Form	887	'9-	EO)
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IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2013, or fiscal year beginning $\underline{JUL 1}$, 2013, and ending $\underline{JUN 30}$,20 $\underline{14}$

2013

Department of the Treasury Internal Revenue Service Do not send to the IRS. Keep for your records.

Information about Form 8879-EO and its instructions is at www.irs.gov/form8879ec

Name of exempt organization

Employer identification number

62-1681766

NASHVILLE PUBLIC LIBRARY FOUNDATION

Name and title of officer TARI HUGHES PRESIDENT

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a	Form 990 check here X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	2,837,739.
2a	Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	Зb	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2013 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X Lauthorize LATTIMORE BLACK MORGAN & CAIN, P.C.	to enter my PIN 23017
ERO firm name	Enter five numbers, but do not enter all zeros
as my signature on the organization's tax year 2013 electronically filed return. If I have indicated withi is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also enter my PIN on the return's disclosure consent screen.	
As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 20 indicated within this return that a copy of the return is being filed with a state agency(ies) regulating c program, I will enter my PIN on the return's disclosure consent screen.	
Difficer's signature ► Date ►	
Part III Certification and Authentication	
RO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. do not enter all zer	
certify that the above numeric entry is my PIN, which is my signature on the 2013 electronically filed return for confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (N - <i>file</i> Providers for Business Returns.	
TRO's signature \blacktriangleright Date \frown	2/17/15
ERO Must Retain This Form - See Instructions	

Do Not Submit This Form To the IRS Unless Requested To Do So

For	" 9	90	Return of Organiza	ation Exempt F	rom I	ncome Tax	OMB No. 1545-0047
Depa						Open to Public	
Inter	nal Rev	enue Service	▶ Information about Form 9				Inspection
			ar year, or tax year beginning JUL	<u>1,2013</u> and e	nding J	ŬN 30, 2014	*
Ba	heck if	le:	organization			D Employer identifi	cation number
	_Addri	NASH	VILLE PUBLIC LIBRARY	FOUNDATION			
Ē	Nama Chan		isiness As			62-1	681766
			and street (or P.O. box if mail is not delivered	t to street address) R	Room/suite	E Telephone numbe	r
] Termi	ⁱⁿ⁻ 615	CHURCH STREET			615-	880-2610
	Amer	ι Γυπγοιτα	wn, state or province, country, and ZIP of	or foreign postal code		G Gross receipts \$	3,810,804.
	Appli tion pend	ca- NASH	VILLE, TN 37219	IIIGIUDA		H(a) Is this a group re	
	p	📑 🛛 F Name ar	d address of principal officer: TARI	LLE, TN 37219		for subordinates	
			HURCH STREET, NASHVII \underline{X} 501(c)(3) $\boxed{501(c)}$ () \triangleleft (insert no.) 4947(a)(1) or		H(b) Are all subordinates in	
		te: NPLF			J21	H(c) Group exemptio	list. (see instructions)
		f organization:	Corporation Trust X Associa	tion 🔄 Other 🕨	L Year o		State of legal domicite; TN
	rt I	Summary					
<u>ب</u>	1	Briefly describ	e the organization's mission or most sign	ficant activities: THE M	ISSIO	N OF THE NA	SHVILLE
Activities & Governance		PUBLIC	LIBRARY FOUNDATION ()	NPLF) IS TO RA	ISE P	RIVATE FUND	S TO
st na	2	Check this box	if the organization discontinu	ed its operations or dispose	ed of more	than 25% of its net as	sets.
Š	3	Number of vot	ng members of the governing body (Part	VI, line 1a)			29
ల న	4	Number of ind	ependent voting members of the governi	ng body (Part VI, line 1b)			28
es	5		f individuals employed in calendar year 2				27
Niti	6	Total number of	f volunteers (estimate if necessary)			6	0
5	7 a	Total unrelated	business revenue from Part VIII, column	(C), line 12			0.
_	b	Net unrelated	pusiness taxable income from Form 990.	r, line 34			0.
						Prior Year	Current Year
0	8	Contributions a	and grants (Part VIII, line 1h)			3,831,805.	2,285,334.
Revenue	9	Program service	e revenue (Part VIII, line 2g)			0.	0.
ě	10	Investment inc	ome (Part VIII, column (A), lines 3, 4, and	7d)		183,972.	236,972.
<u>a</u>	11	Other revenue	(Part VIII, column (A), lines 5, 6d, 8c, 9c,	10c, and 11e)		163,697.	315,433.
	12	Total revenue ·	add lines 8 through 11 (must equal Part	VIII, column (A), line 12)		4,179,474.	2,837,739.
	13	Grants and sin	ilar amounts paid (Part IX, column (A), lin	es 1-3)		2,479,796.	1,671,891.
	14	Benefits paid t	o or for members (Part IX, column (A), line	ə 4)		0.	0.
es	15	Salaries, other	compensation, employee benefits (Part I	X, column (A), lines 5-10)		624,534.	676,538.
Expense	16a	Professional fu	compensation, employee benefits (Part I ndraising fees (Part IX, column (A), line 1 ig expenses (Part IX, column (D), line 25)	1e)		41,854.	19,200.
- ad x	b	Total fundraisir	ig expenses (Part IX, column (Ď), line 25)	▶ 242,16	1.		
ш	17	Other expense	s (Part IX, column (A), lines 11a-11d, 11f-	24e)		301,755.	290,082.
	18	Total expenses	. Add lines 13-17 (must equal Part IX, co	iumn (A), line 25)		3,447,939.	2,657,711.
	19	Revenue less e	xpenses. Subtract line 18 from line 12			731,535.	180,028.
s or						inning of Current Year	End of Year
sset		Total assets (P				12,432,810.	12,924,924.
Net Assets or Fund Balances		Total liabilities	,			396,625.	180,028.
			and balances. Subtract line 21 from line 2	20		12,036,185.	12,744,896.
	rt II						
			declare that I have examined this return, includ				/ knowledge and belief, it is
true,	correc	· · · · · · · · · · · · · · · · · · ·	Declaration of preparer (other than officer) is b	ased on all information of whic	h preparer i	ias any knowledge.	
		X-Ta					15
Sign		Signature	V			Date	
Here)		HUGHES, PRESIDENT				
		· · · ·	int name and title			ate Check	PTIN
		Print/Type prep		arer's signature		onaon	
Paid		JILL HUI		L HUDSON	V	2/17/15 if seit-employe	P00061190 62 1100757
Prep		Firm's name	LATTIMORE BLACK MOR	GAN & CAIN, P	.C.	Firm's EIN 🕨	62-1199757
Use	JNIY	Firm's address	P.O. BOX 1869	1960		- IC.	15) 277 4000
			BRENTWOOD, TN 37024			Phone no. (6	
			return with the preparer shown above? (••••••••••	
33200	1 10-2	9-13 LHA F O	r Paperwork Reduction Act Notice, se	e the separate instruction	IS,		Form 990 (2013)

