

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2005**Open to Public Inspection**Department of the Treasury
Internal Revenue Service**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)**

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

A For the 2005 calendar year, or tax year beginning 7/01, **2005, and ending** 6/30, **2006****B** Check if applicable:

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

Please use
IRS label
or print
or type.
See
specific
instruc-
tions.ADVENTURE SCIENCE CENTER - NASHVILLE
F/K/A CUMBERLAND MUSEUMS
800 FORT NEGLEY BOULEVARD
NASHVILLE, TN 37203**D Employer Identification Number**

62-0479192

E Telephone number

(615) 862-5160

F Accounting method:☐ Cash☒ Accrual☐ Other (specify) ▶● **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

H and I are not applicable to section 527 organizations.

H (a) Is this a group return for affiliates? . . . ☐ Yes ☒ No**H (b)** If "Yes," enter number of affiliates ▶**H (c)** Are all affiliates included? ☐ Yes ☐ No

(If "No," attach a list. See instructions.)

H (d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No**I** Group Exemption Number. . . ▶**M** Check ☐ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**G Web site:** ▶ WWW.ADVENTURESCI.COM**J Organization type**(check only one) ☒ 501(c) 3 (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. **Some states require a complete return.****L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 6,538,235.**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See Instructions)

REVENUE	1 Contributions, gifts, grants, and similar amounts received:				
	a Direct public support	1 a	3,464,376.		
	b Indirect public support	1 b			
	c Government contributions (grants)	1 c	520,300.		
	d Total (add lines 1a through 1c) (cash \$ 3,984,676. noncash \$)	1 d	3,984,676.		
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	1,217,943.		
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4	54,587.		
	5 Dividends and interest from securities	5	51,541.		
	6a Gross rents	6 a	41,738.		
	b Less: rental expenses	6 b			
	c Net rental income or (loss) (subtract line 6b from line 6a)	6 c	41,738.		
7 Other investment income (describe)	7				
REVENUE	8a Gross amount from sales of assets other than inventory	(A) Securities	784,974.	8 a	
	b Less: cost or other basis and sales expenses		723,501.	8 b	12,464.
	c Gain or (loss) (attach schedule)		61,473.	8 c	-12,464.
	d Net gain or (loss) (combine line 8c, columns (A) and (B))			8 d	49,009.
	9 Special events and activities (attach schedule). If any amount is from gaming, check here.				
	a Gross revenue (not including \$ 170,590. of contributions reported on line 1a)	9 a	219,750.		
	b Less: direct expenses other than fundraising expenses	9 b	127,497.		
	c Net income or (loss) from special events (subtract line 9b from line 9a)	9 c	92,253.		
	10a Gross sales of inventory, less returns and allowances	10 a	177,688.		
	b Less: cost of goods sold	10 b	97,068.		
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10 c	80,620.			
11 Other revenue (from Part VII, line 103)	11	5,338.			
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	5,577,705.			
EXPENSES	13 Program services (from line 44, column (B))	13	3,415,471.		
	14 Management and general (from line 44, column (C))	14	337,954.		
	15 Fundraising (from line 44, column (D))	15	631,654.		
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 16 and 44, column (A))	17	4,385,079.		
NET ASSETS	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18	1,192,626.		
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	10,153,034.		
	20 Other changes in net assets or fund balances (attach explanation)	20	102,156.		
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	11,447,816.		

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (att sch) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here... ☐	22			
23	Specific assistance to individuals (att sch)	23			
24	Benefits paid to or for members (att sch)	24			
25	Compensation of officers, directors, etc.	25	489,174.	354,261.	38,031.
26	Other salaries and wages	26	969,215.	701,909.	75,352.
27	Pension plan contributions	27	26,406.	16,148.	3,054.
28	Other employee benefits	28	214,943.	132,264.	24,702.
29	Payroll taxes	29	102,987.	73,000.	9,947.
30	Professional fundraising fees	30	47,504.		47,504.
31	Accounting fees	31	18,000.	10,872.	2,768.
32	Legal fees	32			
33	Supplies	33	31,177.	12,078.	10,927.
34	Telephone	34	24,554.	13,505.	6,138.
35	Postage and shipping	35	11,915.	3,575.	1,787.
36	Occupancy	36	12,875.	12,875.	
37	Equipment rental and maintenance	37	42,970.	34,188.	6,013.
38	Printing and publications	38	33,746.	24,531.	
39	Travel	39	41,127.	21,751.	7,769.
40	Conferences, conventions, and meetings	40			
41	Interest	41	251,598.	250,864.	319.
42	Depreciation, depletion, etc (attach schedule)	42	999,219.	929,274.	69,945.
43	Other expenses not covered above (itemize):				
a	SEE STATEMENT 5	43a	1,067,669.	824,376.	81,202.
b		43b			
c		43c			
d		43d			
e		43e			
f		43f			
g		43g			
44	Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	4,385,079.	3,415,471.	337,954.
					631,654.

