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CLIENT'S COPY



TERESA STANDARD
UNIVERSITY SCHOOL OF NASHVILLE
2000 EDGEHILL AVENUE
NASHVILLE, TN 37212-2198

DEAR TERESA

ENCLOSED IS THE 2014 EXEMPT ORGANIZATION RETURN, AS FOLLOWS...

2014 FORM 990

EACH ORIGINAL SHOULD BE DATED, SIGNED AND FILED IN ACCORDANCE WITH THE FILING INSTRUCTIONS. THE COPY SHOULD BE RETAINED FOR YOUR FILES.

WE HAVE PREPARED THE RETURN FROM INFORMATION YOU FURNISHED US WITHOUT VERIFICATION. UPON EXAMINATION OF THE RETURN BY TAX AUTHORITIES, REQUESTS MAY BE MADE FOR UNDERLYING DATA. WE THEREFORE RECOMMEND THAT YOU PRESERVE ALL RECORDS WHICH YOU MAY BE CALLED UPON TO PRODUCE IN CONNECTION WITH SUCH POSSIBLE EXAMINATIONS.

PLEASE REVIEW THE RETURN FOR COMPLETENESS AND ACCURACY.

WE SINCERELY APPRECIATE THE OPPORTUNITY TO SERVE YOU. PLEASE CONTACT US IF YOU HAVE ANY QUESTIONS CONCERNING THE TAX RETURN.

MR. VINCENT DURNAN, JR. SHOULD SIGN FORM 990 AS OFFICERS.

VERY TRULY YOURS,

JEFF TALLEY

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

JUNE 30, 2015

Prepared for	TERESA STANDARD UNIVERSITY SCHOOL OF NASHVILLE 2000 EDGEHILL AVENUE NASHVILLE, TN 37212-2198
Prepared by	LBMC, PC P.O. BOX 1869 BRENTWOOD, TN 37024-1869
Amount due or refund	NOT APPLICABLE
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS. RETURN FORM 8879-EO TO US AS SOON AS POSSIBLE.

EXTENDED TO FEBRUARY 16, 2016

Form **990**

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

A	For t	the 2014 calendar year, or tax year beginning 00L 1, 2014 and endi	ng U	UN 30, ZUIS)						
В	Check applica	if able: C Name of organization		D Employer identif	ication number						
	Add cha	dress UNIVERSITY SCHOOL OF NASHVILLE									
	Nar cha	me Doing business as		23-7	7424429						
	Initi retu		n/suite	E Telephone numb							
	Fina retu	al 2000 EDGEHILL AVENUE		615-321-8000							
_	ate	1 , , , , , , , , , , , , , , , , , , ,		G Gross receipts \$	30,395,169.						
Ļ	retu			H(a) Is this a group							
	tion	F Name and address of principal officer:VINCENT DURNAN, JR.		for subordinate							
		SAME AS C ABOVE	_	H(b) Are all subordinates							
		exempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527	1	a list. (see instructions)						
		site: WWW. USN. ORG		H(c) Group exemption							
	orm art l		L Year	of formation: 19/5	M State of legal domicile: TN						
Р	т —	Summary Briefly describe the organization's mission or most significant activities: UNIVERS	ידייע	CCHOOL OF	MA CUVITI.T.E						
Se	1	MODELS THE BEST EDUCATIONAL PRACTICES IN AN	LEN	VIBONMENT T	HADIIATIIII						
nar	2	Check this box if the organization discontinued its operations or disposed or									
Ver	3	Number of voting members of the governing body (Part VI, line 1a)			1 00						
ဗိ	4	Number of independent voting members of the governing body (Part VI, line 1b)			+						
Š	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)									
/itie	6	Total number of volunteers (estimate if necessary)			1000						
Activities & Governance	7	a Total unrelated business revenue from Part VIII, column (C), line 12			0.						
۹		b Net unrelated business taxable income from Form 990-T, line 34			0.						
				Prior Year	Current Year						
<u>•</u>	8	Contributions and grants (Part VIII, line 1h)		5,507,624							
enc	9	Program service revenue (Part VIII, line 2g)		21,939,605							
Revenue	10	, , , , , , , , , , , , , , , , , , , ,		359,871							
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		198,851							
_	12	3 () , (), ,		28,005,951							
	13	1 (// // // // // // // // // // // // /	. —	2,430,875							
	14	1 , , , , , , , , , , , , , , , , , , ,		0.	· ·						
ses	15	, , , , , , , , , , , , , , , , , , , ,		14,679,842.							
Expenses	16	b Total fundraising expenses (Part IX, column (A), line 11e) 1,275,308. 1,275,308.		<u> </u>	0.						
EX	17	Other expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,525,407	7,294,965.						
	18			23,636,124							
	19			4,369,827							
or or	g 13	Tievende less expenses. Oubtract line 10 from line 12		ginning of Current Year							
Net Assets or	를 일 20	Total assets (Part X, line 16)		49,675,262							
ASS	21			10,036,172							
Set	22	Net assets or fund balances. Subtract line 21 from line 20		39,639,090							
P	art I	II Signature Block									
		enalties of perjury, I declare that I have examined this return, including accompanying schedules and			ny knowledge and belief, it is						
tru	e, corr	rect, and complete. Declaration of preparer (other than officer) is based on all information of which p	reparer	has any knowledge.							
Sig	gn	Signature of officer		Date							
He	ere	VINCENT DURNAN, JR., DIRECTOR Type or print name and title									
_		, · · · · · · · · · · · · · · · · · · ·	- 11	Date Check	II PTIN						
D۵	i d	Print/Type preparer's name Preparer's signature		OHOOK							
Pa Pre	ia eparei	JULIE BARTLETT Firm's name LBMC, PC	Įυ	3/07/16 if self-emplo	p00742923 62-1199757						
	e Only			Firm's EIN ▶	02-1133131						
-	o omy	BRENTWOOD, TN 37024-1869		Phone no (6	515)377-4600						
Ms	av the	PIRS discuss this return with the preparer shown above? (see instructions)		I Holle Ho. (X Yes No						
. 416	.,	a			100						

Га	Till Statement of Frogram Service Accomplishments	7
	Check if Schedule O contains a response or note to any line in this Part III	_
1	Briefly describe the organization's mission:	
	UNIVERSITY SCHOOL OF NASHVILLE MODELS THE BEST EDUCATIONAL PRACTICES	
	IN AN ENVIRONMENT THAT REPRESENTS THE CULTURAL AND ETHNIC COMPOSITION	
	OF GREATER NASHVILLE, USN FOSTERS EACH STUDENT'S INTELLECT, ARTISTIC	
	AND ATHLETIC POTENTIAL, VALUING AND INSPIRING INTEGRITY, CREATIVE	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	o
	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? Yes X No.	o
_	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.	
7	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	
_	revenue, if any, for each program service reported. (Code:) (Expenses \$ 21,709,696. including grants of \$ 2,627,274.) (Revenue \$ 22,935,668.)	_
4a	(Code:) (Expenses \$ 21,709,696. including grants of \$ 2,627,274.) (Revenue \$ 22,935,668.) OPERATION OF UNIVERSITY SCHOOL OF NASHVILLE SERVING AN ESTIMATED 1049	_)
	STUDENTS.	
		_
		_
		_
		_
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	_)
		_
		_
		_
		_
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	٦
		- ′
		_
		_
		_
		_
		_
		_
		_
	Other presume any isaa (Describe in Cahadula O.)	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 21,709,696.	

Form 990 (2014) UNIVERSITY SCHOOL OF NASHVILLE Part IV Checklist of Required Schedules