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SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2013) NASHVILLE PUBLIC LIBRARY FOUNDATION 62-1681766 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE MISSION OF THE NASHVILLE PUBLIC LIBRARY FOUNDATION (NPLF) IS TO
	RAISE PRIVATE FUNDS TO ENHANCE THE PROGRAMS, FACILITIES AND
	COLLECTIONS OF THE NASHVILLE PUBLIC LIBRARY. NPLF HAS BEEN PART OF THE
	LIBRARY'S PHENOMENAL SUCCESS SINCE 1997. SINCE THE INCEPTION OF THIS
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ? Yes X No
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service 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, and
4-	revenue, if any, for each program service reported. (Code:) (Expenses \$ 571,252. including grants of \$ 364,106.) (Revenue \$)
4a	(Code:) (Expenses \$571,252. including grants of \$504,106.) (Revenue \$) LIMITLESS LIBRARIES STARTED IN 2009 AS A PILOT PROJECT LED BY MAYOR
	KARL DEAN TO PROVIDE FOUR METRO NASHVILLE PUBLIC (MNPS) HIGH SCHOOLS
	WITH ACCESS TO NEARLY 2 MILLION NASHVILLE PUBLIC LIBRARY BOOKS AND
	MATERIALS. TODAY, LIMITLESS LIBRARIES SHARES THE PUBLIC LIBRARY'S
	RESOURCES WITH THE 81,000 STUDENTS IN ALL 128 METRO NASHVILLE PUBLIC
	ELEMENTARY, MIDDLE AND HIGH SCHOOLS BY DELIVERING THEM DIRECTLY TO
	SCHOOL LIBRARIES. RECOGNIZED AS A 2013 TOP INNOVATOR BY THE URBAN
	LIBRARIES COUNCIL, LIMITLESS LIBRARIES HAS PROMPTED 30,000 NEW STUDENTS
	AND TEACHERS TO BECOME LIBRARY CARDHOLDERS. INSPIRED BY THIS SUCCESSFUL
	PARTNERSHIP AND EFFICIENT USE OF RESOURCES, A GENEROUS DONOR GAVE
	\$500,000 TO RENOVATE AND EXPAND WRIGHT MIDDLE SCHOOL'S LIBRARY. THE
	LIBRARY RECEIVED A MAJOR TRANSFORMATION INCLUDING NEW BOOKS AND
4b	(Code:) (Expenses \$ 368,149. including grants of \$) (Revenue \$)
	BRINGING BOOKS TO LIFE IS AN AWARD-WINNING PRE-LITERACY PROGRAM THAT
	HELPS TEACHERS AND PARENTS FOSTER A LOVE OF READING IN CHILDREN THROUGH TEACHER TRAINING, FAMILY LITERACY PROGRAMS AND STORY-RELATED CLASSROOM
	ACTIVITIES. LAST YEAR, BBTL TRAINED MORE THAN 840 TEACHERS AND ARMED
	MORE THAN 990 PARENTS WITH THE LITERACY TOOLS NEEDED TO INSPIRE READING
	BOTH AT HOME AND IN THE CLASSROOM. AFTER COMPLETING THE PROGRAM, 99
	PERCENT OF SURVEYED PARENTS WERE MORE INCLINED TO USE THE LIBRARY AS A
	RESOURCE AND 97 PERCENT WERE INSPIRED TO ENGAGE IN MORE
	LITERACY-RELATED ACTIVITIES WITH THEIR CHILDREN. BBTL REWARDS CHILDREN,
	TEACHERS AND FAMILIES WITH A VISIT FROM THE PUPPET TRUCK - A MOBILE
	PUPPET SHOW. THE PUPPET TRUCK EXTENDS THE REACH OF THE LIBRARY BY
	TAKING LITERATURE-BASED PUPPET SHOWS ON THE ROAD TO REACH MORE THAN
4c	(Code:) (Expenses \$ 1,062,410. including grants of \$ 717,969.) (Revenue \$)
	ADDITIONAL PROGRAMATIC SUPPORT: IN FY14, NPLF SUPPORT PROVIDED FUNDS
	FOR: 23,000 NEW BOOKS AND MATERIALS OFFERED THROUGHOUT THE CITY; A
	MOBILE JOB SEARCH LAB THAT TRAVELED THE CITY AND OFFERED PATRONS RESUME BUILDING, BASIC COMPUTER SKILLS AND JOB APPLICATION SERVICES; SALON@615
	BROUGHT AUTHOR TALKS AND BOOK SIGNINGS WITH BESTSELLING AUTHORS TO
	4,600 AUDIENCE MEMBERS; COURTYARD CONCERTS ENTERTAINED 4,000 ATTENDEES
	WITH FREE MUSIC BY DIVERSE LOCAL PERFORMERS; AND SUMMER AND AFTERSCHOOL
	LEARNING WHERE 7,000 STUDENTS WERE CHALLENGED WITH INNOVATIVE
	OUT-OF-SCHOOL PROGRAMMING. ART EXHIBITS, SPECIAL COLLECTION STAFFING,
	CIVIL RIGHTS PROGRAMMING PROGRAMS FOR ALL AGES THROUGHOUT THE SYSTEM
	ROUND OUT SUPPORT FROM NPLF TO THE LIBRARY IN FY14.
4d	Other program services (Describe in Schedule O.)

33200	2			Form 990 (2013)
4e	Total program service expenses 🕨	2,001,811.		
	(Expenses \$	including grants of \$	589,816.) (Revenue \$)
4d	Other program services (Describe in S			

	990 (2013) NASHVILLE PUBLIC LIBRARY FOUNDATION 62-1681
Par	t IV Checklist of Required Schedules
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A
2	Is the organization required to complete Schedule B, Schedule of Contributors?
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II
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>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
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? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>
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
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? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i>
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? <i>If</i> "Yes," <i>complete Schedule D, Part VIII</i>
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? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
14a	Did the organization maintain an office, employees, or agents outside of the United States?
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i>
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 foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i>
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? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i>
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? <i>If</i> "Yes," <i>complete Schedule G, Part I</i>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>
10	Did the experimentary report more than 015000 of areas income from doming activities on Dart VIII line 0.02 if "Vac "

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6	Did the or
	nrovide ac

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
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,
	Schedule D. Part III

9 10

		, ,	· · · · · · · · · · · · · · · · · · ·	
11	If the organization's answer to any of the	e following questior	ns is "Yes," then complete	Schedule D, Parts VI, VII, VIII, IX, or X
	as applicable.			

	assets reported in rar A, interform res, complete conclude B, r dr vin
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
Ь	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

d

е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete

13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b
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	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15
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

17 18

	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form **990** (2013)

Form 990 (2					FOUNDATION	
Part IV	Checklist of R	equired Schedu	lles (continue	d)		

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	x	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			
22	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		Х
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			
	Schedule K. If "No", go to line 25a	24a		Х
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	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		Х
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 so,			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X	
b	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,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form **990** (2013)

	990 (2013) NASHVILLE PUBLIC LIBRARY FOUNDATION 62-1681	.766	F
Par			
	Check if Schedule O contains a response or note to any line in this Part V		
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes
		4	
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1.	x
	(gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1c	
		,	
	filed for the calendar year ending with or within the year covered by this return 2a 2/ If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	20	
		3a	
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? <i>If</i> "No," to line 3b, provide an explanation in Schedule O	3b	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	55	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	
	If "Yes," enter the name of the foreign country:	τu	
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		
	any contributions that were not tax deductible as charitable contributions?	6a	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		
	were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		
	to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
а	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
а	Initiation fees and capital contributions included on Part VIII, line 12 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11	Section 501(c)(12) organizations. Enter:		
а	Gross income from members or shareholders 11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against		
	amounts due or received from them.)		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	
	Note. See the instructions for additional information the organization must report on Schedule O.		
	Enter the amount of reserves the organization is required to maintain by the states in which the		
	organization is licensed to issue qualified health plans 13b		

No

Х

х

х

Х

Х

х

Х

Х

Form 990 (2013)

14a

14b

Х

c Enter the amount of reserves on hand ______ 13c

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O _

14a Did the organization receive any payments for indoor tanning services during the tax year?

 otatomonto mogaram
Check if Schedule O contain

Form 990 (2013)

а	The organization's CEO, Executive Director, or top management official
b	Other officers or key employees of the organization
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a
	taxable entity during the year?
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?
Sec	tion C. Disclosure
17	List the states with which a copy of this Form 990 is required to be filed $igarped{TN}$
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a
	for public inspection. Indicate how you made these available. Check all that apply.
	Own website X Another's website X Upon request Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and
	statements available to the public during the tax year.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizat CLAUDIA SCHENCK - 615-880-2613
	615 CHURCH STREET, NASHVILLE, TN 37219
33200	6 10-29-13
	6

NASHVILLE PUBLIC LIBRARY FOUNDATION

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.

Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year

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.

			ാറി								
-	Enter the number of voting members included in line 1a, above, who are independent	1b	28								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship										
	officer, director, trustee, or key employee?			2		Х					
3	Did the organization delegate control over management duties customarily performed by or under the										
	of officers, directors, or trustees, or key employees to a management company or other person?		E E E E E E E E E E E E E E E E E E E	3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 9		F	4		Х					
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		Х					
6	Did the organization have members or stockholders?			6		Х					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap more members of the governing body?			7a		Х					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s		Γ								
	persons other than the governing body?										
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year										
а	The governing body?			8a	Х						
b	Each committee with authority to act on behalf of the governing body?			8b	Х						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea										
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Code.)									
		,			Yes	N					
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х					
	If "Yes," did the organization have written policies and procedures governing the activities of such ch										
-	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body		E	11a	Х						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	,									
	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						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye										
-	in Schedule O how this was done			12c	Х						
13	Did the organization have a written whistleblower policy?			13	Х						
14	Did the organization have a written document retention and destruction policy?			14	Х						
15	Did the process for determining compensation of the following persons include a review and approva										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official			15a	Х						
	Other officers or key employees of the organization			15b	X						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			1015							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment with a									
				16a		Х					
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat			100							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ										
	exempt status with respect to such arrangements?			16b							
Sec	tion C. Disclosure			100							
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright ext{TN}$										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Section 501(c)(3)s	only) a	vailah	le						
.0	for public inspection. Indicate how you made these available. Check all that apply.		ony) a	vanau							
		in Schedule O)									
10	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co		01 000	lfinor							
19	statements available to the public during the tax year.	milerest pol	cy, and	i iii idi	icial						
20	State the name, physical address, and telephone number of the person who possesses the books ar	ad records of the ar	nonizot	ion: 🕨							
20	CLAUDIA SCHENCK - 615-880-2613		yanizat	ion. 🗩							
	615 CHURCH STREET, NASHVILLE, TN 37219										

29

1a

X

No

Yes

7	DIIDI TO	TOTINT

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

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.