Joint Costs. Check ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If 'Yes,' enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____.

BAA

Form 990 (2005)

Part III Statement of Program Service Accomplishments

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

What is the organization's primary exempt purpose? ▶ SEE STATEMENT 6

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

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

a SEE STATEMENT 7

(Grants and allocations \$) If this amount includes foreign grants, check here ☐

3,415,471.

b

(Grants and allocations \$) If this amount includes foreign grants, check here ☐

c

(Grants and allocations \$) If this amount includes foreign grants, check here ☐

d

(Grants and allocations \$) If this amount includes foreign grants, check here ☐

e Other program services

(Grants and allocations \$) If this amount includes foreign grants, check here ☐

f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶

3,415,471.

BAA

Form 990 (2005)

Part IV Balance Sheets (See Instructions)**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
ASSETS	45 Cash — non-interest-bearing	1,750.	45	1,800.	
	46 Savings and temporary cash investments	1,667,595.	46	2,337,710.	
	47a Accounts receivable	47a 31,125.			
	b Less: allowance for doubtful accounts	47b	11,588.	47c 31,125.	
	48a Pledges receivable	48a 5,749,226.			
	b Less: allowance for doubtful accounts	48b 2,064,316.	3,754,611.	48c 3,684,910.	
	49 Grants receivable		49		
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50		
	51a Other notes & loans receivable (attach sch.)	51a			
	b Less: allowance for doubtful accounts	51b		51c	
	52 Inventories for sale or use	15,044.	52	12,064.	
	53 Prepaid expenses and deferred charges	10,856.	53	47,803.	
	54 Investments — securities (attach schedule)	SEE ST. 8 ☐ Cost ☒ FMV	1,711,125.	54	2,564,304.
	55a Investments — land, buildings, & equipment: basis	55a			
	b Less: accumulated depreciation (attach schedule)	55b		55c	
56 Investments — other (attach schedule)		56			
57a Land, buildings, and equipment: basis	57a 13,598,989.				
b Less: accumulated depreciation (attach schedule)	STATEMENT 9 57b 4,552,673.	9,630,077.	57c	9,046,316.	
58 Other assets (describe ►		58			
59 Total assets (must equal line 74). Add lines 45 through 58	16,802,646.	59	17,726,032.		
LIABILITIES	60 Accounts payable and accrued expenses	638,535.	60	551,430.	
	61 Grants payable		61		
	62 Deferred revenue	46,142.	62	58,952.	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63		
	64a Tax-exempt bond liabilities (attach schedule)		64a		
	b Mortgages and other notes payable (attach schedule)	SEE STATEMENT 10	5,964,935.	64b	5,667,834.
	65 Other liabilities (describe ►		65		
66 Total liabilities. Add lines 60 through 65	6,649,612.	66	6,278,216.		
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here ► ☒ and complete lines 67 through 69 and lines 73 and 74.				
	67 Unrestricted	4,169,177.	67	3,742,425.	
	68 Temporarily restricted	4,360,989.	68	6,082,523.	
	69 Permanently restricted	1,622,868.	69	1,622,868.	
	Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 70 through 74.				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	10,153,034.	73	11,447,816.	
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	16,802,646.	74	17,726,032.	

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Form 990 (2005)

Part IV-A	Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.)
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a	Total revenue, gains, and other support per audited financial statements	a	6,523,726.
b	Amounts included on line a but not on Part I, line 12:		
1	Net unrealized gains on investments.....	b1	102,156.
2	Donated services and use of facilities.....	b2	
3	Recoveries of prior year grants.....	b3	
4	Other (specify): -----	b4	866,364.
	SEE STM 11		
	Add lines b1 through b4	b	968,520.
c	Subtract line b from line a	c	5,555,206.
d	Amounts included on Part I, line 12, but not on line a :		
1	Investment expenses not included on Part I, line 6b.....	d1	22,499.
2	Other (specify): -----	d2	
	Add lines d1 and d2	d	22,499.
e	Total revenue (Part I, line 12). Add lines c and d ▶	e	5,577,705.