1 Is the organization described in section 901(c)(S) or 4947(A(1)) (other than a private foundation? If "Yes," complete Schedule A, experience of Contributions? 2 Is the organization required to complete Schedule B, Schedule of Contributions? 3 JK 2 Is the organization engage in detect or indeter political campaign activities on behalf of or in opposition to candidates for public office If If "Yes," complete Schedule C, Part II 3 JK 4 Section 501((3)) experience. Did the organization engage in lobbying activities, or have a section 501(f) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization as section 501((4)), 501((5)(5), or 501((6)(5)) organization that receives memberahip dues, assessments, or similar amounts as oblimed in Parvivan Provide advice on the destination or investment of amounts in such funds or accounts If "Yes," complete Schedule D, Part II 6 Did the organization maritan any donor advised funds or any similar funds or accounts If "Yes," complete Schedule D, Part II 7 Did the organization maritan and collections of works of art, historical freasures, or other similar assess? If "Yes," complete Schedule D, Part II 8 Did the organization maritan in Part X, line 21, for escrive or custodial account liability, serve as a custodian for amounts in such tissed in Part X, or provide exists countering, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10 that is 5% or more of its total assest reported in Part X, line 16 ft "Yes," complete Schedule D, Part VIII 11 Did to organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assest reported in Part X, line 16 ft "Yes," complete Schedule D, Part X III 12 Did the organization is part x in experiments propriet schedule D, Part X III and X III 13 Did the organization is an amount for land, building				Yes	No
2 is the organization required to complete Schedule of Contributions 2 public office? If "Yes," complete Schedule C, Part I 3 X 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 5 is the organization as section 501(c)(4) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the text year? If "Yes," complete Schedule C, Part II 6 is the organization as section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedule 819:11 "Yes," complete Schedule C, Part II 7 ibid the organization maintain any donce advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide schedule on the section of amounts in such funds or accounts? If "Yes," complete Schedule O, Part II 8 is the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical treats intructure? If "Yes," complete Schedule O, Part II 8 is did the organization report an amount in Part X, line 21, for escrow or oustodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 it was a spinication, or quasi-endowments, permanent endowments, or quasi-endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VII 10 it the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 11 it the organization report an amount for investments—program related in Part X, line 10? If "Yes," complete Schedule D, Part X II 12 is did the organi	1				
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 ascention 501(c)(4), 501(c)(6), 501(c)		If "Yes," complete Schedule A		Х	37
public office? If "Yes," complete Schedule C, Part I 4 Section 501(R)3 organizations. Did the organization engage in lobbying activities, or have a section 501(R) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization a section 501(R)4, 501(c)(S), or 501(c)(S) or 501(c			2		
4 Sction 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(ii) election in effect during the tax year? If "Yes", complete Schedule C, Part III X X S is the organization a section 501(ii)(ii), 501(ii)(ii), 501(ii)(ii), 501(iii), 501	3		,		v
during the tax year? If "Yes," complete Schedule C, Part II 5 15 th organization a section 501(64), 501(50), or 501(6)6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 X 5	1		3		
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? If "Yes," complete Schedule C, Part III 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 II Did the organization receiver 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 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 connecting, dold 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 connecting, dold management, credit repair, or doth regolations services? If "Yes," complete Schedule D, Part IV Did the organization or quasi-endowments? If "Yes," complete Schedule D, Part V V II if the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V III II is organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII II II X Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII II X Did the organization report an amount for investments or the tax year include a control that addresses the organization report an amount for investments or the tax year include a control that addresses the organization orbital separate, independent audited financial statements for the tax year III V III X Did the organization and any o	7		4		x
similar amounts as defined in Revenue Procedure 98.19? If "Yes," complete Schedule C, Part III 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 II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures II" "Yes," complete Schedule D, Part III Bid the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporally restricted endowments, permanent endowments, or quasiendowments? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporally restricted endowments, permanent endowments, or quasiendowments? If "Yes," complete Schedule D, Part V Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II Did the organization report an amount for investments - program related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X II Did the organization amount for or other liabilities in Part X, line 12? If "Yes," complete Schedule D, Part X II Did the organization satisfies the amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X II	5		<u> </u>		
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? 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,' complete Schedule D, Part II 9 Did the organization opport an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV 10 Did the organization or port an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V 11 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 18? If "Yes," complete Schedule D, Part XII 11 Did the organization report an amount for other assets in Part X, line 19 that is 5% or more of its total assets reported in Part X, line 18? If "Yes," complete Schedule D, Part XI 11 Did the organization seport an amount for other assets in Part X, line 19 that is 5% or more of its total assets reported in Part X, line 18? If "Yes," complete Schedule D, Part X 12 Did the organization seport an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 18? If "Y	•		5		Х
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 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	6				
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III. 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 lability; serve as a custodian for amounts not listed in Part X, or provide certic counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V			6		Х
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? If "Yes," complete Schedule D, Part IV 10 Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a X 11b X 11c S 11c S 11c S 11d X 11d X 11d X 11d X 11d X 11d X 11d X 11d X 11d X 11d X 11d X 11d X 11d X 11d	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
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? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 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. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII b Did the organization report an amount for investments - order may related in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 11 If X 12 Did the organization separate or consolidated financial statements for the tax year include a foothote that addresses the organization station's separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X 11 If X 12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule P, Part X and XII 12 Did the organization obtain separate or consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule P, Part S I and VII 12 Did the organization as school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Part X and XII is the organization have aggregate reven		the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
b Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, if "Yes," complete Schedule D, Part V 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. 2 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 2 Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2 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 2 Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X III 2 Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11 Did the organization of separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III X 12 Did the organization as school described in section 170(b)(1)(A)(II)) If "Yes," complete Schedule D, Part X and XII is optional 13 Is 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 III and IV 15 Did the orga	8		8		x
amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 10 Did the organization (rective) or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," templete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. a 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 10? If "Yes," complete Schedule D, Part VIII c Did the organization report an amount for investments - other securities 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 d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII d Did the organization report an amount for other assets in Part X, line 15? that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X III Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X III Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the turbired States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedu	9				
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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 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 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 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	_		14a		
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17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part 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? If "Yes," complete Schedule G, Part II 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X			16		X
Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 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 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	17		47		v
1c and 8a? If "Yes," complete Schedule G, Part II 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	12		'/		
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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	10		18	х	
complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	19		٠.٠	- <u>-</u>	
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			19		Х
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	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 (2014) UNIVERSITY SCHOOL OF NASHVILLE Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	0.4		x
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21		22
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	x	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Orbital In I	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		Х
	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		Х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		Х
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 "Yes,"			
	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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			\ ₃₂
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	v	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?			X
20	If "Yes," complete Schedule N, Part I	31		Α.
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		22
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	- 33		
-		34		x
35a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
~	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?	1 2 3		
	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** (2014)

Form 990 (2014) UNIVERSITY SCHOOL OF NASHVILLE Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	67			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable					
С	Did the organization comply with backup withholding rules for reportable payments to vendors and				v	
•	(gambling) winnings to prize winners?	 I	 I	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		455			
	filed for the calendar year ending with or within the year covered by this return			01	Х	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	Λ	
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instruction			0-		Х
				3a 3b		- 25
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule At any time during the calendar year, did the organization have an interest in, or a signature or other			SD		
44	financial account in a foreign country (such as a bank account, securities account, or other financial		-	4a		Х
h	If "Yes," enter the name of the foreign country:	accou	111.) !	-r a		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accour	nts (FRAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transitions.			5b		Х
	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 to					
-	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribu					
	were not tax deductible?		-	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uired			
	to file Form 8282?			7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contrac	ct?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 88	399 as required?	7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		Х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а				9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	مدا	1			
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against	Па				
b	amounts due or received from them.)	11b				
100	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		<u> </u> 	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		IZa		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120	l			
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
4	Note. See the instructions for additional information the organization must report on Schedule O.			.54		
b	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				
С	Enter the amount of reserves on hand					
				14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu			14b		
	<u> </u>				200	(OO4 :

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			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 3			
	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.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a				
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
_	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	0.0		
·	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	and an analytic control and an analytic for the first section of the fir		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	1.00	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
_	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 before filing the form?	11a	Х	
b		1.0		
12a	and the second s	12a	Х	
b		12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
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 approval by independent			
	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	† <u> </u>	Х
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	.55		
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?	16a		Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100		
~	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
<u> 17</u>	List the states with which a copy of this Form 990 is required to be filed NONE			
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)	availal	ole	
	for public inspection. Indicate how you made these available. Check all that apply.	a v unul		
	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, ar	nd finar	ncial	
	statements available to the public during the tax year.	III IUI	. 5141	
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	NORMA MILLER - 615-321-8004			
	2000 EDGEHTIT, AVENUE NASHVILLE UN 37212-2198			

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.

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours per week	(do	not cl	(C Posi heck i	ition more rson i		one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) DEL BRYANT	1.50								0	0
TRUSTEE	2 00	Х	Ш					0.	0.	0.
(2) ANN CARGILE	2.00	,,		7.7					0	0
BOARD SECRETARY	1 50	Х	-	Х				0.	0.	0.
(3) XIU CRAVENS	1.50	Ι,,							0	0
TRUSTEE	1 50	Х	-					0.	0.	0.
(4) KATIE CRUMBO	1.50	Ι,,						0.	0.	0
TRUSTEE	1.50	Х						0.	0.	0.
(5) KIM DANO	1.50	Х						0.	0.	0.
TRUSTEE	1.50	^	-					0.	0.	0.
(6) CHARLENE DEWEY	1.50	Х						0.	0.	0.
TRUSTEE	1.50	^	-					0.	0.	0.
(7) BURGIN DOSSETT TRUSTEE	1.50	Х						0.	0.	0.
(8) ELISABETH DYKENS	2.00	^						0.	0.	0.
BOARD VICE-PRESIDENT	2.00	Х		х				0.	0.	0.
(9) TORY FITZGIBBON	1.50	^	-					0.	· ·	0.
TRUSTEE	1.50	х						0.	0.	0.
(10) BOB GORDON	1.50		-					0.	•	<u></u>
TRUSTEE	1.30	x						0.	0.	0.
(11) BRADFORD GULMI	1.50									
TRUSTEE		х						0.	0.	0.
(12) EDDIE HAMILTON	1.50									
TRUSTEE		х						0.	0.	0.
(13) HENRY HICKS, III	1.50							-		-
TRUSTEE		х						0.	0.	0.
(14) HAROLD JORDAN	1.50									
TRUSTEE		Х						0.	0.	0.
(15) TERRI KASSELBERG	1.50									
TRUSTEE		Х						0.	0.	0.
(16) DAVID KLOEPPEL	2.50									_
BOARD PRESIDENT		Х		Х			L	0.	0.	0.
(17) BERT MATHEWS	1.50									_
TRUSTEE		Х						0.	0.	0.