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(do		Pos		1 than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		cer an	id a d	recto	or/trus	itee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	e			ated		organization	(W-2/1099-MISC)	from the
	related	ustee	trust		æ	suadi		(W-2/1099-MISC)		organization
	organizations below	ual tr	ional		ploy	t con /ee				and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) JEAN ANN STEWART BANKER	3.00	_	_		-		_			
BOARD MEMBER		X						0.	0.	0.
(2) MARY DORRIAN BETTIS	3.00									
BOARD MEMBER		Х						0.	0.	0.
(3) TODD BOTTORFF	3.00									
BOARD MEMBER		Х						0.	0.	0.
(4) RICHARD BOVENDER	3.00									
BOARD MEMBER		Х						0.	0.	0.
(5) MAYOR KARL DEAN	3.00									-
BOARD MEMBER		Х						0.	0.	0.
(6) JOHNNY GARRETT	3.00									-
BOARD MEMBER		Х						0.	0.	0.
(7) LUCY HAYNES	3.00									-
BOARD MEMBER		х						0.	0.	0.
(8) LYDIA HOWARTH	3.00									
BOARD MEMBER		X						0.	0.	0.
(9) CATHY TYNE JACKSON	3.00									•
BOARD MEMBER		Х						0.	0.	0.
(10) BILL KING	3.00									•
BOARD MEMBER		Х						0.	0.	0.
(11) MIKE LOVETT	3.00									•
BOARD MEMBER		Х						0.	0.	0.
(12) MARK MAGNUSON	3.00									•
BOARD MEMBER		Х						0.	0.	0.
(13) KEITH MEACHAM	3.00									•
BOARD MEMBER		Х						0.	0.	0.
(14) RUSTY MILLER	3.00									•
BOARD MEMBER		X						0.	0.	0.
(15) JULI MOSLEY	3.00									0
BOARD MEMBER	2.00	X						0.	0.	0.
(16) LAURENCE M. PAPEL	3.00									0
BOARD MEMBER	2 00	X						0.	0.	0.
(17) ANN PATCHETT	3.00									0
BOARD MEMBER		Х						0.	0.	0.

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Form 990 (2013)

NASHVILLE PUBLIC LIBRARY FOUNDATION

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Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	an	d Hi	ighe	st C	Compensated Employe	es (continued)			
(A)	(B)				C)			(D)	(E)		(F)	
Name and title	Average	(da	not ch	Pos	itior) thon	000	Reportable	Reportable	E	stimate	ed
	hours per	box	unles	ss pe	rson	is bot	h an	compensation	compensation	ar	mount	of
	week		cer an	dad	recto	or/trus	tee)	from	from related		other	
	(list any	rector						the	organizations		npensa	
	hours for related	ordi	ee			sated		organization	(W-2/1099-MISC)		rom th	
	organizations	rustee	l trust		ee	npens		(W-2/1099-MISC)			ganizat Id relat	
	below	dual ti	Institutional trustee	-	nploy	st cor	5				anizati	
	line)	Individual trustee or director	Institu	Officer	Key employee	Highest compensated employee	Former					
(18) JOYCE SEARCY	3.00	_		_	-							
BOARD MEMBER		x						0.	0.			Ο.
(19) CLINT SMITH	3.00											
BOARD MEMBER		x						0.	0.			Ο.
(20) JOE STEAKLEY	3.00											
BOARD MEMBER		x						0.	0.			0.
(21) DENINE TORR	3.00								-			
BOARD MEMBER		x						0.	0.			0.
(22) BYRON R. TRAUGER	3.00								-			
BOARD MEMBER		x						0.	0.			0.
(23) LAURA ANNE TURNER	3.00											
BOARD MEMBER		x						0.	0.			0.
(24) JERRY WILLIAMS	3.00								•••			
BOARD MEMBER		x						0.	0.			0.
(25) BRENDA WYNN	3.00								•••			
BOARD MEMBER		x						0.	0.			0.
(26) TARI P. HUGHES	50.00								•••			
PRESIDENT				х				90,276.	0.	1	5,2	64.
the Crish tested					I			90,276.	0.		5,2	$\frac{1}{64}$
c Total from continuation sheets to Part VI								0.	0.		<u>-,-</u>	0.
d Total (add lines 1b and 1c)								90,276.	0.	1	5,2	
2 Total number of individuals (including but n							Po r		-		- / -	
compensation from the organization		000	1000	u u	000	0, 111	10 1					0
											Yes	No
3 Did the organization list any former officer,	director or tri	ister	e ke	v er	nnlc	vee	or	highest compensated e	mplovee on			
line 1a? If "Yes," complete Schedule J for s								ingricer compensated of		3		х
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$150										4		х
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes," com										5		х
Section B. Independent Contractors											<u> </u>	
1 Complete this table for your five highest co	mpensated ind	depe	ende	nt c	ont	racto	ors t	that received more than	\$100.000 of compens	sation	from	
the organization. Report compensation for												
(A)				.9 .				(B)			C)	
Name and business	address	NC	ONE	2				Description of s	ervices		ensatio	n

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 ► 0

Form 990

NASHVILLE PUBLIC LIBRARY FOUNDATION

62-1681766

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highes							est	Compensated Employ	ees (continued)	
(A) (B)				(0	C)			(D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	5				loyee		the organization	organizations (W-2/1099-MISC)	compensation from the
	(list any hours for	direct				d emp		(W-2/1099-MISC)	(00-2/1099-00130)	organization
	related	e or c	stee			Isated		(00-2/1099-101130)		and related
	organizations	truste	al trus		yee	mper				organizations
	below	Individual trustee or director	In stitutional trustee	7	Key employee	Highest compensated employee	er			
	line)	Indivi	In stit	Officer	Key e	High(Former			
(27) BETH C. ALEXANDER	3.00									
PAST CHAIR		1		х				0.	0.	0.
(28) TOWNES DUNCAN	3.00									
TREASURER		1		х				0.	0.	0.
(29) KENT OLIVER	3.00									-
LIBRARY DIRECTOR				x				0.	0.	0.
(30) MARGARET ANN ROBINSON	3.00		-	\vdash						
SECRETARY		1		x				0.	0.	0.
(31) KATY VARNEY	5.00									•••
CHAIR				х				0.	0.	0.
								•••		•••
								<u> </u>		
Total to Part VII, Section A, line 1c										
, , , · · -								-	-	