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return	
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a	Total expenses and losses per audited financial statements	a	5,228,944.
b	Amounts included on line a but not on Part I, line 17:		
1	Donated services and use of facilities.....	b1	
2	Prior year adjustments reported on Part I, line 20	b2	
3	Losses reported on Part I, line 20	b3	
4	Other (specify):		
	SEE STMT 12	b4	866,364.
	Add lines b1 through b4	b	866,364.
c	Subtract line b from line a	c	4,362,580.
d	Amounts included on Part I, line 17, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	22,499.
2	Other (specify):		
		d2	
	Add lines d1 and d2	d	22,499.
e	Total expenses (Part I, line 17). Add lines c and d	e	4,385,079.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

[illegible]

Yes	No
-----	----

--	--	--

75b		X

75c		X

75d	X	

Other
(see below)
column. See

(E) Expense
count and other

Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances

Yes	No
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76		X

77		X
78a		X

78a		
78b	N/A	

79		X
80		Y

ova		Λ

81b		X

Form 999 (2005)

Form **990** (2005)

Part VI Other Information (continued)

		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?.....		X
b	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)..... 82b N/A		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?.....	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?.....	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?.....		X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?.....		N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?.....		N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?.....		N/A
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members..... 85c N/A		
d	Section 162(e) lobbying and political expenditures..... 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices..... 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)..... 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?.....		N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?.....		N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12..... 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities..... 86b N/A		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders..... 87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)..... 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX.....		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0. ; section 4912 ▶ 0. ; section 4955 ▶ 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction.....		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958..... ▶ 0.		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization..... ▶ 0.		
90a	List the states with which a copy of this return is filed ▶ TN		
b	Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)..... 90b 47		
91a	The books are in care of ▶ ANN SCHMIDT Telephone number ▶ (615) 401-5056 Located at ▶ 800 FORT NEGLEY BOULEVARD, NASHVILLE TN ZIP + 4 ▶ 37203		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?.....		X
If 'Yes,' enter the name of the foreign country ▶			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Statements			
c	At any time during the calendar year, did the organization maintain an office outside of the United States?.....		X
If 'Yes,' enter the name of the foreign country ▶			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here..... N/A ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year..... ▶ 92 N/A		

BAA

Form 990 (2005)

Form 990 (2005) ADVENTURE SCIENCE CENTER - NASHVILLE

62-0479192

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Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a GENERAL ADMISSIONS					769,726.
b PROGRAM FEES					448,217.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash investments			14	54,587.	
96 Dividends & interest from securities			14	51,541.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	41,738.	
98 Net rental income or (loss) from pers. prop.					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	49,009.	
101 Net income or (loss) from special events			1	92,253.	
102 Gross profit or (loss) from sales of inventory					80,620.
103 Other revenue: a					
b MISCELLANEOUS			1	57.	
c VENDING			3	5,281.	
d					
e					
104 Subtotal (add columns (B), (D), and (E))				294,466.	1,298,563.
105 Total (add line 104, columns (B), (D), and (E))					1,593,029.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
1	SEE STATEMENT 14

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A				

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
	Signature of officer SUSAN B. DUVENHAGE	Date 03-09-07
Paid Preparer's Use Only	Type or print name and title President & CEO	
	Preparer's signature [Signature]	Date 3.9.07
	Firm's name (or yours if self-employed), address, and ZIP + 4 FRASIER, DEAN & HOWARD, PLLC 3310 WEST END AVENUE, STE. 550 NASHVILLE, TN 37203	Check if self-employed ☐ Preparer's SSN or PTIN (See General instruction V) N/A EIN ☐ N/A Phone no. (615) 383-6592

SCHEDULE A
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Organization Exempt Under**
Section 501(c)(3)**(Except Private Foundation) and Section 501(e), 501(f), 501(k),**
501(n), or 4947(a)(1) Nonexempt Charitable Trust**Supplementary Information — (See separate instructions.)****▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.**

OMB No. 1545-0047

2005Name of the organization **ADVENTURE SCIENCE CENTER - NASHVILLE**
F/K/A CUMBERLAND MUSEUMSEmployer identification number
62-0479192**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**
(See instructions. List each one. If there are none, enter 'None.')