Part VII Section A. Officers, Directors, Trus	tees Key Fm	nlov	/PPS	an	1 Hi	ahe	st C	omnensated Employe	es (continued)	125 Tage C
(A)	(B)	 	300	(C		3.10	<u> </u>	(D)	(E)	(F)
Name and title	Average hours per week	box	not c , unle cer an	Posi heck ss pe	ition more	than is bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) ANDREW MAY	1.50									
TRUSTEE	1 50	Х						0.	0.	0.
(19) SEEMA MEHROTRA TRUSTEE	1.50	х						0.	0.	0.
(20) TIM OZGENER TRUSTEE	1.50	х						0.	0.	0.
(21) FIONA PRINE TRUSTEE	1.50	х						0.	0.	0.
(22) LISA QUIGLEY TRUSTEE	1.50	х						0.	0.	0.
(23) HOLLY ROCHE TRUSTEE	1.50	х						0.	0.	0.
(24) IVANETTA DAVIS SAMUELS TRUSTEE	1.50	х						0.	0.	0.
(25) JON SHAYNE TRUSTEE	1.50	х						0.	0.	0.
(26) BRETT SWEET BOARD TREASURER	2.00	х		х				0.	0.	0.
Sub-total Total from continuation sheets to Part VI Total (add lines 1b and 1c)	I, Section A						A	0. 1,096,832. 1,096,832.	0. 0.	0. 148,443. 148,443.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Yes No

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
AMERICAN CONSTRUCTORS		
PO BOX 120129, NASHVILLE, TN 37212	CONSTRUCTION FEES	3,079,789.
SAGE DINING SERVICE, INC, 1402 YORK ROAD,		
SUITE 100, LUTHERVILLE, MD 21093	CAFETERIA MANAGEMENT	510,444.
CROSS GATE SERVICE, INC., 1730 GEN. GEORGE		
PATTON DR., BRENTWOOD, TN 37027	JANITORIAL SERVICES	271,362.
HST INTERIOR ELEMENTS	FURNITURE/DESIGN	
640 RUNDLE AVE., NASHVILLE, TN 37210	CONSULTATION	176,947.
ROBERT MEDLEY	COMPUTER	
208 RED OAK TRAIL , SPRING HILL, TN 37174	CABLING/LABOR/MATERI	100,529.
2 Total number of independent contractors (including but not limited to those liste	ed above) who received more than	
\$100,000 of compensation from the organization		

\$100,000 of compensation from the organization
SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2014)

Form 990 UNIVERSI		_							23-142	
Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	nplo	oyee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)		_	(((D)	(E)	(F)
Name and title	Average			Posi		l		Reportable	Reportable	Estimated
	hours	(c				at apply)		compensation	compensation	amount of
	per	Ť				Ė	Ė	from	from related	other
	week					yee		the	organizations	compensation
	(list any	ector				om plc		organization	(W-2/1099-MISC)	from the
	hours for	or dir	gg.			ated 6		(W-2/1099-MISC)		organization
	related	ıstee	truste		gg.	bens				and related
	organizations below	ual tri	ional		ploye	tcom				organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) BRIAN TIBBS	1.50	_	_				ш.			
TRUSTEE		x						0.	0.	0
(28) MIMI VAUGHN	1.50									
TRUSTEE	1.30	Х						0.	0.	0
(29) GAIL WILLIAMS	1.50							•	•	-
TRUSTEE		x						0.	0.	0
(30) LINDE WILSON	1.50							•	•	-
TRUSTEE	1.30	Х						0.	0.	0
(31) VINCENT W. DURNAN, JR	65.00								•	
SCHOOL DIRECTOR	03100			x				296,978.	0.	39,746
(32) JULIET C. DOUGLAS	45.00							23073700		337,120
DIRECTOR OF ADMISSIONS	13700					х		156,760.	0.	33,204
(33) JEFFREY A. GREENFIELD	45.00							23077000		33,232
HEAD OF MIDDLE SCHOOL						х		137,561.	0.	15,638
(34) STEVEN E. ROBINS	45.00									
HEAD OF HIGH SCHOOL						х		128,630.	0.	15,562
(35) JANET SCHNEIDER	45.00							220,0000		23,332
DIRECTOR OF COLLEGE COUNSELING						х		107,094.	0.	13,824
(36) TERESA STANDARD	45.00									
DIRECTOR OF FINANCE						х		148,849.	0.	16,101
(37) ANNE M. WESTFALL	45.00									
DIRECTOR OF DEVELOPMENT						х		120,960.	0.	14,368
	<u> </u>									
		1								
		1								
		1								
	•	_		_		•				

		Check if Schedule O conta	ains a response	or note to any lin	e in this Part VIII			
			·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ıts Its	1 a	Federated campaigns	1a					
ar our		Membership dues						
Contributions, Gifts, Grants and Other Similar Amounts		Fundraising events	· · · · · · · · · · · · · · · · · · ·					
ar /		Related organizations						
imil		Government grants (contributi						
tion		All other contributions, gifts, grant						
the l		similar amounts not included above		5,065,127.				
	g	Noncash contributions included in lines	1a-1f: \$	1,134,612.				
a S		Total. Add lines 1a-1f		>	5,065,127.			
				Business Code				
e l	2 a	STUDENT TUITION & FEES		611710	21,347,951.	21,347,951.		
اه ک	b	AFTER SCHOOL PROGRAM		611710	576,118.	576,118.		
Program Service Revenue	С	CAFETERIA INCOME		611710	537,184.	537,184.		
eve	d	SUMMER PROGRAM		611710	405,307.	405,307.		
og R	е	ANCILLARY PROGRAMS		611710	25,718.	25,718.		
ᇫ	f	All other program service reve	nue					
	g	Total. Add lines 2a-2f			22,892,278.			
	3	Investment income (including						
		other similar amounts)		.	450,210.			450,210.
	4	Income from investment of tax						
	5	Royalties		▶				
			(i) Real	(ii) Personal				
	6 a	Gross rents	2,788	450.				
	b	Less: rental expenses	0	0.				
	С	Rental income or (loss)	2,788	450.				
		Net rental income or (loss)			3,238.			3,238.
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	1,086,078					
	b	Less: cost or other basis						
		and sales expenses	792,027	. 29,904.				
	С	Gain or (loss)	294,051	-29,904.				
		Net gain or (loss)			264,147.			264,147.
e l	8 a	Gross income from fundraising	g events (not					
		including \$	of					
e e		contributions reported on line	1c). See					
Other Reven		Part IV, line 18	а	555,629.				
¥	b	Less: direct expenses						
0		Net income or (loss) from fund			170,352.			170,352.
		Gross income from gaming ac	-					
		Part IV, line 19		·[
	b	Less: direct expenses						
		Net income or (loss) from gam						
	10 a	Gross sales of inventory, less	returns					
		and allowances		299,219.				
	b	Less: cost of goods sold		294,639.				
		Net income or (loss) from sales			4,580.			4,580.
Ī		Miscellaneous Revenue		Business Code				
Ţ	11 a	BUSINESS OFFICE		611710	43,390.	43,390.		
	b							
	С							
	d	All other revenue						
		Total. Add lines 11a-11d			43,390.			
	12	Total revenue. See instructions.			28,893,322.	22,935,668.	0.	892,527.

Part IX | Statement of Functional Expenses

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

	Check if Schedule O contains a respor	no or note to any lime in	this Port IV	,	
_	<u>'</u>	(A)	(B)	(C) I	(D)
	not include amounts reported on lines 6b,	Total expenses	Program service	Management and	Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
_	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic	2 627 274	2 627 274		
_	individuals. See Part IV, line 22	2,627,274.	2,627,274.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	360,345.		360,345.	
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	12,281,885.	10,478,289.	1,186,024.	617,572.
8	Pension plan accruals and contributions (include				
-	section 401(k) and 403(b) employer contributions)	538,416.	463,634.	47,056.	27,726.
9	Other employee benefits	918,389.	775,098.	96,951.	46,340.
10	Payroll taxes	1,380,953.	1,161,136.	153,508.	66,309.
11	Fees for services (non-employees):	_,000,000	_,,_,		20,000.
		327,511.	235,797.		91,714.
_	Management	6,325.	233,1310	6,325.	J + 1 + 1 + 4 •
b	Legal	32,629.		32,629.	
	Accounting	34,049.		34,043.	
d	, 0				
е	Professional fundraising services. See Part IV, line 17	00 505	00 505		
f	Investment management fees	98,585.	98,585.		
g	Other. (If line 11g amount exceeds 10% of line 25,	666 55-	, , , , , , ,		440 :
	column (A) amount, list line 11g expenses on Sch 0.)	660,967.	466,802.	83,709.	110,456.
12	Advertising and promotion	8,975.	7,211.	1,764.	
13	Office expenses	1,638,577.	1,416,805.	75,734.	146,038.
14	Information technology	385,139.	359,504.	10,248.	15,387.
15	Royalties				
16	Occupancy	1,198,900.	1,112,254.	86,646.	
17	Travel	108,923.	99,880.	8,092.	951.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	171,595.	155,489.	11,865.	4,241.
20	Interest	,	., ., .,	, , .	,
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,851,051.	1,851,051.		
		99,468.	_,,,	99,468.	
23	Other expenses. Itemize expenses not covered	JJ, 1 00•		JJ, ±00 •	
24	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.)	276 712	120 712	130,737.	7,262.
a	OPERATING EXPENSES	276,712.	138,713.		
b	SPECIAL EVENTS	263,336.	104,357.	17,667.	141,312.
С	STUDENT ACTIVITIES	113,680.	113,680.		
d	DISCRETIONARY	52,592.	44,137.	8,455.	
е	All other expenses				
25	Total functional expenses . Add lines 1 through 24e	25,402,227.	21,709,696.	2,417,223.	1,275,308.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
42201	0 11-07-14				Form 990 (2014)

Form 990 (2014)
Part X Balance Sheet

Pa	πX	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			6,026,023.	1	5,714,752.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			354,850.	4	225,217.
	5	Loans and other receivables from current and former officers, directors,					
		trustees, key employees, and highest compensa	ated en	nployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	fied per	rsons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sect	ion 501	I(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr). Complete Part II of Sch L				6	
Assets	7	Notes and loans receivable, net				7	
Ä	8	Inventories for sale or use			77,698.	8	80,401.
	9				3,540.	9	39,729.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	45,763,294.			
	b	Less: accumulated depreciation		19,399,390.	24,812,836.	10c	26,363,904.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1			17,927,403.	12	19,234,591.
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			472,912.	15	480,297.
	16	Total assets. Add lines 1 through 15 (must equa	49,675,262.	16	52,138,891.		
	17	Accounts payable and accrued expenses			3,501,954.	17	1,869,677.
	18					18	
	19	Deferred revenue			539,677.	19	898,262.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F	Part IV	of Schedule D		21	
es	22	Loans and other payables to current and former	officer	s, directors, trustees,			
≝		key employees, highest compensated employee	s, and	disqualified persons.			
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela	ted thi	rd parties	5,792,476.	23	6,845,842.
	24	Unsecured notes and loans payable to unrelated	d third	parties		24	
	25	Other liabilities (including federal income tax, page	yables	to related third			
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of			
		Schedule D			202,065.	25	42,532.
	26				10,036,172.	26	9,656,313.
		Organizations that follow SFAS 117 (ASC 958), chec	k here ▶ X and			
es		complete lines 27 through 29, and lines 33 an			05 000 150		06 040 605
anc	27	Unrestricted net assets			25,892,158.	27	26,243,635.
Fund Balances	28	Temporarily restricted net assets			3,809,629.	28	4,435,715.
Pu	29				9,937,303.	29	11,803,228.
		Organizations that do not follow SFAS 117 (A	SC 958	3), check here 🕨 📖			
P		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or eq				31	
Net Assets or	32	Retained earnings, endowment, accumulated in			00.400.000	32	10 100 == 1
Z	33	Total net assets or fund balances			39,639,090.	33	42,482,578.
	34	Total liabilities and net assets/fund balances			49,675,262.	34	52,138,891.