Form	990) (2	2013) NASHV	/ILLE PUB	LIC LIBR	ARY FOUNDA	TION	62-1681	766 Page 9
Pa	rt VI	IÌI	Statement of Reve	nue					
			Check if Schedule O cont	tains a response	or note to any lir	ne in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts ts	1 a	a	Federated campaigns	1a					
iran			Membership dues						
, G			Fundraising events		236,145.				
ar A			Related organizations						
s, G			Government grants (contribut						
Contributions, Gifts, Grants and Other Similar Amounts			All other contributions, gifts, gran			•			
her	'		similar amounts not included abo		049,189.				
Qt			Noncash contributions included in lines						
no Du			Total. Add lines 1a-1f			2,285,334.			
0.0		n	Total. Add lines Ta-11		Business Code				
0	•	_			Business Code				
Program Service Revenue	2 8								
Ser		b							
ven Ven		C							
gra Re	C	d							
ro	e	e							
-			All other program service reve						
			Total. Add lines 2a-2f						
	3		Investment income (including			188,684.			188,684.
			other similar amounts)			100,004.			100,004.
	4								
	5		Royalties						
	. .	_	Overe verete	(i) Real 63,164.	(ii) Personal				
			Gross rents	10 100					
			Less: rental expenses						
			Rental income or (loss)		L	52,764.	52,764.		
			Net rental income or (loss) Gross amount from sales of	(i) Securities	(ii) Other	52,704.	52,7040		
	1 6			847,125.	(ii) Other				
			assets other than inventory Less: cost or other basis	047,123.					
				798,837.					
			Gain or (loss)	10 000					
			Net gain or (loss)			48,288.			48,288.
			Gross income from fundraisin			10,2001			10,2001
nue	0.		including \$ 236,1						
evel			contributions reported on line						
r R			Part IV, line 18		426,497.				
Other Revenue	ł	h	Less: direct expenses	u	163,828.				
Ò		c	Net income or (loss) from fund	draising events		262,669.			262,669.
			Gross income from gaming ad	-		,			•
			Part IV, line 19						
	t		Less: direct expenses						
			Net income or (loss) from gan						
			Gross sales of inventory, less	-					
			and allowances	а					
	k		Less: cost of goods sold						
			Net income or (loss) from sale						
		_	Miscellaneous Revenu		Business Code				
	11 a	а							
	k	b							
	c	с							
			All other revenue						
	e	е	Total. Add lines 11a-11d						
	12		Total revenue. See instructions.			2,837,739.	52,764.	0.	499,641.

Check here

16

17

18

19 20

21

22

23

24

а

b

с

d

е

25 26 Interest

Insurance

Occupancy

Travel

Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings

Payments to affiliates

Depreciation, depletion, and amortization

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.)

COMPREHENSIVE CAMPAIGN

BOARD MEETING EXPENSE

PROFESSIONAL DEVELOPMEN

Total functional expenses. Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

DESKTOP SERVICES

All other expenses

Other expenses. Itemize expenses not covered

43,062.

242,161.

15,835.

3,543.

6,902.

5,564. 5,133.

1,843.

413,739.

11

2,001,811.

	1 990 (2013) NASHVILLE PI rt IX Statement of Functional Expens	UBLIC LIBRARY	Y FOUNDATION	62-16	581766 Page 10
Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	omplete column (A).	
	Check if Schedule O contains a respor	nse or note to any line in			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	1,671,891.	1,671,891.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	109,704.		32,911.	76,793.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	490,270.	292,869.	112,778.	84,623.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	12,830.	5,378.	4,579.	2,873. 6,365.
9	Other employee benefits	16,332.	4,290.	5,677.	6,365.
10	Payroll taxes	47,402.	27,383.	10,774.	9,245.
11	Fees for services (non-employees):				
а	Management				
b	Legal				
с	Accounting	40,514.		40,514.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	19,200.			19,200.
f	Investment management fees	44,803.		44,803.	
g					
	column (A) amount, list line 11g expenses on Sch 0.)	27,483.		27,483.	
12	Advertising and promotion	30,093.		30,093.	
13	Office expenses	64,196.		64,196.	
14	Information technology	1,111.		1,111.	
15	Royalties				

15,835.

3,543.

43,062.

6,902.

5,564.

5,133.

1,843.

2,657,711.

62-1681766 Page **11**

<u>Form 990 (</u>	2013)	NASHVILLE	PUBLIC	LIBRARY	FOUNDATION	(
Part X	Balance Sheet					
	Check if Schedule	O contains a respon	se or note to a	any line in this Pa	art X	

		Check if Schedule O contains a response or not	e to an	v line in this Part X			
		·			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	1,084,376.	1	1,115,657.		
	2	Savings and temporary cash investments	2,908,456.	2	1,913,480.		
	3	Pledges and grants receivable, net			1,736,384.	3	1,745,031.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensation					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section		,			
		employers and sponsoring organizations of sect		•			
ŝ		employees' beneficiary organizations (see instr).				6	
Assets	7	Notes and loans receivable, net				7	
Ä	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			8,387.	9	10,332.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	249,017.			
	b	Less: accumulated depreciation	10b	242,679.	9,042.	10c	6,338.
	11	Investments - publicly traded securities			6,686,165.	11	8,134,086.
	12	Investments - other securities. See Part IV, line -	11			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equ	al line 3	4)	12,432,810.	16	12,924,924.
	17	Accounts payable and accrued expenses	396,625.	17	180,028.		
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
es	22	Loans and other payables to current and former					
iliti		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L		22			
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	. Complete Part X of				
					396,625.	25	180,028.
	26	Total liabilities. Add lines 17 through 25			590,025.	26	100,020.
<i>(</i> 0		Organizations that follow SFAS 117 (ASC 958		K nere 🏲 🖾 and			
čě	07	complete lines 27 through 29, and lines 33 an			1,921,784.	27	2,352,351.
alan	27 28	Unrestricted net assets Temporarily restricted net assets			7,263,930.	27	6,542,074.
ΪB	20 29		2,850,471.	20	3,850,471.		
un	25	Organizations that do not follow SFAS 117 (A		R) check here	2,000,1,10	23	3703071710
г		and complete lines 30 through 34.	30 330				
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds				30	
sse	31	Paid-in or capital surplus, or land, building, or ec				31	
ťA	32	Retained earnings, endowment, accumulated in				32	
Ne	33	Total net assets or fund balances			12,036,185.	33	12,744,896.
	34	Total liabilities and net assets/fund balances			12,432,810.	34	12,924,924.

Form **990** (2013)

NASHVILLE	PUBLIC	LIBRARY	FOUNDATION
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Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		<u> </u>
1 2 3 4 5 6 7	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities	1 2 3 4 5 6 7	2,8 2,6 1 12,0	337, 557, 80, 36,	739. 711. 028. 185. 683.
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	12,7	44,	896.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_ [Ye	es No
2a	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule 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:			bΣ	7
D	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat consolidated basis, or both:		2	<u>b</u> 2	
с	X Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?	edule O.		c Ž	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			x
F	Act and OMB Circular A-133?	irod oud!t	·····	la	
α	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits			b	
					0 (2013)

Form **990** (2013)

Form 990 (2013)

Form	990	or	990-EZ.

Total

332021 09-25-13

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NASHVILLE

PUBLIC LIBRA62-06947436

LHA For Paperwork Reduction Act Notice, see the Instructions for

Department of the Treasury Internal Revenue Service			Information about		Form 990 or Form 9	990-EZ.	agy/form000	Open to Public Inspection			
Nar	ne of t	the organizati						r identification number			
		0		LE PUBLIC LI	BRARY FOUN	DATTON		52-1681766			
Pa	art I	Reason		ity Status (All organiz				1001/00			
				because it is: (For lines							
1				s, or association of chur	-	•					
2	\square			'0(b)(1)(A)(ii). (Attach Sc			•				
3	\square			tal service organization		170/b)/1)/A)/iii)					
4	\square	•	• •	operated in conjunction			(b)(1)(A)(iii) Enter	the hospital's name			
4		city, and stat	•	operated in conjunction	with a hospital desci			the nospital s hame,			
5				benefit of a college or ur	aivorsity ownod or or	porated by a dovern	nontal unit doscri	hod in			
5		-	-	-	inversity owned or op	berated by a governi	nentai unit descri				
~			(b)(1)(A)(iv). (Comple		h ala a suile a al im a a a t ia						
6	H	-		ent or governmental uni				I sudelis, slasswikastika			
7				eives a substantial part	of its support from a	governmental unit d	r from the genera	public described in			
•		•	b)(1)(A)(vi). (Comple	,							
8	H			ection 170(b)(1)(A)(vi).							
9		•		eives: (1) more than 33			•	•			
		activities related to its exempt 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.									
			509(a)(2). (Complete								
10		0		perated exclusively to te			•				
11	X	0	0	perated exclusively for th	, 1	,	,				
				ations described in section			tion 509(a)(3). Cl	leck the box that			
				organization and compl	-						
	v	a 🖂 Type I	-	• •	ype III - Functionally i	•	21	on-functionally integrated			
e				t the organization is not							
			•	han one or more publicly	• • • •			r section 509(a)(2).			
f		-		ten determination from t	the IRS that it is a Ty	pe I, Type II, or Type	e III				
			rganization, check th					L			
ç	9			organization accepted ar							
		., .	•	irectly controls, either al	•		., .,				
				upported organization?							
		(ii) A family member of a person described in (i) above?									
		(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above?			11g(iii) X			
h	ו	Provide the f	ollowing information	about the supported or	ganization(s).						
				i	a		(vi) la tha	1			
(i		of supported	(ii) EIN	(iii) Type of organization	(iv) Is the organization	(v) Did you notify the organization in col.	(vi) Is the organization in col.	(vii) Amount of monetary			
	orga	anization		(described on lines 1-9 above or IRC section	in col. (i) listed in your governing document?		(i) organized in the U.S.?	support			
				(see instructions))			0.0.:	4			

narity 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.