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	0			

Part II – A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See instructions. List each one (whether individuals or firms). If there are none, enter 'None.')

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	0	

Part II – B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter 'None.' See instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
TUCK HINTON ARCHITECTS, PLC 410 ELM STREET NASHVILLE, TN 37203	BLDG. ARCHITECTURE	124,776.
DESIGN CRAFTSMEN P.O. BOX 2126 MIDLAND, MI 48641	EXHIBIT FABRICATION	103,625.
BRUCE D. ROBINSON ARCHITECTURE DESIGN 28 CENTRAL PKWY. W. CINCINNATI, OH 45202	EXHIBIT DESIGN	85,395.
LIGHTHOUSE COUNSEL 228 CIRCLE VIEW DRIVE FRANKLIN, TN 37067	FUNDRAISING COUNSEL	73,045.
SEIGENTHALER PUBLIC RELATIONS 115 29TH AVENUE SOUTH NASHVILLE, TN 37212	PUBLIC RELATIONS	59,575.
Total number of other contractors receiving over \$50,000 for other services	1	

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.****Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	3,193,501.	1,665,070.	2,174,969.	2,107,304.	9,140,844.
16 Membership fees received		212,794.	217,925.	139,475.	570,194.
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	1,392,893.	1,233,693.	1,306,541.	808,577.	4,741,704.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	105,745.	69,158.	66,558.	88,044.	329,505.
19 Net income from unrelated business activities not included in line 18					0.
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0.
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					0.
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets SEE, STMT. 15	5,995.	4,108.	5,838.	4,061.	20,002.
23 Total of lines 15 through 22	4,698,134.	3,184,823.	3,771,831.	3,147,461.	14,802,249.
24 Line 23 minus line 17	3,305,241.	1,951,130.	2,465,290.	2,338,884.	10,060,545.
25 Enter 1% of line 23	46,981.	31,848.	37,718.	31,475.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 201,211.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 1,067,871.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 10,060,545.
d Add: Amounts from column (e) for lines: 18 329,505. 19					
22 20,002. 26b 1,067,871.					26d 1,417,378.
e Public support (line 26c minus line 26d total)					26e 8,643,167.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 85.91 %
27 Organizations described on line 12: N/A					
a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year: (2004) _____ (2003) _____ (2002) _____ (2001) _____					
b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2) , enter the sum of these differences (the excess amounts) for each year: (2004) _____ (2003) _____ (2002) _____ (2001) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c _____
d Add: Line 27a total _____ and line 27b total					27d _____
e Public support (line 27c total minus line 27d total)					27e _____
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					27f _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g _____ %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h _____ %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

Part V Private School Questionnaire (See instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?		
If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)		

32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)		

33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities?		
If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)		

34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended?		
If you answered 'Yes' to either 34a or b, please explain using an attached statement.		

35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.		

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

Check **a** ☐ if the organization belongs to an affiliated group. Check **b** ☐ if you checked 'a' and 'limited control' provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations												
(The term 'expenditures' means amounts paid or incurred.)															
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36													
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37													
38	Total lobbying expenditures (add lines 36 and 37)	38													
39	Other exempt purpose expenditures	39													
40	Total exempt purpose expenditures (add lines 38 and 39)	40													
41	Lobbying nontaxable amount. Enter the amount from the following table —														
<table border="0"> <tr> <td>If the amount on line 40 is —</td> <td>The lobbying nontaxable amount is —</td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>		If the amount on line 40 is —	The lobbying nontaxable amount is —	Not over \$500,000	20% of the amount on line 40	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000	41	
If the amount on line 40 is —	The lobbying nontaxable amount is —														
Not over \$500,000	20% of the amount on line 40														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
42	Grassroots nontaxable amount (enter 25% of line 41)	42													
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43													
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44													
Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.															

4 -Year Averaging Period Under Section 501(h)(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the instructions for lines 45 through 50.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				(e) Total
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots non-taxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h .)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes	X		15,034.
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (add lines c through h .)			15,034.