Form **990** (2014)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1 2 3	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	1 2 3	28,8 25,4		227.
4 5	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	4 5	39,6		090.
6 7 8	Donated services and use of facilities Investment expenses Prior period adjustments	6 7 8			
9 10	Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	9	42,4	.82	-1. 578
Pai	column (B)) rt XII Financial Statements and Reporting	10	74,7	02,	370•
	Check if Schedule O contains a response or note to any line in this Part XII				X
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule		_	Yes	No
2a			2	а	Х
b	Separate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis 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 separate		2	b X	
С	consolidated basis, or both: 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?		2	c X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Signature Act and OMB Circular A-133?	ngle Audit	3	a	X
b	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		3	b	

Form **990** (2014)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

UNIVERSITY SCHOOL OF NASHVILLE

Employer identification number 23-7424429

Pa	rt I	Reason for Public (Charity Status (All organizations must co	omplete th	is part.) Se	ee instructions.		
he o	organi	zation is not a private found	ation because it is: (For lines 1 through 11, o	check only	one box.)			
1		A church, convention of ch					I)(A)(i).		
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)							
3					ection 170	(b)(1)(A)(ii	i).		
4		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,							
-		city, and state:							
5		An organization operated for	or the benefit of a co	llege or university owne	d or opera	ted by a go	overnmental unit describ	ped in	
_		section 170(b)(1)(A)(iv). (C		,		, 5			
6		A federal, state, or local gov	•	nental unit described in	section 17	70(b)(1)(A)	(v).		
7		An organization that norma	_					public described in	
		section 170(b)(1)(A)(vi). (Co	•				anni or morni and general	paisie accession in	
8		A community trust describe		(1)(A)(vi). (Complete Par	t II.)				
9		An organization that norma				contributio	ons membership fees a	nd gross receipts from	
•		activities related to its exem	•	•	-			-	
		income and unrelated busin	-	•				-	
		See section 509(a)(2). (Cor		(least coolier, or relainy in				a	
10		An organization organized a		ively to test for public sa	afety. See :	section 50)9(a)(4).		
11		An organization organized a	•	•	•			e purposes of one or	
		more publicly supported or	•	•	-		· · · · · · · · · · · · · · · · · · ·		
		lines 11a through 11d that	~						
а		Type I. A supporting orga				•		giving	
		the supported organization	•	•	•				
		organization. You must c						•	
b		Type II. A supporting orga			tion with it	s supporte	ed organization(s), by ha	ving	
		control or management o	f the supporting org	anization vested in the s	ame perso	ons that co	ontrol or manage the sup	ported	
		organization(s). You mus	t complete Part IV,	Sections A and C.	•				
С		Type III functionally inte	grated. A supportin	g organization operated	in connec	tion with, a	and functionally integrate	ed with,	
		its supported organization	n(s) (see instructions	s). You must complete l	Part IV, Se	ctions A,	D, and E.		
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in co	nnection v	vith its supported organi	zation(s)	
		that is not functionally int	egrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement and an attent	iveness	
		requirement (see instruct	ions). You must con	nplete Part IV, Sections	s A and D,	and Part	V.		
е		Check this box if the orga	anization received a	written determination fro	om the IRS	that it is a	Type I, Type II, Type III		
		functionally integrated, or	Type III non-functio	nally integrated support	ing organi:	zation.			
f	Ente	r the number of supported o	organizations						
g	Prov	ide the following information	about the supporte						
	(i) Name of supported	(ii) EIN		(iv) Is the o listed i		(v) Amount of monetary	(vi) Amount of	
		organization		(described on lines 1-9 above or IRC section	governing of	document?	support (see Instructions)	other support (see Instructions)	
				(see instructions))	Yes	No	motradition)	inotractions)	
ota	I								

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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.						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
	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 VI.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	oto (soo instructi	one)			12	
	First five years. If the Form 990 is for	•	,	d fourth or fifth to			
10	organization, check this box and stop						
Sec	etion C. Computation of Publi						
	Public support percentage for 2014 (I		<u> </u>	column (f))		14	%
	Public support percentage from 2013					15	<u> </u>
	33 1/3% support test - 2014. If the o						
	stop here. The organization qualifies	•		•		•	
b	33 1/3% support test - 2013. If the o						
	and stop here. The organization quali	-					
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac	_					
	meets the "facts-and-circumstances"			=		-	•
b	10% -facts-and-circumstances test						10% or
	more, and if the organization meets the	ū				•	
	organization meets the "facts-and-circ		•		•		
18	Private foundation. If the organizatio		-	•			s
	<u> </u>			<u> </u>			

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	siow, produce corri	piete i dit ii.)				
	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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						
Ĭ	are not an unrelated trade or business 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						
Ŭ	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	A Amounts included on lines 1, 2, and						
•	3 received from disqualified persons						
I	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support						<u> </u>
Cal	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6			` '		, ,	,
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	's first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	zation,
_	check this box and stop here						>
Se	ction C. Computation of Publ	c Support Pe	ercentage				
15	Public support percentage for 2014 (I	ine 8, column (f) c	divided by line 13,	column (f))		15	%
16	Public support percentage from 2013	Schedule A, Parl	t III, line 15			16	%
Se	ction D. Computation of Inves	stment Incom	ne Percentage	1			
17	Investment income percentage for 20	14 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18	Investment income percentage from 2	2013 Schedule A,	Part III, line 17			18	%
	a 33 1/3% support tests - 2014. If the					33 1/3%, and line	17 is not
	more than 33 1/3%, check this box ar	-					
ı	33 1/3% support tests - 2013. If the						
	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organizatio						

Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in *part VI* how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <code>part VI</code>, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
H	1		
Ļ	2		
H	3a		
- 1	3b		
Ī			
L	3с		
H	4a		
	4b		
[4c		
	5a		
Ļ	5b		
H	5c		
ļ	6		
[7		
ļ	8		
	9a		
ļ	9b		
	0.0		
	9c		
ŀ	10a		
	10b		
n 99	0 or 99	0-EZ)	2014

Pa	rt IV Supporting Organizations (continued)			
	, e e (continuos)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			·
	71 11 0 0		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			110
-	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			<u> </u>
	and or type it cupper unity or gain-autono		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		100	110
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	etion D. Type III Supporting Organizations	<u> </u>		<u> </u>
	non 21 Type in eapperting enganizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	110
•	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	·		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	_		
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.	•		
b	The organization is the parent of each of its supported organizations. <i>Complete line 3</i> below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	structions	3).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			1
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-	trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	За		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in <i>Part VI</i> the role played by the organization in this regard.	3b		

Pai	art V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations								
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All								
	other Type III non-functionally integrated supporting organizations must complete Sections A through E.								
C4	(B) Current Year								
Sect	ion A - Adjusted Net Income		(A) Prior Year	(optional)					
1	Net short-term capital gain	1							
2	Recoveries of prior-year distributions	2							
3	Other gross income (see instructions)	3							
4	Add lines 1 through 3	4							
5	Depreciation and depletion	5							
6	Portion of operating expenses paid or incurred for production or								
	collection of gross income or for management, conservation, or								
	maintenance of property held for production of income (see instructions)	6							
7	Other expenses (see instructions)	7							
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8							
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)					
1	Aggregate fair market value of all non-exempt-use assets (see	,		`					
	instructions for short tax year or assets held for part of year):								
а	Average monthly value of securities	1a							
b	Average monthly cash balances	1b							
С	Fair market value of other non-exempt-use assets	1c							
d	Total (add lines 1a, 1b, and 1c)	1d							
е	Discount claimed for blockage or other								
	factors (explain in detail in Part VI):								
2	Acquisition indebtedness applicable to non-exempt-use assets	2							
3	Subtract line 2 from line 1d	3							
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,								
	see instructions).	4							
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5							
6	Multiply line 5 by .035	6							
7	Recoveries of prior-year distributions	7							
8	Minimum Asset Amount (add line 7 to line 6)	8							
Sect	ion C - Distributable Amount			Current Year					
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1							
2	Enter 85% of line 1	2							
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3							
4	Enter greater of line 2 or line 3	4							
5	Income tax imposed in prior year	5							
6	Distributable Amount. Subtract line 5 from line 4, unless subject to								
	emergency temporary reduction (see instructions)	6							
7	Check here if the current year is the organization's first as a non-functional	y-integra	ited Type III supporting org	anization (see					
	instructions).			•					

Schedule A (Form 990 or 990-EZ) 2014

Par	1 v Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
Secti	ion D - Distributions			Current Year
	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	is	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	9	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а				
b				
С				
d	Excess from 2013			
е	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

Schedule A	(Form 990 or 990-EZ) 2014 UNIVERSITY SCHOOL OF NASHVILLE	23-7424429 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17	a or 17b; and Part III, line 12.
	Also complete this part for any additional information. (See instructions).	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047 Open to Public

