Forms 990 / 990-EZ Return Summary

For calendar year 2017, or tax year beginning 10/01/17 , and ending 09/30/18

81-1702436

NASHVILLE	YOUTH SPOR	TS CLUB,	INC.	81-17024	136
Net Asset / Fund Balance at Beginnir	ng of Year				-108,256
Revenue					
Contributions		67,706			
Program service revenue		496,213			
Investment income		0			
Capital gain / loss					
Fundraising / Gaming:					
Gross revenue					
Direct expenses					
Net income					
Other income		23,126	_		
Total revenue				87,045	
Expenses Drogram condense		COC 740			
Program services Management and general		606,748 29,615			
Fundraising		29,615			
Total expenses			-	36 363	
Excess / (deficit)				<u>36,363</u>	40 210
Linear (donois)					-49,318
Changes					
Net Asset / Fund Balan	ce at End of Year				-157,574
Reconciliation of Reverontal revenue per financial statements less: Unrealized gains Donated services Recoveries Other Plus: Investment expenses Other Total revenue per return	587,045 587,045	Less: Dor Pric Los Oth Plus: Inve Oth	xpenses per nated servi or year adju ses er estment ex er	ustments	nents 636,363
	.	Balance She	et		
Assets	Beginning	Ending	071	Differences	
Assets Liabilities	43,705 151,961	87,9 245,9	9/ <u>1</u>		
Net assets	-108,256	-157,5		40.5	10
1101 00000	100,230		= =	-49,3	018
	Miscellaneous	Information			
Ame	ended return				
	ırn / extended due da	te 02/15	/19		
	re to file penalty	<u> </u>	,		
			,		

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

Department of the Treasury Internal Revenue Service	1	Do not se	end to the IRS. Ker	2017, and ending 9 p for your records. for the latest informat		20 18.	2017
Name of exempt organization						Employer Identificat	ion number
			RTS CLUB,	INC.	18	31-17024	36
	PAMELA WES				23 F T S		The state of the s
	REASURER/						
Part I Type of I	Return and Re	<u>turn Informatio</u>	n (Whole Dolla	rs Only)			
Check the box for the return	n for which you are	using this Form 8	379-EO and enter the	he applicable amount, i	f any, fr	rom the return. I	f you
check the box on line 1a, 2	a, 3a, 4a, or 5a, be	low, and the amour	nt on that line for the	e return being filed with	this for	m was blank th	200
leave line 1b, 2b, 3b, 4b, o	r 5b, whichever is a	applicable, blank (d	o not enter -0-). Bu	t, if you entered -0- on	the retu	ırn, then enter -	0- on
the applicable line below. D	o not complete mo	ore than one line in	Part I.				
1a Form 990 check here	Total r	evenue, if any (For	m 990, Part VIII, co	lumn (A), line 12)		1b	587,045
3a Form 1120-POL check 4a Form 990-PF check her	here b T	otal tax (Form 112	0-POL, line 22)	· · • • • • · · · · • • • · · · · · · ·		3b	
4a Form 990-PF check here	re b Tax b	ased on investme	nt income (Form 9	90-PF, Part VI, line 5)		4b	
5a Form 8868 check here	Balance	Due (Form 8868,	line 3c)			5b	
Under penalties of perjury, I	on and Signate	ire Authorizatio	on of Officer				
organization's 2017 electronia re true, correct, and comple organization's electronic retuto send the organization's retuto send the organization's retuthe transmission, (b) the rea authorize the U.S. Treasury infinancial institution account in return, and the financial institution account in return, and the financial institution account in return, and the processing of involved in the processing of resolve issues related to the electronic return and, if applied	ete. I furner declar urn. I consent to all eturn to the IRS an- ason for any delay i and its designated ndicated in the tex itution to debit the of later than 2 busine f the electronic pay payment. I have s icable, the organiza	e that the amount in low my intermediate d to receive from the n processing the re Financial Agent to I preparation software entry to this account ss days prior to the ment of taxes to receive elected a personal	n Part I above is the e service provider, I e IRS(a) an acknow lurn or refund, and nitiate an electronic e for payment of the I. To revoke a payr payment (settlement eleve confidential intertification number identification number elever confidential intertification number identification number elever confidential intertification number elever confidential intertification number elever confidential elever elever confidential elever elever confidential elever eleve	e amount shown on the ransmiller, or electronic wiedgement of receipt conditions with the date of any reful funds withdrawal (direct organization's federal ment, I must contact the hij date. I also authorized ormation necessary to a refer (PIN) as my singular	copy of return or reasond. If a debit taxes of e U.S. The the fin	f the originator (ERC on for rejection of pplicable, I entry to the wed on this Treasury Financial institution	D) of ial is
Officer's PIN: check one be	ox only						
X I authorize <u>LEE</u>	MACBAY H	AMILTON &	ASSOCIATE	S, Ito enter my PIN	Enter t	436 as my five numbers, but	/ signature
on the organization's being filed with a stat ERO to enter my PIN	te agency(les) regul	aling charities as p	art of the IRS Fed/S	d within this return that State program, I also au	0.0004	of the salues to	ned
As an officer of the or If I have indicated with the IRS Fed/State for	unn uns reium mai	a copy-at-the return	te hoing filed with	ganizalion's lax year 20 a slale agency(ies) reg ent screen.	17 electures	lronically filed re charilies as par	tum. t of
ifficer's signature	\times		7	Data N	01	/30/19	u.
Part III Certifidatio	n)and Auther	itication		Date	<u> </u>	750715	
RO's EFIN/PIN. Enter your	six-digit electronic	filing Identification					An on West and
umber (EFIN) followed by yo	our five-digit self-se	lected PIN.				5718	35854760
						Control of the Contro	ot enter all zeros
certify that the above numeri dicated above. I confirm tha formation for Authorized IRS 80's signature	at I am submitting ti	nis reluth in accord	ance with the regul	dronically filed return for rements of Pub. 4163, f	Moderni	anizotion	
	ERO	Must Retain	This Form — 9	See Instructions			
	Do Not Subi	nit This Form	to the IRS Unio	ss Requested To	D. 0	_	
or Paperwork Reduction A	ct Notice, see bac	k of form.	the into office	oo Nequested 10	DU 3		8879-FO (2017)
	THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY.	TOTAL STREET,				Foo	* OO [M.P.] /00/70