If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities. SEE STATEMENT 16

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a Transfers from the reporting organization to a noncharitable exempt organization of:

	Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:		
(i) Cash	51 a (i)	X
(ii) Other assets	a (ii)	X
b Other transactions:		
(i) Sales or exchanges of assets with a noncharitable exempt organization	b (i)	X
(ii) Purchases of assets from a noncharitable exempt organization	b (ii)	X
(iii) Rental of facilities, equipment, or other assets	b (iii)	X
(iv) Reimbursement arrangements	b (iv)	X
(v) Loans or loan guarantees	b (v)	X
(vi) Performance of services or membership or fundraising solicitations	b (vi)	X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c	X

d. If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

[illegible]

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If 'Yes,' complete the following schedule:

[illegible]

2005

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62-0479192

STATEMENT 1
FORM 990, PART I, LINE 8
NET GAIN (LOSS) FROM NONINVENTORY SALES

PUBLICLY TRADED SECURITIES

GROSS SALES PRICE: 784,974.
 COST OR OTHER BASIS: 723,501.

TOTAL GAIN (LOSS) PUBLICLY TRADED SECURITIES \$ 61,473.

OTHER ASSETS

DESCRIPTION:	DISPOSAL OF ASSETS
DATE ACQUIRED:	VARIOUS
HOW ACQUIRED:	PURCHASE
DATE SOLD:	VARIOUS
TO WHOM SOLD:	
GROSS SALES PRICE:	0.
COST OR OTHER BASIS:	333,928.
DEPRECIATION:	321,464.

GAIN (LOSS) -12,464.

TOTAL GAIN (LOSS) OTHER ASSETS \$ -12,464.

TOTAL NET GAIN (LOSS) FROM NONINVENTORY SALES \$ 49,009.

STATEMENT 2
FORM 990, PART I, LINE 9
NET INCOME (LOSS) FROM SPECIAL EVENTS

<u>SPECIAL EVENTS</u>	<u>GROSS RECEIPTS</u>	<u>LESS CONTRI- BUTIONS</u>	<u>GROSS REVENUE</u>	<u>LESS DIRECT EXPENSES</u>	<u>NET INCOME (LOSS)</u>
MAPCO GOLF TOURNAMENT	261,305.	125,605.	135,700.	82,821.	52,879.
CAPER DINNER	106,640.	36,590.	70,050.	37,052.	32,998.
SCRAMBLE FOR SCIENCE	22,395.	8,395.	14,000.	7,624.	6,376.
TOTAL	<u>\$ 390,340.</u>	<u>\$ 170,590.</u>	<u>\$ 219,750.</u>	<u>\$ 127,497.</u>	<u>\$ 92,253.</u>

STATEMENT 3
FORM 990, PART I, LINE 10
GROSS PROFIT (LOSS) FROM SALES OF INVENTORY

MUSEUM SHOP.....	\$ 177,688.
GROSS SALES.....	\$ 177,688.
LESS RETURNS & ALLOWANCES.....	0.
NET SALES.....	\$ 177,688.
LESS COST OF GOODS SOLD.....	97,068.
GROSS PROFIT FROM SALES OF INVENTORY.....	<u>\$ 80,620.</u>

STATEMENT 4
FORM 990, PART I, LINE 20
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

UNREALIZED GAIN ON INVESTMENTS.....	\$	102,156.
TOTAL	\$	<u>102,156.</u>

STATEMENT 5
FORM 990, PART II, LINE 43
OTHER EXPENSES

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
BANK CHARGES	3,880.	2,343.	597.	940.
BUILDING MAINTENANCE	113,168.	96,193.	14,712.	2,263.
CREDIT CARD & P/R PROCESSING	27,039.	16,331.	4,159.	6,549.
DUES & SUBSCRIPTIONS	8,803.	5,317.	1,354.	2,132.
EXHIBITS & PROGRAMS	185,384.	185,384.		
FUNDRAISING - OTHER	10,929.			10,929.
HUMAN RESOURCES	46,871.	26,962.	8,044.	11,865.
INSURANCE	55,086.	35,806.	16,526.	2,754.
INVESTMENT FEES	22,499.		22,499.	
MARKETING	254,600.	254,600.		
MEMBERSHIP MAILINGS	5,908.	3,568.	909.	1,431.
NEW EXHIBIT DEVELOPMENT	156,867.	41,219.		115,648.
PROFESSIONAL SERVICES	18,526.	11,189.	2,850.	4,487.
UTILITIES	144,108.	131,463.	9,552.	3,093.
VOLUNTEERS	14,001.	14,001.		
TOTAL	<u>\$ 1,067,669.</u>	<u>\$ 824,376.</u>	<u>\$ 81,202.</u>	<u>\$ 162,091.</u>

STATEMENT 6
FORM 990, PART III
ORGANIZATION'S PRIMARY EXEMPT PURPOSE

TO INSPIRE CHILDREN, PARENTS AND TEACHERS TO LEARN ABOUT SCIENCE THROUGH INTERACTION WITH HANDS-ON EXHIBITS AND PARTICIPATORY AND CURRICULUM-BASED PROGRAMMING.