Inspection

Name of the organization

UNIVERSITY SCHOOL OF NASHVILLE

Employer identification number 23-7424429

Pai	rt I	Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or A	ccounts. Complete if the
		organization answered "Yes" to Form 990, Part IV, line	e 6.		
			(a) Donor advised funds	(1	b) Funds and other accounts
1	Total	number at end of year			
2	Aggre	gate value of contributions to (during year)			
3	Aggre	gate value of grants from (during year)			
4	Aggre	gate value at end of year			
5	Did th	e organization inform all donors and donor advisors in	writing that the assets held in donor advi-	sed fun	ds
	are th	e organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did th	e organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	e used c	only
		aritable purposes and not for the benefit of the donor o			
	imper	missible private benefit?			Yes No
Pai	rt II	Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, I	Part IV,	line 7.
1	Purpo	se(s) of conservation easements held by the organizati	on (check all that apply).		
		Preservation of land for public use (e.g., recreation or e	education) Preservation of a hist	torically	important land area
		Protection of natural habitat	Preservation of a cer	tified his	storic structure
		Preservation of open space			
2	Comp	lete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a co	onservation easement on the last
	day o	f the tax year.			
					Held at the End of the Tax Year
а	Total	number of conservation easements			2a
b	Total	acreage restricted by conservation easements			2b
С	Numb	er of conservation easements on a certified historic str	ucture included in (a)		2c
d	Numb	er of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct	ture	
	listed	in the National Register			2d
3		er of conservation easements modified, transferred, rel		e organ	ization during the tax
	year 🕽	-			
4	Numb	er of states where property subject to conservation ea	sement is located >		
5	Does	the organization have a written policy regarding the per	riodic monitoring, inspection, handling of		
	violati	ons, and enforcement of the conservation easements if	t holds?		Yes No
6	Staff	and volunteer hours devoted to monitoring, inspecting,			
7	Amou	nt of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	g the ye	ear ▶ \$
8	Does	each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	D(h)(4)(B	B)(i)
	and s	ection 170(h)(4)(B)(ii)?			Yes No
9	In Par	t XIII, describe how the organization reports conservati	on easements in its revenue and expens	e stater	nent, and balance sheet, and
	includ	e, if applicable, the text of the footnote to the organizat	tion's financial statements that describes	the org	ganization's accounting for
		rvation easements.			
Pai	rt III	Organizations Maintaining Collections of	f Art, Historical Treasures, or C	Other S	Similar Assets.
		Complete if the organization answered "Yes" to Form	990, Part IV, line 8.		
1a	If the	organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue state	ment ar	nd balance sheet works of art,
	histor	ical treasures, or other similar assets held for public ext	nibition, education, or research in furthera	ance of	public service, provide, in Part XIII,
	the te	xt of the footnote to its financial statements that descri	bes these items.		
b	If the	organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statemen	nt and b	alance sheet works of art, historical
	treasu	res, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pu	ublic ser	rvice, provide the following amounts
	relatir	g to these items:			
	(i) R	evenue included in Form 990, Part VIII, line 1			
					k 4
2	If the	organization received or held works of art, historical tre	asures, or other similar assets for financia	al gain,	provide
	the fo	llowing amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:		
а	Rever	nue included in Form 990, Part VIII, line 1			> \$
b		: 1 1 1: E 000 B 1V			▶ \$

Pai	t III Organizations Maintaining C	collections of Ar	t, Hist	torical Tr	easures, o	or Othe	er Simi	ar Ass	ets(cont	inued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check	k any of the	following tha	at are a s	ignificant	use of it	s collection	on iten	ns
	(check all that apply):										
а	Public exhibition	d		Loan or excl	nange progra	ams					
b	b Cholarly research e Other										
С	c Preservation for future generations										
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.										
5											
	to be sold to raise funds rather than to be ma	aintained as part of t	he orgar	nization's co	llection?			L	Yes		No
Pai	t IV Escrow and Custodial Arran		te if the	organizatio	n answered	"Yes" to	Form 990), Part IV	, line 9, o	r	
	reported an amount on Form 990, Par	t X, line 21.									
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for	contribution	s or other as	sets not	included	_	_	_	_
	on Form 990, Part X?							L	Yes	X	☐ No
b	If "Yes," explain the arrangement in Part XIII $$										
									Amour	nt	
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for 6	escrow or cu	ustodial acco	ount liabil	lity?	L	Yes	X	No
	If "Yes," explain the arrangement in Part XIII.									. L	
Pai	t V Endowment Funds. Complete i	f the organization an	swered	"Yes" to Fo	m 990, Part						
		(a) Current year		rior year	(c) Two yea	rs back	(d) Three	years bac			
	Beginning of year balance	14,217,151.	10	,887,648.	9,49	4,910.	9,	528,467	7. 7	,999	,824.
b	Contributions	1,951,416.		,415,376.		0,403.	:	215,024			,503.
С	Net investment earnings, gains, and losses	-15,385.	1	,248,532.	90	2,742.		-17,581	. 1	.,424	,514.
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs	372,771.		334,405.	68	0,407.		331,000).	322	,374.
f	Administrative expenses										
g	End of year balance	15,780,411.	14	,217,151.	10,88	7,648.	9,	494,910). 9	,628	,467.
2	Provide the estimated percentage of the curr		e (line 1	g, column (a	i)) held as:						
а	Board designated or quasi-endowment	12.22	_%								
b	Permanent endowment ► 74.80	%									
С	Temporarily restricted endowment ▶ 1	<u>2.9</u> 8 %									
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%.									
За	Are there endowment funds not in the posse	ssion of the organiza	ation tha	at are held a	nd administe	ered for t	he organi	zation			
	by:									Yes	No
	(i) unrelated organizations								3a(i)	<u> </u>	X
	(ii) related organizations										X
b	If "Yes" to 3a(ii), are the related organizations								3b		
4	Describe in Part XIII the intended uses of the		wment f	funds.							
Pai	t VI Land, Buildings, and Equipm										
	Complete if the organization answere	1			1						
	Description of property	(a) Cost or of		(b) Cost			ccumulat		(d) Boo	ok valu	ıe
		basis (investr	nent)	basis (,	der	preciation	1	0 01	4 -	
1a	Land				4,767.	4 - 4	244 2	F 2	2,81		
b	Buildings			37,83	0,030.	15,S	944,9	13.	21,88	5,0	57.
С	Leasehold improvements			F 44	0 405		4544	1	1	4 ^	
d	Equipment			5,11	8,497.	3,4	454,4	1 / •	1,66	4,0	80.
	Other								26 26	2 2	0.4
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colun	nn (B), line 1	0c.)	<u></u>			26,36	3,9	U4.

Schedule D (Form 990) 2014

Sched	ule D	(Form 990) 2014

ochedule D	(1 01111 330) 2014	0111111111111	2011002	-	-11-0	~
Part VII	Investments -	Other Securities.				

Complete if the organization answered "Yes"	to Form 990, Part IV, line 1	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) US AND INTERNATIONAL		
(B) EQUITIES	5,896,543.	END-OF-YEAR MARKET VALUE
(C) BONDS AND FIXED INCOME		
(D) FUNDS	2,732,060.	END-OF-YEAR MARKET VALUE
(E) MUTUAL FUNDS	7,949,151.	END-OF-YEAR MARKET VALUE
(F) CASH AND CASH EQUIVALENTS	2,424,907.	END-OF-YEAR MARKET VALUE
(G) PRIVATE EQUITY FUNDS	136,000.	END-OF-YEAR MARKET VALUE
(H) HEDGE FUNDS	13,861.	END-OF-YEAR MARKET VALUE
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	19,234,591.	
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	to Form 990, Part IV, line 1	I1c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		

(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		
(2)	OBLIGATION UNDER INTEREST RATE		
(3)	SWAP	42,532.	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	42,532.	

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Pa	rt XI Reconciliation of Revenue per Audited Financial Staten				
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12	?a.			
1	Total revenue, gains, and other support per audited financial statements			1	26,199,772.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-647,606.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	679,915.		
е	Add lines 2a through 2d			2e	32,309.
3	Subtract line 2e from line 1			3	26,167,463.
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	98,585.		
b	Other (Describe in Part XIII.)	4b	2,627,274.		
_	Add lines 4a and 4b			4c	2,725,859.
-					
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	28,893,322.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial State	ments W		5	28,893,322.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12	ments W	/ith Expenses per	5 Retu	28,893,322. irn.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial State	ments W	/ith Expenses per	5	28,893,322.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) TXII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ments W	/ith Expenses per	5 Retu	28,893,322. irn.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) **TXII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ments W	/ith Expenses per	5 Retu	28,893,322. irn.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) TXII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ments W	/ith Expenses per	5 Retu	28,893,322. irn.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) **TXII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ments W	ith Expenses per	5 Retu	28,893,322. irn.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c	/ith Expenses per	5 Retu	28,893,322. Irn. 23,356,284.
5 Pa 1 2 a b c	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c 2d	fith Expenses per	5 Retu	28,893,322. irn. 23,356,284. 679,916.
5 Pa 1 2 a b c	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	fith Expenses per	5 Retu	28,893,322. Irn. 23,356,284.
Pa 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a	fith Expenses per	5 Retu	28,893,322. irn. 23,356,284. 679,916.
1 2 a b c d e 3 4 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) IT XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses 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	2a 2b 2c 2d	679,916.	5 Retu	28,893,322. irn. 23,356,284. 679,916.
1 2 a b c d e 3 4 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) IT XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses 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:	2a 2b 2c 2d	fith Expenses per	5 Retu	28,893,322. irn. 23,356,284. 679,916. 22,676,368.
1 2 a b c d e 3 4 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) IT XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses 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	2a 2b 2c 2d 4a 4b	679,916. 98,585. 2,627,274.	5 Retu	28,893,322. irn. 23,356,284. 679,916.