SCHEDULE A	Public Ch
(Form 990 or 990-EZ)	Complete if the org

1,671,891. Schedule A (Form 990 or 990-EZ) 2013

Yes

Х

No

1,671,891.

No

No

Yes

Х

Yes

Х

OMB No. 1545-0047

2013

Schedule A (Form 990 or 990-EZ) 2013 NASHVILLE PUBLIC LIBRARY FOUNDATION 62-1681766 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruct	ions)	•		12	
13	First five years. If the Form 990 is for	the organization				on 501(c)(3)	
	organization, check this box and stop	here					
Se	ction C. Computation of Publi	c Support Pe	ercentage				
14	Public support percentage for 2013 (li	ne 6, column (f) c	divided by line 11,	column (f))		14	%
15	Public support percentage from 2012	Schedule A, Par	t II, line 14			15	%
1 6a	33 1/3% support test - 2013. If the o	rganization did n	ot check the box (on line 13, and line	e 14 is 33 1/3% or	more, check th	is box and
	stop here. The organization qualifies a	as a publicly supp	ported organizatio	n			▶∟
b	33 1/3% support test - 2012. If the o	rganization did n	ot check a box on	line 13 or 16a, an	d line 15 is 33 1/39	% or more, che	eck this box
	and stop here. The organization quali	fies as a publicly	supported organiz	zation			▶∟
17a	10% -facts-and-circumstances test	2013. If the or	ganization did not	check a box on lir	ne 13, 16a, or 16b,	and line 14 is	10% or more,
	and if the organization meets the "fact	ts-and-circumstar	nces" test, check	this box and stop	here. Explain in Pa	art IV how the o	organization
	meets the "facts-and-circumstances"	test. The organization	ation qualifies as a	a publicly supporte	ed organization		▶□
b	10% -facts-and-circumstances test	: - 2012. If the or	ganization did not	check a box on lir	ne 13, 16a, 16b, or	17a, and line 1	l5 is 10% or
	more, and if the organization meets th						
	organization meets the "facts-and-circ	umstances" test	. The organization	qualifies as a pub	licly supported org	anization	
18	Private foundation. If the organization	n did not check a	<u>u box on line 13, 10</u>	6a, 16b, 17a, or 17	7b, check this box	and see instru	ctions

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 NASHVILLE PUBLIC LIBRARY FOUNDATION Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201	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 disgualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
Ċ	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support						
	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201	3 (f) Total
	Amounts from line 6	((-)	(-,	(1)== .	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
ł	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
12	regularly carried on Other income. Do not include gain						
	or loss from the sale of capital						
12	assets (Explain in Part IV.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	-			•		organization,
50	check this box and stop here						
						45	0/
	Public support percentage for 2013 (lin					15	<u>%</u>
<u>16</u>	Public support percentage from 2012 ction D. Computation of Inves					16	%
	· · · · · · · · · · · · · · · · · · ·					47	
	Investment income percentage for 201					17	%
	Investment income percentage from 2			an line 14 and lin			%
198	a 33 1/3% support tests - 2013. If the c						
	more than 33 1/3%, check this box an						
k	33 1/3% support tests - 2012. If the c						
•••	line 18 is not more than 33 1/3%, chec			-		-	
20	Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19b, check t	this box and see in	structions	<u></u>

Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.
	Also complete this part for any additional information. (See instructions).

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

Schedule of Contributors

 Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 . OMB No. 1545-0047

2013

Employer identification number

Name of the organization

	NASHVILLE PUBLIC LIBRARY FOUNDATION	62-1681766			
Organization type (che	eck one):				
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

J For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., purpose, charitable, etc., contributions of \$5,000 or more during the year

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not 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) (2013)

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

e Service	Information about Schedule D (Form 990) and its instructions is at www irs gov/f	orm990

Department of the Treasury Internal Revenue Service Name of the organization

RT.TC	T.TRRARY	FOIINDATTON	

Employer identification number 62-1681766

OMB No. 1545-0047

Open to Public

Inspection

3

	NASHVILLE PUBLIC LIBRARY FOUNDATION		62-1681	766
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds	or Acco	unts.Complete if t	the
-	organization answered "Yes" to Form 990, Part IV, line 6.			
	(a) Donor advised funds	(b) Fu	nds and other acco	ounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advise	d funds		
	are the organization's property, subject to the organization's exclusive legal control?		Yes	🗌 No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be u			
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose of	onferring		
	impermissible private benefit?		Yes	No
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Pa	art IV, line 7	·	
1	Purpose(s) of conservation easements held by the organization (check all that apply).			
	Preservation of land for public use (e.g., recreation or education)	orically imp	oortant land area	
	Protection of natural habitat	ied historic	structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of	f a conser	vation easement on	the last
	day of the tax year.			
			Held at the End of t	the Tax Year
а	Total number of conservation easements	2a		
b	Total acreage restricted by conservation easements			
С	Number of conservation easements on a certified historic structure included in (a)			
d		re		
	listed in the National Register	2d		
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the	organizatio	on during the tax	
	year ▶			
4	Number of states where property subject to conservation easement is located			
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of			
	violations, and enforcement of the conservation easements it holds?			└── No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements du			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during t		\$	_
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h			
•	and section 170(h)(4)(B)(ii)?			└── No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense			
	include, if applicable, the text of the footnote to the organization's financial statements that describes the	ne organiza	ation's accounting t	or
Pa	conservation easements. rt III Organizations Maintaining Collections of Art, Historical Treasures, or Ot	her Simi	ilar Assets	
I U	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.			
10	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statem	ont and ba	lanco shoot works	of art
Ia	historical treasures, or other similar assets held for public exhibition, education, or research in furtheran			
	the text of the footnote to its financial statements that describes these items.			in ar An,
h	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement	and haland	se sheet works of a	t historical
D.	treasures, or other similar assets held for public exhibition, education, or research in furtherance of pub			
	relating to these items:	10 30 100,		ng amounts
	(i) Revenues included in 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			
-	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	J, p. 011		
а	Revenues included in Form 990, Part VIII, line 1	►	\$	
b	Assets included in Form 990, Part X	•	\$	

Sche		LE PUBLIC						8176		ige 2
Par	t III Organizations Maintaining C	ollections of A	rt, Historica	l Treasures, c	or Othe	er Simila	Asse	ts (contir	nued)	
3	Using the organization's acquisition, accession	on, and other record	ls, check any of	the following that	t are a s	ignificant us	se of its	collectio	n item	s
	(<u>chec</u> k all that apply):									
а	Public exhibition	d	🗆 🛄 Loan or	exchange progra	ams					
b	Scholarly research	e	Other_							
с	Preservation for future generations									
4	Provide a description of the organization's co	ellections and explain	n how they furth	ner the organization	on's exe	mpt purpos	e in Parl	XIII.		
5	During the year, did the organization solicit of	r receive donations of	of art, historical	treasures, or othe	er similaı	r assets		_		
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization	's collection?	<u></u>	<u></u>	L	Yes		No
Par	t IV Escrow and Custodial Arrang		ete if the organiz	zation answered "	'Yes" to	Form 990, I	Part IV, I	ine 9, or		
	reported an amount on Form 990, Par	t X, line 21.								
1a	Is the organization an agent, trustee, custodi							-		1
	on Form 990, Part X?						L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:							
								Amount		
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year									
f	Ending balance									
	Did the organization include an amount on Fe						L	Yes		No
-	If "Yes," explain the arrangement in Part XIII.									
Par	t V Endowment Funds. Complete it									
		(a) Current year	(b) Prior yea			(d) Three yea		. /		
1a	Beginning of year balance	4,307,626.	4,150,1		,944.		3,309.	3	,034,	
b	Contributions	1,270,268.	373,2				0,000.		550,	
С	Net investment earnings, gains, and losses	103,019.	497,1	.24255	5,766.	6	7,635.		88,	527.
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	169,975.	712,9	-114	1,995.					
f	Administrative expenses	5 540 000							6	
g	End of year balance	5,510,938.),173.	4,29	0,944.	3	,673,	309.
2	Provide the estimated percentage of the curr			nn (a)) held as:						
а	Board designated or quasi-endowment	18.15	_%							
b	Permanent endowment 69.87	<u>%</u>								
С	· · · · · · · · · · · · · · · · · · ·	1 .9 8 %								
	The percentages in lines 2a, 2b, and 2c should	•								
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are he	eld and administe	red for t	he organiza	tion	г		
	by:								Yes	No
	(i) unrelated organizations							3a(i)	X	x
	(ii) related organizations							3a(ii)		<u> </u>
	If "Yes" to 3a(ii), are the related organizations							3b		
4	Describe in Part XIII the intended uses of the t VI Land. Buildings. and Equipm		wment funds.							
Fai				- C C 000	Devt V	line 10				
	Complete if the organization answered							())		
	Description of property	(a) Cost or o basis (investr		Cost or other asis (other)	• •	ccumulated preciation		(d) Bool	< value	9
	Land				ue	JEGIALION				
	Land									
	Buildings			240,026.		233,68			5,3	28
	Leasehold improvements			8,991.		8,99			J, J.	
	Equipment			0,991.		0,99	±•			0.
	Other			(-		5,33	20
Iota	. Add lines 1a through 1e. (Column (d) must e	yuai ⊢orm 990, Part	л, coiumn (В), li	ne IU(C).)		-	► <u> </u>			
						S	cnedule	D (Form	1 990)	2013