STATEMENT 7
FORM 990, PART III, LINE A
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION	GRANTS AND ALLOCATIONS	PROGRAM SERVICE EXPENSES
EXHIBITS - THE ORGANIZATION CREATES HIGHLY INTERACTIVE EXHIBITS IN THE SCIENCE AREAS OF HEALTH, CREATIVITY & INVENTION, SOUND & LIGHT, EARTH, ENERGY, AND SKY & SPACE. IN FY 06, THERE WERE 146,076 GENERAL ADMISSION CUSTOMERS AND 31,610 SCHOOL STUDENTS WHO LEARNED ABOUT SCIENCE FROM THESE EXHIBITS.		1,274,824.

FEDERAL STATEMENTS
ADVENTURE SCIENCE CENTER - NASHVILLE
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STATEMENT 7 (CONTINUED)
FORM 990, PART III, LINE A
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

<u>DESCRIPTION</u>	<u>GRANTS AND ALLOCATIONS</u>	<u>PROGRAM SERVICE EXPENSES</u>
INCLUDES FOREIGN GRANTS: NO		
EDUCATION - ASC DELIVERED PROGRAMS TO 60,928 SCHOOL STUDENTS IN FY 06. THESE PROGRAMS WERE BASED ON TENNESSEE DEPARTMENT OF EDUCATION STANDARDS AND FOCUSED ON THE SCIENCE AREAS OF HEALTH, ELECTRICITY, AND CHEMISTRY.		1,828,097.
INCLUDES FOREIGN GRANTS: NO		
PLANETARIUM - THE SUDEKUM PLANETARIUM PRESENTS SHOWS PRODUCED HERE AT THE ORGANIZATION, IN ADDITION TO PROGRAMS PRODUCED ELSEWHERE, FOCUSING ON SKY AND SPACE. IN FY 06, 35,779 GENERAL ADMISSION CUSTOMERS AND 17,360 SCHOOL STUDENTS EXPERIENCED THESE PROGRAMS.		312,550.
INCLUDES FOREIGN GRANTS: NO		
	\$ 0.	\$ 3,415,471.

STATEMENT 8
FORM 990, PART IV, LINE 54
INVESTMENTS - SECURITIES

<u>CORPORATE STOCKS</u>	<u>VALUATION METHOD</u>	<u>AMOUNT</u>
CORPORATE STOCKS & MUTUAL FUNDS	MARKET VALUE	\$ 1,909,906.
	TOTAL	\$ 1,909,906.
<u>CORPORATE BONDS</u>	<u>VALUATION METHOD</u>	<u>AMOUNT</u>
CORPORATE BONDS	MARKET VALUE	372,225.
	TOTAL	\$ 372,225.
<u>U.S. GOVERNMENT OBLIGATIONS</u>	<u>VALUATION METHOD</u>	<u>AMOUNT</u>
GOVERNMENT BONDS	MARKET VALUE	282,173.
	TOTAL	\$ 282,173.
TOTAL INVESTMENTS - SECURITIES		\$ 2,564,304.

FEDERAL STATEMENTS
ADVENTURE SCIENCE CENTER - NASHVILLE
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STATEMENT 9
FORM 990, PART IV, LINE 57
LAND, BUILDINGS, AND EQUIPMENT

CATEGORY	BASIS	ACCUM. DEPREC.	BOOK VALUE
MACHINERY AND EQUIPMENT	\$ 5,190,218.	\$ 2,116,944.	\$ 3,073,274.
BUILDINGS	7,444,278.	2,435,729.	5,008,549.
MISCELLANEOUS	964,493.	0.	964,493.
TOTAL	\$ 13,598,989.	\$ 4,552,673.	\$ 9,046,316.

STATEMENT 10
FORM 990, PART IV, LINE 64B
MORTGAGES AND OTHER NOTES PAYABLE

OTHER NOTES PAYABLE

LENDER'S NAME: AMSOUTH
DATE OF NOTE: 5/01/2002
MATURITY DATE: 5/01/2012
REPAYMENT TERMS: QUARTERLY PMTS OF \$94,796
INTEREST RATE: 6.28%
BALANCE DUE: \$ 1,883,458.