Part XIII Supplemental Information.

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

PART V, LINE 4:

THE SCHOOL'S ENDOWMENT CONSISTS OF DONOR RESTRICTED AND BOARD DESIGNATED

QUASI-ENDOWMENT FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES.

QUASI-ENDOWMENT CONSISTS OF UNRESTRICTED NET ASSETS DESIGNATED FOR FUTURE

PURPOSES. THIS PORTION OF UNRESTRICTED NET ASSETS MAY BE EXPENDED AS

AUTHORIZED BY THE BOARD OF TRUSTEES INVESTMENT AND SPENDING POLICY OR BY

BOARD ACTION. CONTRIBUTIONS TO THE TEMPORARILY RESTRICTED FUND ARE

RESTRICTED BY THE DONOR FOR A SPECIFIC PURPOSE. ALSO INCLUDED ARE THE

PERMANENTLY RESTRICTED ENDOWMENT MARKET GAINS AND LOSSES RESULTING FROM

THE INVESTMENT OF PERMANENTLY RESTRICTED NET ASSETS. THIS PORTION OF

TEMPORARILY RESTRICTED NET ASSETS MAY BE EXPENDED AS AUTHORIZED BY THE

BOARD OF TRUSTEES INVESTMENT AND SPENDING POLICY FOR THE PURPOSE

Part XIII | Supplemental Information (continued)

STIPULATED BY THE DONOR. THE PERMANENTLY RESTRICTED ENDOWMENT FUND

INCLUDES NET ASSETS SUBJECT TO DONOR IMPOSED STIPULATIONS THAT THEY BE

MAINTAINED PERMANENTLY BY THE SCHOOL. GENERALLY, THE DONORS OF THESE

ASSETS PERMIT THE SCHOOL TO USE ALL OR PART OF THE INCOME EARNED ON

RELATED INVESTMENTS FOR GENERAL OR SPECIFIC PURPOSES.

PART X, LINE 2:

THE SCHOOL IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF INTERNAL REVENUE CODE SECTION 501(C)(3). ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS INCLUDED IN THE FINANCIAL STATEMENTS.

A TAX POSITION IS RECOGNIZED AS A BENEFIT ONLY IF IT IS "MORE LIKELY THAN NOT" THE TAX POSITION WOULD BE SUSTAINED IN A TAX EXAMINATION, WITH A TAX EXAMINATION BEING PRESUMED TO OCCUR. THE AMOUNT RECOGNIZED IS THE AMOUNT OF TAX BENEFIT GREATER THAN 50% LIKELY OF BEING REALIZED ON EXAMINATION.

FOR TAX POSITIONS NOT MEETING THE "MORE LIKELY THAN NOT" TEST, NO TAX BENEFIT IS RECORDED.

AS OF JUNE 30, 2015, THE SCHOOL HAS ACCRUED NO INTEREST AND NO PENALTIES RELATED TO UNCERTAIN TAX POSITIONS. IT IS THE SCHOOL® POLICY TO RECOGNIZE INTEREST AND/OR PENALTIES RELATED TO INCOME TAX MATTERS IN INCOME TAX EXPENSE. THE SCHOOL FILES A U.S. FEDERAL INFORMATION TAX RETURN. THE SCHOOL IS CURRENTLY OPEN TO AUDIT UNDER THE STATUTE OF LIMITATIONS BY THE INTERNAL REVENUE SERVICE FOR THE FISCAL YEARS ENDED AFTER JUNE 30, 2010.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

BOOKSTORE COGS NETTED WITH REVENUE ON TAX RETURN

294,639.

FUNDRAISING EXPENSE NETTED WITH REVENUE ON TAX RETURN

385,276.

Schedule D (Form 990) 2014 UNIVERSITY SCHOOL OF NASHVILLE Part XIII Supplemental Information (continued)	23-7424429 Page 5
TOTAL TO SCHEDULE D, PART XI, LINE 2D	679,915.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
FINANCIAL AID NETTED WITH TUITION ON FINANCIALS	2,627,274.
ROUNDING	
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
BOOKSTORE COGS NETTED WITH REVENUE ON TAX RETURN	294,639.
FUNDRAISING EXPENSE NETTED WITH REVENUE ON TAX RETURN	385,276.
ROUNDING	1.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	679,916.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
FINANCIAL AID NETTED WITH TUITION ON FINANCIALS	2,627,274.

Part XIII Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
CASH VALUE OF LIFE INSURANCE	82,069.	FMV
	0=7000	

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schools

Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

► Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

UNIVERSITY SCHOOL OF NASHVILLE

 $Employer\ identification\ number \\ 23-7424429$

			YES	١
	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			
	other governing instrument, or in a resolution of its governing body?	1	X	
	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	L
	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the			
	period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes			
	the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain.		37	
	If you need more space, use Part II	3	X	
	THE SCHOOL'S NON-DISCRIMINATORY POLICY IS PRINTED IN			
	BROCHURES, VIEWBOOKS, OPEN HOUSE ADS, AND ALL OTHER PRINTED MATERIAL AVAILABLE TO THE PUBLIC.			
	MATERIAL AVAILABLE TO THE PUBLIC.			
	Does the organization maintain the following?		7.7	
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	┞
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Х	\vdash
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student		₃₂	
	admissions, programs, and scholarships?	4c	X	L
		4d	ΙX	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II.	40		
d		40		
	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to:	40		
а	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges?	5a		_
a b	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies?			
a b c	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff?	5a		
a b c d	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance?	5a 5b 5c 5d		
a b c d e	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies?	5a 5b 5c 5d 5e		
a b c d e f	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities?	5a 5b 5c 5d 5e 5f		
a b c d e f g	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs?	5a 5b 5c 5d 5e 5f 5g		
a b c d e f g	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities?	5a 5b 5c 5d 5e 5f		
a b c d e f	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs?	5a 5b 5c 5d 5e 5f 5g		
a b c d e f g	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities?	5a 5b 5c 5d 5e 5f 5g		
a b c d e f g h	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5a 5b 5c 5d 5e 5f 5g 5h		
a b c d e f g h	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5a 5b 5c 5d 5e 5f 5g 5h		
a b c d e f g h	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	5a 5b 5c 5d 5e 5f 5g 5h		
a b c d e f g h	If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5a 5b 5c 5d 5e 5f 5g 5h		

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

Schedule E (Form 990 or 990-EZ) (2014)

Schedule E	(Form 990 or 990-EZ) (2014) UNIVERSITY SCHOOL OF NASHVILLE	23-7424429 Page 2
Part II	Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and	nd 7, as applicable.
	Also provide any other additional information.	

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990.

OMB No. 1545-0047

Open to Public

Inspection

Name of the organization Employer identification number UNIVERSITY SCHOOL OF NASHVILLE 23-7424429 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or Yes No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) have custody or control of contributions? (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

Schedule G (Form 990 or 990-EZ) 2014

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events EVENING (add col. (a) through CLASSES 8 ARTCLECTIC col. (c)) (event type) (event type) (total number) Revenue 336,238 78,592. 140,799. 555,629. 1 Gross receipts 2 Less: Contributions 78,592. 336,238. 140,799. 555,629. 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 5,046. 5,046. 6 Rent/facility costs 779. 8,169. 13,328. 4,380. 7 Food and beverages 600 600. 8 Entertainment 42,223. 366,303. 286,067. 38,013. 9 Other direct expenses $38\overline{5,277}$ 10 Direct expense summary. Add lines 4 through 9 in column (d) 170,352. 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes % Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? No **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? _____ Yes ____ No **b** If "Yes," explain:

Sch	edule G (Form 990 or 990-EZ) 2014 UNIVERSIII SCHOOL OF NASHVILLE 23-7	424	:445	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
12	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
	Indicate the percentage of gaming activity conducted in:	ı	1	
	The organization's facility	13a	+	%
	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
	olf "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party > \$			
	: If "Yes," enter name and address of the third party:			
	Name ▶			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	.Ш	Yes	└── No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Da	organization's own exempt activities during the tax year > \$		<u> </u>	
Ра	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, line 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	nes 9,	96, 10	Jb, 15b,

Schedule 6	G (Form 990 or 990-EZ)	UNIVERSITY	SCHOOL	OF	NASHVILLE	23-742442	Page 4
Part IV	G (Form 990 or 990-EZ) Supplemental Infor	mation (continued)					Ĭ
		, ,					

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of	f the organization	Y SCHOOL	OF NASHVIL	LE		•		Employer identification number 23-7424429
Part I			01 1(110111112					20 ,121129
cr	oes the organization maintain records in iteria used to award the grants or assisescribe in Part IV the organization's pro	stance?						
Part II	Grants and Other Assistance to	Domestic Organ	izations and Domest	tic Governments.	Complete if the org	anization answered "	Yes" to Form 990, Parl	IV, line 21, for any
	recipient that received more than					(f) Mathead of	1	1
1 (a	Name and address of organization or government	(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
	nter total number of section 501(c)(3) a							
<u> </u>	nter total number of other organization	<u>5 115 EU 111 EUE 11110</u>	1 Lault					

