

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2003

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 2003 calendar year, or tax year beginning , 2003, and ending , 20

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 Instructions

C Name of organization

Wayne Reed Christian Child Care Center

Number and street (or P O box if mail is not delivered to street address) Room/suite

5600 Granny White Pike

City or town, state or country, and ZIP + 4

Brentwood, TN 37027

D Employer identification number

62-1625142

E Telephone number

615-377-3028

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 ▶

G Website: ▶

J Organization type (check only one) ☒ 501(c)(3) (insert no) ☐ 4947(a)(1) or ☐ 527

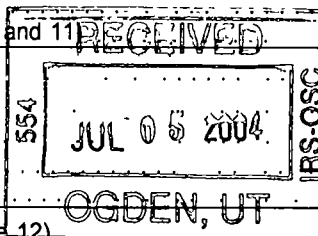
K Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 613,501

M Check ☐ if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	286,705		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c	265,655		
	d	Total (add lines 1a through 1c) (cash \$ 522,310 noncash \$ 0)	1d	552,360		
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	60,568		
	3	Membership dues and assessments	3			
	4	Interest on savings and temporary cash investments	4	573		
	5	Dividends and interest from securities	5			
	6a	Gross rents	6a			
	b	Less: rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
Expenses	7	Other investment income (describe ▶)	7			
	8a	Gross amount from sales of assets other than inventory	(A) Securities	8a		
	b	Less cost or other basis and sales expenses	8b			
	c	Gain or (loss) (attach schedule)	8c			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d			
	9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
	a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a			
	b	Less: direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
Net Assets	11	Other revenue (from Part VII, line 103)	11			
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	613,501		
	13	Program services (from line 44, column (B))	13	445,850		
	14	Management and general (from line 44, column (C))	14	50,102		
	15	Fundraising (from line 44, column (D))	15	7,264		
	16	Payments to affiliates (attach schedule)	16			
	17	Total expenses (add lines 16 and 44, column (A))	17	503,216		
	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	110,285		
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	817,885		
20	Other changes in net assets or fund balances (attach explanation)	20				
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	928,170			



For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2003)

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 (See page 22 of the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22				
23	Specific assistance to individuals (attach schedule)	23				
24	Benefits paid to or for members (attach schedule)	24				
25	Compensation of officers, directors, etc	25				
26	Other salaries and wages	26	292,288	276,212	16,076	
27	Pension plan contributions	27	3,987	2,990	997	
28	Other employee benefits	28	23,433	17,575	5,858	
29	Payroll taxes	29	23,895	22,188	1,707	
30	Professional fundraising fees	30	7,264		7,264	
31	Accounting fees	31	9,410	7,058	2,352	
32	Legal fees	32				
33	Supplies	33	47,022	47,022		
34	Telephone	34	3,498	2,624	874	
35	Postage and shipping	35				
36	Occupancy	36	37,538	28,154	9,384	
37	Equipment rental and maintenance	37	3,078	2,309	769	
38	Printing and publications	38				
39	Travel	39				
40	Conferences, conventions, and meetings	40	3,573	3,573		
41	Interest	41				
42	Depreciation, depletion, etc. (attach schedule)	42	28,603	21,425	7,151	
43	Other expenses not covered above (itemize) a	43a				
b	Office expense	43b	6,912	5,184	1,755	
c	Insurance	43c	6,452	4,839	1,613	
d	License & fees	43d	2,219	1,664	555	
e	Advertising & promotion	43e	4,044	3,033	1,011	
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	503,216	445,850	50,102	7,264

Joint Costs. Check ☐ if you are following SOP 98-2Are 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 \$ _____

Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)What is the organization's primary exempt purpose? ☒ to provide affordable day care

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) orgs., and 4947(a)(1) trusts, but optional for others)

a	provided affordable day for 75 low-income families	(Grants and allocations \$ 286,705)	445,850
b		(Grants and allocations \$)	
c		(Grants and allocations \$)	
d		(Grants and allocations \$)	
e	Other program services (attach schedule)	(Grants and allocations \$)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)		445,850