· · · · ·

Schedule D (Form 990) 2013	NASHVILLE	PUBLIC	LIBRARY	FOUNDATION	
Part VII Investments - (Other Securities				

	Investments - Other Securities. Complete if the organization answered "Yes"	to Form 990. Part IV. lir	ne 11b. See Form 990. Pa	art X. line 12.	
(a) Descrip	otion of security or category (including name of security)	(b) Book value			d-of-year market value
. ,	al derivatives				-
	-held equity interests				
3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(<u>U)</u> (H)					
	b) must equal Form 990, Part X, col. (B) line 12.)				
	Investments - Program Related.				
	Complete if the organization answered "Yes"	to Form 000 Dort IV/ lit	20110 Soo Form 000 Do	ort Vilino 12	
	(a) Description of investment	(b) Book value			d-of-year market value
(1)					
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)	b) must equal Form 990, Part X, col. (B) line 13.) 🕨				
	Other Assets. Complete if the organization answered "Yes" (a)	to Form 990, Part IV, lin Description	ne 11d. See Form 990, Pa	art X, line 15.	(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colu Part X	Imn (b) must equal Form 990, Part X, col. (B) lin Other Liabilities.			000 Dart V line 25	
4	Complete if the organization answered "Yes" (a) Description of liability		(b) Book value	50, Fait A, III e 20	·
1. (1) Fod			(N) DOOR VAILE		
. ,	deral income taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(9) Total. (Colu	ımn (b) must equal Form 990, Part X, col. (B) lin				
(9) Total. (Colu 2. Liability	umn (b) must equal Form 990, Part X, col. (B) lin for uncertain tax positions. In Part XIII, provide ation's liability for uncertain tax positions unde	e the text of the footnot			

NASHVILLE	PIIRLTC	T.TBRARY	FOUNDATION
	TODDIC	DIDIVULI	LOONDAITON

Sche	edule D (Form 990) 2013 NASHVILLE PUBLIC LIBRARY F				1681766 _{Ра}	age 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents With	Revenue per F	Return	າ.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements			1	3,554,02	26.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a	528,683.			
b	Donated services and use of facilities		58,179.			
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)		174,228.			
е	Add lines 2a through 2d			2e	761,09	
3	Subtract line 2e from line 1			3	2,792,93	36.
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	44,803.			
b	Other (Describe in Part XIII.)	4b				
с				4c	44,80	
5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>)			5	2,837,73	39.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	nents Wit	h Expenses per	Retu	ırn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1	2,845,31	15.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a	58,179.			
b	Prior year adjustments	2b				
с						
0	Other losses					
d	Other losses Other (Describe in Part XIII.)	. 2 c	174,228.			
d e	Other (Describe in Part XIII.)	2c 2d	•	2e	232,40	
d	Other (Describe in Part XIII.) Add lines 2a through 2d	2c 2d		2e 3	232,40 2,612,90	
d e	Other (Describe in Part XIII.)	2c 2d		3		
d e 3	Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2c 2d		3		
d e 3 4	Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2c 2d 4a		3	2,612,90	08.
d e 3 4	Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	2c 2d 4a 4b	44,803.	3	2,612,90	08.
d e 3 4 a b c 5	Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2c 2d 4a 4b	44,803.	3	2,612,90	08.

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:

ALL ENDOWMENT FUNDS ARE TO BE USED TO ENHANCE AND SUPPORT THE

PROGRAMS AND FACILITIES OF THE NASHVILLE PUBLIC LIBRARY.

PART X, LINE 2:

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE

PROVISIONS OF INTERNAL REVENUE CODE SECTION 501(C)(3), AND, ACCORDINGLY,

NO PROVISION FOR INCOME TAXES IS INCLUDED IN THE FINANCIAL STATEMENTS.

AS OF JUNE 30, 2014, THE FOUNDATION HAS ACCRUED NO INTEREST AND NO

PENALTIES RELATED TO UNCERTAIN TAX POSITIONS. IT IS THE FOUNDATIONS POLICY

TO RECOGNIZE INTEREST AND/OR PENALTIES RELATED TO INCOME TAX MATTERS IN 332054 09-25-13 Schedule D (Form 990) 2013

Schedule D (Form 990) 2013	NASHVILLE	PUBLIC	LIBRARY	FOUNDATION	62-1681766	Page 5
Part XIII Supplemental Infor	mation (continued)					

INCOME TAX EXPENSE.

THE FOUNDATION FILES A U.S. FEDERAL INFORMATION TAX RETURN. THE FOUNDATION IS CURRENTLY OPEN TO AUDIT UNDER THE STATUTE OF LIMITATIONS BY THE

INTERNAL REVENUE SERVICE FOR YEARS ENDING SUBSEQUENT TO, JUNE 30, 2010.

PART XI, LINE 2D - OTHER ADJUSTMENTS:FUNDRAISING EXPENSES NETTED WITH 990 INCOME163,828.RENTAL EXPENSES NETTED WITH 990 INCOME10,400.TOTAL TO SCHEDULE D, PART XI, LINE 2D174,228.PART XII, LINE 2D - OTHER ADJUSTMENTS:163,828.FUNDRAISING EXPENSES NETTED WITH 990 INCOME163,828.RENTAL EXPENSES NETTED WITH 990 INCOME10,400.TOTAL TO SCHEDULE D, PART XII, LINE 2D174,228.

SCHEDULE G	Suppleme	ental Information Regarding	Eun	draie	ing or Gaming	Activities		OMB No. 1545-0047
(Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Complete if the	e organization answered "Yes" to organization entered more than \$1 Attach to Form 99	Form 9 5,000) or Fo	990, P on Fo rm 99	art IV, lines 17, 18, rm 990-EZ, line 6a. 00-EZ.	or 19, or if th	C	2013 Open To Public Inspection
Name of the organizatior	Information a n	bout Schedule G (Form 990 or 990-EZ	and its	s instru	ictions is at <u>www irs g</u>	<u>ev/form 990</u> Employ		ntification number
Name of the organization		LE PUBLIC LIBRARY	FOU	NDA	TION	62-1	-	
Part I Fundrais required to	complete this par	- Complete if the organization answet.	ered "Y	′es" to	o Form 990, Part IV, I			
 a X Mail solicitat b X Internet and c X Phone solicitat d X In-person so 2 a Did the organization key employees list 	ions email solicitations tations licitations on have a written (red in Form 990, F n highest paid ind	s f Solicita g Solicita g Specia For oral agreement with any individua Part VII) or entity in connection with p lividuals or entities (fundraisers) pure	tion of tion of I fundra I (inclue profess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, tru fundraising services?	stees or	Yes Yes	
(i) Name and addres or entity (fund		(ii) Activity	have c or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	(v) Amount to (or retaine fundrais listed in co	ed by) er	(vi) Amount paid to (or retained by) organization
THE BENEFACTOR GRO		CONSULTING ON A LARGE						
GRANDVIEW AVENUE,	COLUMBUS,	CAPITAL CAMPAIGN		X	1,643,416.	19	,200.	1,624,216.
_								
			-					
Total					1,643,416.		,200.	1,624,216.
3 List all states in whi or licensing.	ich the organizatio	on is registered or licensed to solicit	contrik	oution	s or has been notifie	d it is exempt	from re	egistration