Part IV Supplemental Information. Provide the information required in Part I, line 2, SCHEDULE I, PART I, LINE 2: FINANCIAL AID IS AWARDED BASED UPON FINANCIA FAMILY. FINANCIAL INFORMATION AND SUGGESTED RECIPIENT'S PARENT(S) OR GUARDIAN(S) IS PROV	2,627,274.										
Part IV Supplemental Information. Provide the information required in Part I, line 2, SCHEDULE I, PART I, LINE 2: FINANCIAL AID IS AWARDED BASED UPON FINANCIA FAMILY. FINANCIAL INFORMATION AND SUGGESTED RECIPIENT'S PARENT(S) OR GUARDIAN(S) IS PROV	2,627,274.										
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SCHEDULE I, PART I, LINE 2: FINANCIAL AID IS AWARDED BASED UPON FINANCIA		0.0	OTHER	BILL							
SCHEDULE I, PART I, LINE 2: FINANCIAL AID IS AWARDED BASED UPON FINANCIA FAMILY. FINANCIAL INFORMATION AND SUGGESTED RECIPIENT'S PARENT(S) OR GUARDIAN(S) IS PROV											
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SCHEDULE I, PART I, LINE 2: FINANCIAL AID IS AWARDED BASED UPON FINANCIA FAMILY. FINANCIAL INFORMATION AND SUGGESTED RECIPIENT'S PARENT(S) OR GUARDIAN(S) IS PROV											
SCHEDULE I, PART I, LINE 2: FINANCIAL AID IS AWARDED BASED UPON FINANCIA FAMILY. FINANCIAL INFORMATION AND SUGGESTED RECIPIENT'S PARENT(S) OR GUARDIAN(S) IS PROV	Part III. column (b)	b), and any other ac	dditional information.								
FINANCIAL AID IS AWARDED BASED UPON FINANCIA FAMILY. FINANCIAL INFORMATION AND SUGGESTED RECIPIENT'S PARENT(S) OR GUARDIAN(S) IS PROV	(2)										
FAMILY. FINANCIAL INFORMATION AND SUGGESTED RECIPIENT'S PARENT(S) OR GUARDIAN(S) IS PROV											
RECIPIENT'S PARENT(S) OR GUARDIAN(S) IS PROV	NEED OF	THE RECT	PIENTS								
	FINANCIA	L NEED OF	THE								
INDEPENDENT THIRD PARTY.	(DED TO TI	HE SCHOOL	BY AN								

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

UNIVERSITY SCHOOL OF NASHVILLE

Employer identification number 23-7424429

Pa	art I Questions Regarding Compensation							
	·		Yes	No				
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,							
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.							
	First-class or charter travel Housing allowance or residence for personal use							
	Travel for companions Payments for business use of personal residence							
	Tax indemnification and gross-up payments Health or social club dues or initiation fees							
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)							
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or							
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		Х					
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?							
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's							
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to							
	establish compensation of the CEO/Executive Director, but explain in Part III.							
	Compensation committee X Written employment contract							
	Independent compensation consultant Compensation survey or study							
	Form 990 of other organizations X Approval by the board or compensation committee							
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing							
	organization or a related organization:							
а	Receive a severance payment or change-of-control payment?	4a		X				
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х				
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х				
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.							
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation							
	contingent on the revenues of:			37				
а	The organization?	5a		X				
b	Any related organization?	5b		_^				
_	If "Yes" to line 5a or 5b, describe in Part III.							
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation							
	contingent on the net earnings of:	_		- V				
a	The organization?	6a		X				
b	Any related organization?	6b						
_	If "Yes" to line 6a or 6b, describe in Part III.							
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			v				
-	not described in lines 5 and 6? If "Yes," describe in Part III	7		X				
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v				
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X				
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	_						
	Regulations section 53.4958-6(c)?	9	1	I				

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

Schedule J (Form 990) 2014

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) None and The		(i) Base	(ii) Bonus &	(iii) Other	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred
(A) Name and Title		compensation	incentive	reportable	Compondation			in prior Form 990
			compensation	compensation				·
(1) VINCENT W. DURNAN, JR	(i)	296,978.	0.	0.	30,500.	9,246.	336,724.	0.
	(ii)	0.	0.	0.	0.	0.		0.
(2) JULIET C. DOUGLAS	(i)	156,760.	0.	0.	24,674.	8,530.		0.
DIRECTOR OF ADMISSIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JEFFREY A. GREENFIELD	(i)	137,561.	0.	0.	7,106.	8,532.		0.
HEAD OF MIDDLE SCHOOL	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) TERESA STANDARD	(i)	148,849.	0.	0.	7,528.	8,573.		0.
DIRECTOR OF FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI. ► Attach to Form 990. Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

UNIVERSITY SCHOOL OF NASHVILLE

Employer identification number 23-7424429

OMB No. 1545-0047

2014

Part I Bond Issues SE	E PART VI	FOR COLUM	NS (A) A	ND (F)	CONTI	NUATIONS	5	<u> </u>					
(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issue	d (e) Iss	ue price	(f) Description of purpose			(g) Defeased (h) On behal of issuer			(i) Po	
								Yes	No	Yes	No	Yes	No
INDUSTRIAL DEVELOPMENT						TO FINAN							
A BOARD OF THE METROPOLITI	52-1789764	592106AB4	08/01/0	2 8,000	,000.	IMPROVEM	ENTS TO	T	Х		Х		X
В													
_ c													
D													
Part II Proceeds		•		•				•					
1 Amount of bonds retired			<u> </u>	A		В		;			D		_
2 Amount of bonds legally defeased													
3 Total proceeds of issue													
4 Gross proceeds in reserve funds													
5 Capitalized interest from proceeds													
6 Proceeds in refunding escrows													
7 Issuance costs from proceeds													
8 Credit enhancement from proceeds													
9 Working capital expenditures from proceeds													
10 Capital expenditures from proceeds													
11 Other spent proceeds													
12 Other unspent proceeds													
13 Year of substantial completion													
			Yes	No	Yes	No	Yes	No		Yes		No	
14 Were the bonds issued as part of a current ref	unding issue?			X									
15 Were the bonds issued as part of an advance	refunding issue?			X									
16 Has the final allocation of proceeds been made	e?			X									
17 Does the organization maintain adequate books and records to	o support the final allocation	of proceeds?		X									
Part III Private Business Use													
			,	A		В		;			D		
1 Was the organization a partner in a partnership			Yes	No	Yes	No	Yes	No		Yes	\perp	No	
which owned property financed by tax-exempt				X							\perp		
2 Are there any lease arrangements that may res													
bond-financed property?	e. see the Instructio		 40	X									

Par	t III Private Business Use (Continued)								
			Ą	I	В	(?)
3a	Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	No	Yes	No
	business use of bond-financed property?		Х						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
	counsel to review any management or service contracts relating to the financed property?								
	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
	counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by								
	entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5	Enter the percentage of financed property used in a private business use as a result of								
	unrelated trade or business activity carried on by your organization, another								
	section 501(c)(3) organization, or a state or local government		%		%		%		%
6	Total of lines 4 and 5		%		%		%		%
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
	of		%		%		%		<u>%</u>
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
	1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified								
	bonds of the issue are remediated in accordance with the requirements under								
_	Regulations sections 1.141-12 and 1.145-2?		X						
Par	t IV Arbitrage								
			Α		В	Ç		D	
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		X						
	If "No" to line 1, did the following apply?		37	1			1		ı
	Rebate not due yet?		X						
	Exception to rebate?		X						
<u>c</u>	No rebate due?		X						
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
	performed			1			1		1
	Is the bond issue a variable rate issue?		X						
4a	Has the organization or the governmental issuer entered into a qualified		v						
	hedge with respect to the bond issue?		X						
	Name of provider								
	Term of hedge								
	Was the hedge superintegrated?								
<u>e</u>	Was the hedge terminated?								

Part IV Arbitrage (Continued)								
	Α		E	3		С		D
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b Name of provider						-		
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of								
section 148?		X						
Part V Procedures To Undertake Corrective Action		•	•	•			•	•
	-	A	Е	3		С		D
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of								
federal tax requirements are timely identified and corrected through the voluntary								
closing agreement program if self-remediation is not available under applicable								
regulations?		X						
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedul	e K (see instr	uctions).	•	•			
SCHEDULE K, PART I, BOND ISSUES:		·				,		
(A) ISSUER NAME:						,		
INDUSTRIAL DEVELOPMENT BOARD OF THE METROPOLITIAL	N GOV'	r of na	SHVILLI	₹		,		,
(F) DESCRIPTION OF PURPOSE:								
TO FINANCE IMPROVEMENTS TO THE CAMPUS LOCATED IN	NASHV	ILLE, T	'N•					
						,		

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

Name of the organization

UNIVERSITY SCHOOL OF NASHVILLE 23-7424429 Part I Types of Property (a) (b) (c) (d) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1a Art - Works of art 1 Art - Historical treasures Art - Fractional interests 3 Books and publications 4 Clothing and household goods 5 Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 <u>39</u> 1,134,612. FMV - DATE OF GIFT Securities - Publicly traded 9 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution -13 Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 Collectibles 18 Food inventory 19 Drugs and medical supplies 20 21 Taxidermy Historical artifacts 22 23 Scientific specimens Archeological artifacts 24 25 Other 26 Other 27 Other ▶ 28 Other Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for X exempt purposes for the entire holding period? 30a **b** If "Yes." describe the arrangement in Part II. X Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х contributions? 32a **b** If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

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

Schedule M (Form 990) (2014)

describe in Part II.

Schedule M	l (Form 990) (2014)	UNIVERSITY	SCHOOL	OF	NASHVILLE	23-7424429	Page 2
Part II	Supplemental	Information, Pro	vide the inform	ation r	equired by Part I, lines 30b, 32b, ar the number of items received, or a	nd 33, and whether the organiza combination of both. Also comp	tion
						_	
						_	

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

UNIVERSITY SCHOOL OF NASHVILLE

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. **Employer identification number** 23-7424429

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: REPRESENTS THE CULTURAL AND ETHNIC COMPOSITION OF GREATER NASHVILLE, USN FOSTERS EACH STUDENT'S INTELLECT, ARTISTIC AND ATHLETIC POTENTIAL, VALUING AND INSPIRING INTEGRITY, CREATIVE EXPRESSION, A LOVE OF LEARNING, AND THE PURSUIT OF EXCELLENCE.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: EXPRESSION, A LOVE OF LEARNING, AND THE PURSUIT OF EXCELLENCE.