Part IV Balance Sheets (See page 25 of the 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	51,529	45	147,448
	46 Savings and temporary cash investments	5,064	46	48,483
	47a Accounts receivable 47a 70,999			
	b Less: allowance for doubtful accounts . . . 47b	83,047	47c	70,999
	48a Pledges receivable 48a			
	b Less: allowance for doubtful accounts 48b		48c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes and loans receivable (attach schedule) 51a			
	b Less: allowance for doubtful accounts 51b		51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	7,800	53	10,480
	54 Investments — securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55a Investments — land, buildings, and equipment, basis 55a			
	b Less: accumulated depreciation (attach schedule) 55b		55c	
	56 Investments — other (attach schedule)		56	
	57a Land, buildings, and equipment: basis 57a 800,188			
	b Less: accumulated depreciation (attach schedule) 57b 149,428	673,431	57c	650,760
	58 Other assets (describe <input type="checkbox"/>)		58	
	59 Total assets (add lines 45 through 58) (must equal line 74)	820,871	59	928,170
Liabilities	60 Accounts payable and accrued expenses	2,986	60	
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule) 64a		64a	
	b Mortgages and other notes payable (attach schedule) 64b		64b	
	65 Other liabilities (describe <input type="checkbox"/>)		65	
	66 Total liabilities (add lines 60 through 65)	2,986	66	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	787,885	67	888,170
	68 Temporarily restricted	30,000	68	40,000
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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)	817,885	73	928,170
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	820,871	74	928,170

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.

Yes	No
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Form **990** (2003)

Part VII Analysis of Income-Producing Activities (See page 33 of 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 Tuition paid by parents					60,568
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property inventory					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))					60,568
105 Total (add line 104, columns (B), (D), and (E))					60,568

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 page 34 of 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)

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of 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
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of 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)

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.

Please Sign Here

Signature of officer: J Michael Duncan Date: 05-03-04

Type or print name and title: Treasurer

Paid Preparer's Use Only

Preparer's signature: Date: Check if self-employed: ☐

Firm's name (or yours if self-employed), address, and ZIP + 4: Preparer's SSN or PTIN (See Gen. Inst. W):

EIN: Phone no:

Department of the Treasury
Internal Revenue Service

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

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

2003

62-1625142

[illegible]

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		

Part III Statements About Activities (See page 2 of the instructions)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e Transfer of any part of its income or assets?	2e	X
3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	3a	X
b Do you have a section 403(b) annuity plan for your employees?	3b	X
4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4	X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)The organization is not a private foundation because it is (Please check only **ONE** applicable box.)

- 5** ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6** ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7** ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8** ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9** ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ► _____
- 10** ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a** ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b** ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12** ☒ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions — subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13** ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14** ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

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) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	428,827	246,147	217,368	265,971	1,158,313
16 Membership fees received					
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	66,702	199,896	163,129	185,550	615,277
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	595	3,188	5,482	876	10,141
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	496,124	449,231	385,979	452,397	1,783,731
24 Line 23 minus line 17	429,422	249,335	222,850	266,847	1,168,454
25 Enter 1% of line 23	4,961	4,492	3,860	4,524	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶					26a
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 1999 through 2002 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts ▶					26b
c Total support for section 509(a)(1) test Enter line 24, column (e) ▶					26c
d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____ ▶					26d
e Public support (line 26c minus line 26d total) ▶					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					26f %
27 Organizations described on line 12: 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 (2002) 116,030 (2001) 78,664 (2000) 28,500 (1999) 75,000					
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 11, 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 (2002) 0 (2001) 0 (2000) 0 (1999) 0					
c Add: Amounts from column (e) for lines 15 <u>1,158,313</u> 16 _____ 17 <u>615,277</u> 20 _____ 21 _____ ▶					27c 1,773,590
d Add Line 27a total <u>298,194</u> and line 27b total <u>0</u> ▶					27d 298,194
e Public support (line 27c total minus line 27d total) ▶					27e 1,475,396
f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ▶					27f 1,783,731
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶					27g 82.71 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶					27h 0.57 %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, 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 page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	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?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) N/A	31	
32 Does the organization maintain the following	32a	
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32b	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32c	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32d	
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	33a	
a Students' rights or privileges?	33b	
b Admissions policies?	33c	
c Employment of faculty or administrative staff?	33d	
d Scholarships or other financial assistance?	33e	
e Educational policies?	33f	
f Use of facilities?	33g	
g Athletic programs?	33h	
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?	34a	
b Has the organization's right to such aid ever been revoked or suspended?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement		
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768)