LENDER'S NAME: REGIONS BANK LOC
DATE OF NOTE: 2/27/2004
MATURITY DATE: 9/30/2015
REPAYMENT TERMS: QUARTERLY PMTS + INTEREST
INTEREST RATE: 3.12%
SECURITY PROVIDED: EXHIBIT & PLEDGES RECEIVABLE
BALANCE DUE: \$ 3,784,376.

TOTAL \$ 5,667,834.

STATEMENT 11
FORM 990, PART IV-A, LINE B(4)
OTHER AMOUNTS

COST OF GOODS SOLD..... \$ 97,068.
EXPENSE REIMBURSEMENT..... 49,288.
PROVISION FOR UNCOLLECTIBLE PLEDGES..... 670,170.
SPECIAL EVENT EXPENSES..... 49,838.
TOTAL \$ 866,364.

STATEMENT 12
FORM 990, PART IV-B, LINE B(4)
OTHER AMOUNTS

COST OF GOODS SOLD..... \$ 97,068.
EXPENSE REIMBURSEMENT..... 49,288.
PROVISION FOR UNCOLLECTIBLE PLEDGES..... 670,170.

STATEMENT 12 (CONTINUED)
FORM 990, PART IV-B, LINE B(4)
OTHER AMOUNTS

SPECIAL EVENT EXPENSES.....	\$ 49,838.
TOTAL	\$ <u>866,364.</u>

STATEMENT 13
FORM 990, PART V-A
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED</u>	<u>COMPEN- SATION</u>	<u>CONTRI- BUTION TO EBP & DC</u>	<u>EXPENSE ACCOUNT/ OTHER</u>
KENT ADAMS NASHVILLE, TN	TRUSTEE 1	\$ 0.	\$ 0.	\$ 0.
HONEY ALEXANDER WASHINGTON, DC	TRUSTEE 1	0.	0.	0.
DEVAN ARD, JR. BRENTWOOD, TN	TRUSTEE 1	0.	0.	0.
BUDDY BEST NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
LAMONT CARTER NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
NIM CHINNIAH NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
RONALD CORBIN NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
ROXANNA DEVLIN NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
MARTY DICKENS NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
MARGARET DOLAN NASHVILLE, TN	TRUSTEE 1	0.	0.	0.

FEDERAL STATEMENTS
ADVENTURE SCIENCE CENTER - NASHVILLE
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STATEMENT 13 (CONTINUED)
FORM 990, PART V-A
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED</u>	<u>COMPEN- SATION</u>	<u>CONTRI- BUTION TO EBP & DC</u>	<u>EXPENSE ACCOUNT/ OTHER</u>
J.D. ELLIOTT HENDERSONVILLE, TN	TRUSTEE 1	\$ 0.	\$ 0.	\$ 0.
AMY ESKIND NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
DARRELL FREEMAN NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
ROBERT FRIST, JR. NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
PEDRO GARCIA, ED.D. NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
JOHN GAWALUCK NASHVILLE, TN	TREASURER 1	0.	0.	0.
SAM HAZEN NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
KEITH HERRON NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
VICTOR JOHNSON, III NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
EDWARD LANG NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
ROBERT MATHEWS, III NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
DAVID MCGOWAN, JR. BRENTWOOD, TN	TRUSTEE 1	0.	0.	0.

FEDERAL STATEMENTS
ADVENTURE SCIENCE CENTER - NASHVILLE
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STATEMENT 13 (CONTINUED)
FORM 990, PART V-A
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED</u>	<u>COMPEN- SATION</u>	<u>CONTRI- BUTION TO EBP & DC</u>	<u>EXPENSE ACCOUNT/ OTHER</u>
STEPHEN PETROVICH NASHVILLE, TN	TRUSTEE 1	\$ 0.	\$ 0.	\$ 0.
LYN PLANTINGA NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
RON SAMUELS NASHVILLE, TN	CHAIRMAN 1	0.	0.	0.
JIM SHULMAN NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
BYRON SMITH NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
BUTCH SPYRIDON NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
RONNIE STEINE NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
MARC STENGEL NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
J. THOMAS TRENT, JR. NASHVILLE, TN	SECRETARY 1	0.	0.	0.
JAMES TURNER, JR. NASHVILLE, TN	TRUSTEE 1	0.	0.	0.
LOUIS UPKINS BRENTWOOD, TN	TRUSTEE 1	0.	0.	0.
DAVID WILLIAMS, II NASHVILLE, TN	TRUSTEE 1	0.	0.	0.