FORM 990, PART VI, SECTION A, LINE 2:

XIU CRAVENS, CHARLENE DEWEY, RICHARD C. MCCARTY, ELISABETH DYKENS, BRETT SWEET AND GAIL WILLIAMS ARE EMPLOYED BY THE SAME UNIVERSITY.

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

A DRAFT OF FORM 990 IS REVIEWED FIRST BY MEMBERS OF THE FINANCE COMMITTEE OF THE BOARD OF TRUSTEES. AFTER THE FINANCE COMMITTEE REVIEWS AND MAKES ANY CHANGES NECESSARY, A REVISED DRAFT IS SENT TO EACH VOTING MEMBER OF THE BOARD OF TRUSTEES. ANY BOARD MEMBER COULD RECOMMEND CHANGES. THE FINAL COPY IS THEN SIGNED BY THE DIRECTOR OF THE SCHOOL AND PAID PREPARER AND ELECTRONICALLY FILED WITH THE INTERNAL REVENUE SERVICE.

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

EACH MEMBER OF THE SCHOOL'S BOARD, ADMINISTRATION, FACULTY, STAFF AND COMMITTEES (AN "INDIVIDUAL") MUST AVOID INCURRING ANY KIND OF UNDISCLOSED FINANCIAL OR PERSONAL OBLIGATION THAT MIGHT REASONABLY BE EXPECTED TO

AFFECT THE INDIVIDUAL'S JUDGMENT IN DEALING WITH OTHER PARTIES ON BEHALF OF

Name of the organization UNIVERSITY SCHOOL OF NASHVILLE

Employer identification number 23-7424429

THE SCHOOL. IF THERE IS ANY APPEARANCE OF CONFLICT OF INTEREST, EVEN THOUGH
THE CONFLICT MAY NOT EXIST IN ACTUALITY, THE INDIVIDUAL SHOULD DISCLOSE THE
PARTICULAR SITUATION IN WRITING TO THE DIRECTOR OF THE SCHOOL. IF THE
MATTER INVOLVES A MEMBER OF THE BOARD OR A MEMBER OF A BOARD COMMITTEE (A
"BOARD INDIVIDUAL"), THE DIRECTOR WILL IN TURN INFORM THE EXECUTIVE
COMMITTEE OF THE BOARD.

THE DIRECTOR SHALL REVIEW A COPY OF THIS POLICY ANNUALLY AND MAKE ANY RELEVANT DISCLOSURES AT THAT TIME OR AT THE TIME ANY POTENTIAL CONFLICT ARISES IN THE FUTURE. A SIGNED DISCLOSURE IS GIVEN TO THE DIRECTOR AND FOR A BOARD "INDIVIDUAL" THIS DISCLOSURE IS RETAINED ON FILE WITH OTHER BOARD MATERIALS IN THE DIRECTOR'S OFFICE. EACH EMPLOYEE SHALL ALSO ANNUALLY REVIEW THIS POLICY AND MAKE ANY RELEVANT DISCLOSURES AT THAT TIME OR AT THE TIME ANY POTENTIAL CONFLICT ARISES IN THE FUTURE. THESE DISCLOSURE DOCUMENTS ARE GIVEN TO THE DIRECTOR AND RETAINED ON FILE IN THE DIRECTOR'S OFFICE.

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

THE KEY EMPLOYEE (DIRECTOR) DRAFTS AN ANNUAL LETTER OF AGREEMENT

(MEMORANDUM OF UNDERSTANDING) IN THE EARLY FALL OF THE CURRENT ACADEMIC

YEAR AS WELL AS FISCAL YEAR OUTLINING HIS GOALS AND OBJECTIVES FOR THAT

YEAR. THIS AGREEMENT IS SIGNED BY THE KEY EMPLOYEE AND THE PRESIDENT OF

THE BOARD OF TRUSTEES. BEFORE THE CLOSE OF THE CURRENT ACADEMIC AND FISCAL

YEAR, THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES GOES INTO CLOSED

SESSION AND DISCUSSES THE PROGRESS MADE ON THE DIRECTOR'S GOALS AND

OBJECTIVES AS OUTLINED IN THE EARLY FALL. SUBSEQUENTLY, THE BOARD

PRESIDENT, VICE PRESIDENT, AND PAST PRESIDENT OF THE BOARD OF TRUSTEES MEET

AND WITH THE FEEDBACK OBTAINED FROM THE EXECUTIVE COMMITTEE MEETING DRAFT

Name of the organization UNIVERSITY SCHOOL OF NASHVILLE

Employer identification number 23-7424429

THE COMPENSATION AGREEMENT FOR THE DIRECTOR FOR THE UPCOMING ACADEMIC AND FISCAL YEAR. THE PRESIDENT OF THE BOARD INFORMS THE KEY EMPLOYEE AS WELL AS THE FINANCIAL OFFICE OF THE SCHOOL OF THE AMOUNT OF COMPENSATION PACKAGE WHICH COULD INCLUDE ANNUAL COMPENSATION, BONUS AND/OR PAYMENT OF DEFERRED COMPENSATION UNDER SECTION 457 OF THE IRS CODE.

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

THE SCHOOLS BY-LAWS ARE INCLUDED IN EACH EMPLOYEE'S PERSONNEL MANUAL. CONFLICT OF INTEREST SIGNED DISCLOSURE FORMS FOR BOTH MEMBERS OF THE BOARD OF TRUSTEES AND ITS COMMITTEES AS WELL AS EMPLOYEES ARE MAINTAINED IN THE DIRECTOR'S OFFICE. THESE ARE AVAILABLE UPON REQUEST. INTERNAL FINANCIAL STATEMENTS OF THE SCHOOL ARE REGULARLY REVIEWED BY THE FINANCE COMMITTEE OF THE BOARD OF TRUSTEES AS WELL AS THE BOARD OF TRUSTEES AT ITS MEETINGS. AUDITED FINANCIAL STATEMENTS FOR THE FISCAL YEAR ARE REVIEWED BY THE FINANCE COMMITTEE OF THE BOARD AS WELL AS THE BOARD OF TRUSTEES AT ONE OF ITS REGULARLY SCHEDULED MEETINGS. THESE HAVE BEEN PRESENTED TO THE FINANCE COMMITTEE IN DRAFT FORM BY THE AUDIT FIRM CHOSEN TO CONDUCT THE ANNUAL AUDIT PRIOR TO THE FINAL PRESENTATION TO THE BOARD OF DIRECTORS AT ITS MEETING. ANY OF THE SCHOOL'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY DOCUMENTS, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

ROUNDING -1.

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

instructions.

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 ·

OMB No. 1545-1709

If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box		>	. X	
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of t	his form).			
Do not c	omplete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	ly filed Fo	rm 8868.		
	ic filing (e-file) . You can electronically file Form 8868 if					oration	
required	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically fi	le Form 88	368 to request an e	xtension	
of time to	ofile any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for T	ransfers /	Associated With Ce	ertain	
Personal	Benefit Contracts, which must be sent to the IRS in page	er format	(see instructions). For more details of	n the elec	tronic filing of this	form,	
visit www	v.irs.gov/efile and click on e-file for Charities & Nonprofits	S.					
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies nee	eded).			
A corpor	ation required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and o	complete			
Part I on	у				>		
	corporations (including 1120-C filers), partnerships, REN	IICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time		
to file inc	ome tax returns.	Enter file	er's identifying nur	nber			
Type or	Name of exempt organization or other filer, see instru	ictions.		Employer	identification num	oer (EIN) or	
print							
File by the	UNIVERSITY SCHOOL OF NASHV	ILLE			23-742442	<u> 19</u>	
due date for		ee instruc	tions.	Social se	curity number (SSN	1)	
filing your return. See	2000 EDGEHILL AVENUE						
instructions	only, to mit of poor office, state, and Em code. For a re	oreign add	lress, see instructions.				
	NASHVILLE, TN 37212-2198						
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 1	
		1					
Applicat	ion	Return	Application			Return	
Is For		Code	Is For			Code	
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07	
Form 990)-BL	02	Form 1041-A			08	
Form 472	20 (individual)	03	Form 4720 (other than individual)			09	
Form 990)-PF	04	Form 5227			10	
Form 990	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069				
Form 990	O-T (trust other than above)	06	Form 8870			12	
	NORMA MILLER			27212	0100		
	ooks are in the care of 2000 EDGEHILL	AVENU.		3/212	-2198		
•	none No. ► 615-321-8004		Fax No.				
	organization does not have an office or place of busines						
	is for a Group Return, enter the organization's four digit	7					
box 🕨	. If it is for part of the group, check this box				ers the extension is	for.	
1 re	equest an automatic 3-month (6 months for a corporation						
		t organiza	tion return for the organization name	ed above.	The extension		
is 1	or the organization's return for:						
	calendar year or		TITN 20 201E				
•	X tax year beginning JUL 1, 2014	, an	d ending JUN 30, 2015		<u> </u>		
•							
2 If t	he tax year entered in line 1 is for less than 12 months, c	neck reas	on: Initial return I	Final retur	n		
	☐ Change in accounting period	0000					
	his application is for Forms 990-BL, 990-PF, 990-T, 4720		•	Λ			
	nrefundable credits. See instructions.			3a	\$	0.	
	his application is for Forms 990-PF, 990-T, 4720, or 6069				•	0.	
	imated tax payments made. Include any prior year overp			3b	\$	<u> </u>	
	lance due. Subtract line 3b from line 3a. Include your pa				•	0.	
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$		
CHUTION	TO VOID ARE CICIDO TO MAKE AD EJECTRODIC TUDOS WITDORSWAI	TOURECT OF	OU WILL HIS FORM AANA SEE FORM X	4:⊃.>-⊏() at	10 FORD 88/9-FO 1/	n Davinent	