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

(The term "expenditures" means amounts paid or incurred)

	(a) Affiliated group totals	(b) To be completed for ALL electing organizations												
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36 N/A													
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37													
38 Total lobbying expenditures (add lines 36 and 37)	38 0													
39 Other exempt purpose expenditures	39													
40 Total exempt purpose expenditures (add lines 38 and 39)	40 0													
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 0	
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 0													
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43 0													
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44 0													

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 on page 11 of the instructions)

Calendar year (or fiscal year beginning in) ►	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable 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 page 12 of the 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

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines c through h.)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Yes	No	Amount
		N/A
		0

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

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

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

(i) Cash

(ii) Other assets

b Other transactions

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

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.

	Yes	No
51a(i)		
a(ii)		
b(i)		
b(ii)		
b(iii)		
b(iv)		
b(v)		
b(vi)		
c		

[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]

WAYNE REED CHRISTIAN CHILD CARE CENTER
DECEMBER 31, 2003
FIXED ASSETS

<u>Description</u>	<u>In-service Date</u>	<u>Rate & Method</u>	<u>12/31/00 Balance</u>	<u>Additions</u>	<u>Sales</u>	<u>12/31/01 Balance</u>	<u>Additions</u>	<u>Sales</u>	<u>12/31/02 Balance</u>	<u>Additions</u>	<u>Sales</u>	<u>12/31/03 Balance</u>
Building-11B Lindsley Aven	10/98	SL.....40	<u>684,066</u>			<u>684,066</u>			<u>684,066</u>			<u>684,066</u>
HVAC	08/03	SL.....7	<u>0</u>			<u>0</u>			<u>0</u>	<u>2,600</u>		<u>2,600</u>
Office Equipment												
Computers	10/98	SL. .5	<u>1,666</u>			<u>1,666</u>			<u>1,666</u>			<u>1,666</u>
Security System	10/98	SL.....5	<u>881</u>			<u>881</u>			<u>881</u>			<u>881</u>
Misc Equipment	10/98	SL.....5	<u>469</u>			<u>469</u>			<u>469</u>			<u>469</u>
Telephone Equipment	10/98	SL.....5	<u>1,843</u>			<u>1,843</u>			<u>1,843</u>			<u>1,843</u>
Office Equipment	10/98	SL.....5	<u>4,859</u>			<u>4,859</u>			<u>4,859</u>	<u>0</u>		<u>4,859</u>
Kitchen Equipment	10/98	SL.....5	<u>14,305</u>			<u>14,305</u>			<u>14,305</u>			<u>14,305</u>
Kitchen Cabinets	09/02	SL.....10					<u>2,731</u>		<u>2,731</u>			<u>2,731</u>
Computers	06/99	SL.....3	<u>5,717</u>			<u>5,717</u>			<u>5,717</u>			<u>5,717</u>
Computers	09/03	SL... .3								<u>3,333</u>		<u>3,333</u>
Computer Total			<u>5,717</u>	<u>0</u>	<u>0</u>	<u>5,717</u>	<u>0</u>	<u>0</u>	<u>5,717</u>	<u>3,333</u>	<u>0</u>	<u>9,050</u>
Playground Equipment	10/98	SL.....15	<u>26,787</u>			<u>26,787</u>			<u>26,787</u>			<u>26,787</u>
Playground Resurface	09/01	SL.....15		<u>26,697</u>		<u>26,697</u>			<u>26,697</u>			<u>26,697</u>
Vehicles												
Ford Van	01/00	SL.....5	<u>26,093</u>			<u>26,093</u>			<u>26,093</u>			<u>26,093</u>
Donated Auto	12/02	SL.....5					<u>3,000</u>		<u>3,000</u>			<u>3,000</u>
Vehicles Total			<u>26,093</u>	<u>0</u>	<u>0</u>	<u>26,093</u>	<u>3,000</u>	<u>0</u>	<u>29,093</u>	<u>0</u>	<u>0</u>	<u>29,093</u>
Total Fixed Assets			<u>761,827</u>	<u>26,697</u>	<u>0</u>	<u>788,524</u>	<u>5,731</u>	<u>0</u>	<u>794,255</u>	<u>3,333</u>	<u>0</u>	<u>800,188</u>