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS Schedule G (Form 990 or 990-EZ) 2013

	edu I rt	Ile G (Form 990 or 990-EZ) 2013 NASHVII				-1681766 Page 2 more than \$15,000
		of fundraising event contributions and g	-		· · · · · · · · · · · · · · · · · · ·	
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			GALA		NONE	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
nue					(total nambol)	
Revenue	1	Gross receipts	662,642.			662,642.
æ						
	2	Less: Contributions	236,145.			236,145.
	3	Gross income (line 1 minus line 2)	426,497.			426,497.
	-					
	4	Cash prizes				
S	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	22,199.			22,199.
Exp	-					
rect	7	Food and beverages	84,543.			84,543.
Ō						
	8 9	Entertainment Other direct expenses				57,086.
	10		· · · · · ·	1	•	163,828.
	11					262,669.
Pa	irt					
_		\$15,000 on Form 990-EZ, line 6a.	1			
ē			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add
Revenue						col. (a) through col. (c))
Re	1	Gross revenue				
Se	2	Cash prizes				
Expenses						
Exp	3	Noncash prizes				
ect	4	Rent/facility costs				
Dire	-					
	5	Other direct expenses				
			Yes %	Yes%	Yes %	
	6	Volunteer labor	No No	No No	No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)		•	
	7	Direct expense summary. Add lines 2 throug				
	8	Net gaming income summary. Subtract line 7	7 from line 1, column (d)			
		ter the state(s) in which the organization opera				
		the organization licensed to operate gaming a				Yes No
a) IT "	'No," explain:				
10a	We	ere any of the organization's gaming licenses r	evoked, suspended or te	erminated during the tax	year?	Yes No
b	lf "	'Yes," explain:				

332082 09-12-13

Schedule G (Form 990 or 990-EZ) 2013

Sch	edule G (Form 990 or 990-EZ) 2013 NASHVILLE PUBLIC LIBRARY FOUNDATION 62-1	681	766	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No 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 operated in:			
á	The organization's facility	13a		%
	An outside facility	13b		%
	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
k	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount			
	of gaming revenue retained by the third party \blacktriangleright \$			
c	If "Yes," enter name and address of the third party:			
	Address			
16	Gaming manager information:			
	Gaming manager compensation 🕨 \$			
	Description of services provided			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	No No
k	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$			
Pa	Int IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, line	nes 9,	9b, 10	b, 15b,
_	15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).			
sc	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISER	.s :		
(1) NAME OF FUNDRAISER: THE BENEFACTOR GROUP			
<u>`</u>		400	10	
(1) ADDRESS OF FUNDRAISER: 1488 GRANDVIEW AVENUE, COLUMBUS, OH	482	12	
_				

SCHEDULE I	1	G	arants and Oth	ner Assistan	ce to Organ	izations,		OMB No. 1545-0047
(Form 990)		Go	vernments, an lete if the organizatio	nd Individua	ls in the Ŭni	ted States		2013
Department of the Treasury Internal Revenue Service		-	ion about Schedule I	Attach to For	m 990.		20	Open to Public Inspection
Name of the organiza			IBRARY FOUN					Employer identification number 62-1681766
	Information on Grants a							
criteria used to	nization maintain records to award the grants or assist	stance?						
	rt IV the organization's pro and Other Assistance to					pization answard "	Vaal to Form 000 Dad	IV line 21 for any
	that received more than \$		-			anization answered	res to Form 990, Pan	TV, III e 21, for any
1 (a) Name and a	address of organization overnment	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NASHVILLE PUBLIC 615 CHURCH STREE NASHVILLE, TN 37	ST			1,671,891.	0.			TO ENHNACE AND SUPPORT THE PROGRAMS & FACILITIES OF THE LIBRARY
2 Enter total num	nber of section 501(c)(3) a	nd government or	ganizations listed in th	ne line 1 table	I	· · · · · · · · · · · · · · · · · · ·		└ ▶
	ber of other organization	•	•	······				
LHA For Paperwo	rk Reduction Act Notice	, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2013)

NASHVILLE PUBLIC LIBRARY FOUNDATION

62-1681766

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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 non-cash 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:

NPLF REQUIRES REPORTS TO BE SUBMITTED AFTER FOUNDATION FUNDED

EVENTS AND PROGRAMS. THESE REPORTS INCLUDE NUMBER OF ATTENDEES, IMPACT OF

THE PROGRAMMING OR EVENT, AND AN ACCOUNTING OF HOW THE FUNDS WERE UTILIZED.

SCHEDULE L		Tra	insactior	ıs V	Vith	Inte	rested	Pe	ersons			01	MB No.	1545-00	47
(Form 990 or 990-EZ)	Complete i		rganization an 28b, or 28c, o	swere	d "Yes	s" on Fo	m 990, Par	t IV,	line 25a, 25b, 2	26, 27	, 28a,		20	13	8
Department of the Treasury		► Atta	ch to Form 99) or Fo	orm 99	0-EZ. Þ	See separ	ate i	nstructions.			0	pen T	o Pub	lic
Internal Revenue Service		on abou	t Schedule L (For	m 990	or 990-	·EZ) and i	sinstruction	s is a	t www.irs.gov/f				spect		
Name of the organization		т. т. т.		ттр	חגח		ד חו ג רוואוי	ONT				rident		on nu	mber
Part I Excess B			PUBLIC						tions only)	02	-10	001/	00		
			wered "Yes" on							art V	line 4(Ĵb			
1			Relationship bet										(d)	Corre	cted?
(a) Name of disqualit	ied person		person and o	rganiza	ation		(0	c) Des	scription of trar	Isactio	on		Y	es	No
		 											_		
													_		
													_		
2 Enter the amount of	tax incurred b	y the o	rganization mar	nagers	or dise	qualified	persons du	ring t	he year under						
		-		-		-	-	-	•		▶ \$				
3 Enter the amount of											▶ \$				
Dent III - La consta															
			erested Per					_							
-	-		wered "Yes" on			, Part V,	line 38a or I	Form	990, Part IV, lir	ne 26;	or if th	ne orga	anizati	on	
(a) Name of	(b) Relati		, Part X, line 5, ((c) Purpose	- i	∠. an to or	(e) (Driginal	(f)	Balance due	(a	In	(h) Ap	proved	(i) W	ritten
interested person	with organ		of loan		n the zation?		al amount		Dalance due	(g) In default?		by board or committee?		/ Loaroomonto	
					From					Yes	No	Yes	No	Yes	No
				-											
Total							🕨 \$								
			nefiting Inte												
· · · · · ·			wered "Yes" on												
(a) Name of interes	sted person		(b) Relationship interested pers the organiz	son an			Amount of sistance		(d) Type assistan			•) Purp assist		ſ
								-+			-+				
		_						-+			+				
		_						-+			-+				
								-+							
											\square				

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

Schedule L (Form 990 or 990-EZ) 2013

Schedule L (Form 990 or 990-EZ) 2013 NASHVI	LLE PU	BLIC	C LIE	BRARY	FOUNDATION	62-1681	766	Page 2
Part IV Business Transactions Involv	ing Intere	sted	Perso	ns.				
Complete if the organization answered	"Yes" on For	m 990	, Part IV	, line 28a, 2	28b, or 28c.			
(a) Name of interested person	(b) Relation person		etween e organi		(c) Amount of transaction	(d) Description of transaction	òrgani	aring of zation's nues?
							Yes	No
BETH C. ALEXANDER	SERVES	ON	THE	BOARD	1,134.	BANK FEE EX		X
Part V Supplemental Information	•				•	-	•	
Provide additional information for respo	onses to ques	stions	on Sche	dule L (see	instructions).			
I	I				/			
SCH L, PART IV, BUSINESS T	'RANSAC'	LOL	NS II	VOLVI	NG INTEREST	ED PERSONS:		

(A) NAME OF PERSON: BETH C. ALEXANDER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SERVES ON THE BOARD

(C) AMOUNT OF TRANSACTION \$ 1,134.

(D) DESCRIPTION OF TRANSACTION: BANK FEE EXPENSE - THE ORGANIZATION HAD

VARIOUS ACCOUNTS WITH FINANCIAL INSTITUTIONS AND THEIR AFFILIATES OF

WHICH CERTAIN BOARD MEMBERS ARE SENIOR OFFICERS.