FEDERAL STATEMENTS
ADVENTURE SCIENCE CENTER - NASHVILLE
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STATEMENT 13 (CONTINUED)**FORM 990, PART V-A****LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES**

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED</u>	<u>COMPEN- SATION</u>	<u>CONTRI- BUTION TO EBP & DC</u>	<u>EXPENSE ACCOUNT/ OTHER</u>
JACK WOOD NASHVILLE, TN	TRUSTEE 1	\$ 0.	\$ 0.	\$ 0.
UZI YEMIN FRANKLIN, TN	TRUSTEE 1	0.	0.	0.
RALPH SCHULZ NASHVILLE, TN	PRESIDENT & CEO 40	220,732.	29,045.	0.
BELINDA DINWIDDIE NASHVILLE, TN	DIR. OF DEV. 40	96,196.	7,438.	0.
CHRISTINE BROWN NASHVILLE, TN	DIR. OF OPER. 40	69,475.	8,789.	0.
JERI HASSELBRING NASHVILLE, TN	DIR. OF EDUC. 40	63,156.	4,342.	0.
AMY VINEYARD NASHVILLE, TN	DIR. OF MKTG. 40	39,615.	4,486.	0.
TOTAL		<u>\$ 489,174.</u>	<u>\$ 54,100.</u>	<u>\$ 0.</u>

STATEMENT 14**FORM 990, PART VIII****RELATIONSHIP OF ACTIVITIES TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES**

<u>LINE #</u>	<u>EXPLANATION OF ACTIVITIES</u>
93 A&B	ADMISSIONS & PROGRAM FEES PROVIDE STRUCTURED EDUCATION PROGRAMS FOR ELEMENTARY SCHOOL CHILDREN AND A VARIETY OF STRUCTURED AND UNSTRUCTURED PROGRAMS AND EXHIBITS FOR THE GENERAL PUBLIC.
102	EARNINGS FROM THE SALE OF EDUCATIONAL ITEMS RELATE TO SPECIFIC EDUCATIONAL PROGRAMS AND EXHIBITS THROUGHOUT THE YEAR.

FEDERAL STATEMENTS
ADVENTURE SCIENCE CENTER - NASHVILLE
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STATEMENT 15
SCHEDULE A, PART IV-A, LINE 22
OTHER INCOME

DESCRIPTION	(A) 2004	(B) 2003	(C) 2002	(D) 2001	(E) TOTAL
MISCELLANEOUS	\$ 25.	\$ 4,108.	\$ 5,838.	\$ 4,061.	\$ 14,032.
VENDING	5,970.	0.	0.	0.	5,970.
TOTAL	<u>\$ 5,995.</u>	<u>\$ 4,108.</u>	<u>\$ 5,838.</u>	<u>\$ 4,061.</u>	<u>\$ 20,002.</u>

STATEMENT 16
SCHEDULE A, PART VI-B, LINE I
DESCRIPTIONS OF THE LOBBYING ACTIVITIES

ADVENTURE SCIENCE CENTER IS ONE OF FIVE ORGANIZATIONS INCLUDED IN SCIENCE ALLIANCE. SCIENCE ALLIANCE HIRED A LOBBYIST TO ENSURE THEY RECEIVE STATE FUNDING.

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FEDERAL SUPPLEMENTAL INFORMATION

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ADVENTURE SCIENCE CENTER - NASHVILLE
F/K/A CUMBERLAND MUSEUMS

62-0479192

FORM 990, PART II, LINE 42
DEPRECIATION EXPENSE

PROPERTY AND EQUIPMENT ARE REPORTED AT COST. DEPRECIATION IS CALCULATED BY THE STRAIGHT-LINE METHOD TO ALLOCATE THE COST OF DEPRECIABLE ASSETS OVER THEIR ESTIMATED USEFUL LIVES STARTING THE PERIOD IN WHICH THE ASSETS ARE PLACED IN SERVICE. INTEREST COST ON OUTSTANDING BORROWINGS IS CAPITALIZED AS PART OF THE COST OF ACQUIRING QUALIFYING ASSETS, IF MATERIAL, DURING THE PERIOD REQUIRED TO PREPARE SUCH ASSETS FOR INTENDED USE.

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