WAYNE REED CHRISTIAN CHILD CARE CENTER
DECEMBER 31, 2003
FIXED ASSETS

<u>Description</u>	<u>In-service Date</u>	<u>Rate & Method</u>	<u>12/31/00 Balance</u>	<u>Additions</u>	<u>Sales</u>	<u>12/31/01 Balance</u>	<u>Additions</u>	<u>Sales</u>	<u>12/31/02 Balance</u>	<u>Additions</u>	<u>Sales</u>	<u>12/31/03 Balance</u>
Building-11B Lindsley Avenue	10/98	SL.....40	<u>684,066</u>			<u>684,066</u>			<u>684,066</u>			<u>684,066</u>
HVAC	08/03	SL.....7	<u>0</u>			<u>0</u>			<u>0</u>	<u>2,600</u>		<u>2,600</u>
Office Equipment												
Computers	10/98	SL.....5	<u>1,666</u>			<u>1,666</u>			<u>1,666</u>			<u>1,666</u>
Security System	10/98	SL.....5	<u>881</u>			<u>881</u>			<u>881</u>			<u>881</u>
Misc Equipment	10/98	SL.....5	<u>469</u>			<u>469</u>			<u>469</u>			<u>469</u>
Telephone Equipment	10/98	SL.....5	<u>1,843</u>			<u>1,843</u>			<u>1,843</u>			<u>1,843</u>
Office Equipment	10/98	SL.....5	<u>4,859</u>			<u>4,859</u>			<u>4,859</u>	<u>0</u>		<u>4,859</u>
Kitchen Equipment	10/98	SL.....5	<u>14,305</u>			<u>14,305</u>			<u>14,305</u>			<u>14,305</u>
Kitchen Cabinets	09/02	SL10					<u>2,731</u>		<u>2,731</u>			<u>2,731</u>
Computers	06/99	SL3	<u>5,717</u>			<u>5,717</u>			<u>5,717</u>			<u>5,717</u>
Computers	09/03	SL.....3								<u>3,333</u>		<u>3,333</u>
Computer Total			<u>5,717</u>	<u>0</u>	<u>0</u>	<u>5,717</u>	<u>0</u>	<u>0</u>	<u>5,717</u>	<u>3,333</u>	<u>0</u>	<u>9,050</u>
Playground Equipment	10/98	SL.....15	<u>26,787</u>			<u>26,787</u>			<u>26,787</u>			<u>26,787</u>
Playground Resurface	09/01	SL.....15		<u>26,697</u>		<u>26,697</u>			<u>26,697</u>			<u>26,697</u>
Vehicles												
Ford Van	01/00	SL.....5	<u>26,093</u>			<u>26,093</u>			<u>26,093</u>			<u>26,093</u>
Donated Auto	12/02	SL.....5					<u>3,000</u>		<u>3,000</u>			<u>3,000</u>
Vehicles Total			<u>26,093</u>	<u>0</u>	<u>0</u>	<u>26,093</u>	<u>3,000</u>	<u>0</u>	<u>29,093</u>	<u>0</u>	<u>0</u>	<u>29,093</u>
Total Fixed Assets			<u>761,827</u>	<u>26,697</u>	<u>0</u>	<u>788,524</u>	<u>5,731</u>	<u>0</u>	<u>794,255</u>	<u>3,333</u>	<u>0</u>	<u>800,188</u>

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