(E) SHARING OF ORGANIZATION REVENUES? = NO

SCHEDULE O (Form 990 or 990-EZ)

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.

Department of the Treasury Internal Revenue Service Name of the organization

NASHVILLE PUBLIC LIBRARY FOUNDATION

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 Employer identification number 62-1681766

OMB No. 1545-0047

Open to Public

Inspection

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ENHANCE THE PROGRAMS. FACILITIES AND COLLECTIONS OF THE NASHVILLE

PUBLIC LIBRARY.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THRIVING PARTNERSHIP BETWEEN LOCAL GOVERNMENT FUNDING AND PRIVATE

PHILANTHROPY, THE FOUNDATION HAS PROVIDED FUNDS FOR THE LIBRARY'S

COLLECTIONS AND RAISED MORE THAN \$35 MILLION FROM PRIVATE DONORS FOR

CAPITAL PROJECTS AND FREE EDUCATIONAL PROGRAMS, EXHIBITS AND CONCERTS.

IN ADDITION TO ENHANCING SPACES AT THE MAIN LIBRARY LIKE THE EXQUISITE

GRAND READING ROOM AND BEAUTIFUL COURTYARD, NPLF HAS INVESTED IN THE

CULTURAL AND EDUCATIONAL LIFE OF EVERY NASHVILLIAN BY UPDATING TEEN

CENTERS AT MAIN AND SEVERAL BRANCHES, ADDING MORE THAN 150,000 BOOKS

(IN ALL FORMATS), AND PROVIDING ENLIGHTENING, THOUGHT-PROVOKING

EXPERIENCES FOR LEARNERS OF ALL AGES.

FORM	990,	PART	III,	LINE	4A,	PROGRAM	SERVICE	ACCOMPLISHMENTS:	

MATERIALS, UPGRADED TECHNOLOGY AND A MODERNIZED SPACE TO PROVIDE

STUDENTS WITH A FUN PLACE TO EXPLORE AND LEARN. THE LIBRARY IS ALSO

OPEN AFTER HOURS TO ACCOMODATE PARENTS AND COMMUNITY MEMBERS INTERESTED

IN TAKING CLASSES, LEARNING ENGLISH AND MORE.

ADDITIONALLY, ANOTHER DONOR MADE A GIFT OF \$350,000 TO PURCHASE

ADDITIONAL NPL BOOKS AND MATERIALS RELEVANT TO STUDENT'S EVER

INCREASING NEEDS. THIS GIFT WENT TO PURCHASE MORE THAN 23,000 BOOKS,

DVDS, CDS AND MATERIAL AND RESULTED IN A 70% INCREASE IN CIRCULATION.

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization NASHVILLE PUBLIC LIBRARY FOUNDATION	Employer identification number 62-1681766
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHME	NTS:
40,000 CHILDREN AND SCHOOL GROUPS. THE LIBRARY'S INVENTIV	E STORYTELLING
BRINGS BOOKS TO LIFE AND INSPIRES LITERACY. JEANNE MCGEHE	E, LITERACY
COACH AT EAST NASHVILLE'S FANNIE BATTLE DAY HOME, HAS WOR	KED WITH BBTL
FOR NINE YEARS AND BELIEVES IN THE PROGRAM'S ABILITY TO E	MPOWER BOTH
CHILDREN AND PARENTS TO BE READERS. "THE BBTL TEAM IS SO	WELL-PREPARED
AND ALWAYS COMES WITH NEW AND INTERESTING MATERIALS FOR O	UR PARENTS AND
BOOKS FOR THE CHILDREN, " JEANNE SAYS. "AND THE PUPPET TRU	CKI JUST
CAN'T SAY ENOUGH GOOD THINGS ABOUT THE RESOURCE AND THINK	IT IS ONE OF
THE BEST IN THE U.S.A. A LOT OF THESE CHILDREN WOULD NOT	HAVE THE
OPPORTUNITY TO GO TO THE LIBRARY TO SEE THOSE SHOWS, AND	TO BRING THAT
EXPERIENCE TO THE CHILDREN IS JUST AMAZING."	

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: ALL OTHER PROGRAMS: THE NASHVILLE PUBLIC LIBRARY FOUNDATION BETTER ENABLES THE LIBRARY TO CONNECT WITH THE PUBLIC IN ITS MISSION TO PROMOTE LITERACY, LEARNING AND COMMUNITY PARTICIPATION. EXPENSES \$ 0. INCLUDING GRANTS OF \$ 589,816. REVENUE \$ 0.

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

FOUNDATION BOARD MEMBERS ARE GIVEN COPIES OF THE 990

ELECTRONICALLY AND PROMPTED FOR COMMENTS, CHANGES AND APPROVAL.

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

AT THE FIRST BOARD MEETING OF EACH YEAR EACH MEMBER IS ASKED

TO SIGN A NEW CONFLICT OF INTEREST POLICY.

Name of the organization

NASHVILLE PUBLIC LIBRARY FOUNDATION

Employer identification number 62 - 1681766

Page 2

EACH YEAR THE FINANCE COMMITTEE REVIEWS PERFORMANCE, DISCUSSES

COMPENSATION, AND MAKES

A RECOMMENDATION TO THE FULL BOARD FOR A VOTE.

FORM 990, PART VI, SECTION C, LINE 19:

AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C, FINANCIAL STATEMENTS & REPORTING

PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

2013 DEPRECIATION AND AMORTIZATION REPORT

RENT

1

Asset No.	Description	D Acq	ate Juired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction

2013 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired		Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
328102													

Page 2 ▶ X

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

 If you Part 	are filing for an Automatic 3-Month Extension, comple Additional (Not Automatic) 3-Month E				opice peeded)					
Fait				•	• • •					
	r Name of exempt organization or other filer, see instru		identifying number, see instructions							
Type o print	Name of exempt organization of other hier, see instru	Employe	Employer identification number (EIN) or							
File by the	NASHVILLE PUBLIC LIBRARY FO		62-1681766							
due date filing your return. Se	C1 E CITIDOTI CODETEM	Social se	ocial security number (SSN)							
instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. NASHVILLE, TN 37219										
Enter tl	ne Return code for the return that this application is for (fil	e a separa	te application for each return)			01				
Applica	ation	Return	Application		Ret					
Is For		Code	Is For		Code					
	90 or Form 990-EZ	01								
Form 9		02	Form 1041-A	 1041-A						
	720 (individual)	03		orm 4720 (other than individual)						
Form 9		04	Form 5227	09						
	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069							
	90-T (trust other than above)	06	Form 8870			11				
-	Do not complete Part II if you were not already granted	d an autor		iously file	ed Form 8868.					
Tele ● If th	CLAUDIA SCHENC: books are in the care of \blacktriangleright 615 CHURCH STR phone No. \blacktriangleright 615-880-2613 e organization does not have an office or place of busines s is for a Group Return, enter the organization's four digit \Box . If it is for part of the group, check this box \blacktriangleright	EET – s in the Ur Group Exe	Fax No. Fax	f this is fo	r the whole group,					
	request an additional 3-month extension of time until		15, 2015							
5 F	For calendar year, or other tax year beginning JUL 1, 2013 , and ending JUN 30, 2014 .									
	If the tax year entered in line 5 is for less than 12 months, check reason:									
	Change in accounting period									
	tate in detail why you need the extension	<u> </u>		<u></u>	0.05-03-737					
_	TAXPAYER RESPECTFULLY REQUESTS ADDITIONAL TIME IN ORDER TO OBTAIN ALL									
_	NFORMATION NECESSARY TO FILE	A CO	MPLETE AND ACCURAT.	E RET	'URN.					
					1					
	this application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any			0				
	onrefundable credits. See instructions.			<u>8a</u>	\$	0.				
	this application is for Forms 990-PF, 990-T, 4720, or 6069									
	ax payments made. Include any prior year overpayment al			0						
	previously with Form 8868.			8b	\$	0.				
	alance due. Subtract line 8b from line 8a. Include your pa FTPS (Electronic Federal Tax Payment System). See instr	-	in this form, if required, by using	8c	s	0.				
			st be completed for Part II o		Ψ					
	enalties of perjury, I declare that I have examined this form, includ , correct, and complete, and that I am authorized to prepare this fo	ling accomp	•	-	of my knowledge and	belief,				

Signature 🕨

Title **PRESIDENT**

Date 🕨

Form 8868 (Rev. 1-2014)