reimbursement paid to related organization(s) for expenses	1p		X
q	Reimbursement paid by related organization(s) for expenses	1q		X
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
_(2)			
(3)			
<u>(4)</u>			
(5)			
<u>(</u> 6)	E 2		

Schedule R (Form 990) 2018 NASHVILLE BALLET

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are a partners 501(c) orgs. Yes) ill (3) ? No	(f) Share of total income	(g) Share of end-of-year assets	(H Dispr tior alloca Yes	n) opor- iate tions? No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr Yes) ral or F ging ner? NO	(k) Percentage ownership

Schedule R (Form 990) 2018

NASHVILLE BALLET

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

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