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)

OMB No. 1545-0047

De	partment of the Treasernal Revenue Service	e Go to www.irs.gov/Form990 for instructions and the latest informs	public.	Open to Public Inspection
<u>A</u>	For the 2017	calendar year, or tax year beginning $10/01/17$, and ending $09/30/18$		Parameter 1.5 Pa
B	Check if applicable:	C Name of organization	D Employ	er identification number
_	Address change	NASHVILLE YOUTH SPORTS CLUB, INC.		
	Name change	Doing business as UPWARD STARS NASHVILLE Number and street (or P.O. box if mail is not delivered to street address) Room/su	81-1	702436
	Initial return	9129 CONCORD HUNT CIRCLE	ite E Telepho	ne number
F	Final return/	City or town, state or province, country, and ZIP or foreign postal code	864-	949-5700
	terminated	BRENTWOOD TN 37027		
닏	Amended return	F Name and address of principal officer:	G Gross re	ceipts\$ 588,441
	Application pending	PAMELA WESTBROOKS H(a) Is	s this a group return for	r subordinates Yes X No
		100 MUTTE CHAD DOTAM	vre all subordinates in	cluded? Yes No
		SPARTANBURG SC 29301	If "No," attach a lis	
1	Tax-exempt status:	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	,	(4400
J	Website: ▶ U	PWARDSTARSNASHVILLE ORC	````	61.61
ĸ	Form of organization	110,0	Broup exemption number ation: 2016	
F	Part I Su	mmary		M State of legal domicile: TN
	1 Briefly de	scribe the organization's mission or most significant activities:		
93	SEE	SCHEDULE O	• • • • • • • • • • • • • • • • • • • •	
nar		SCHEDULE O	• • • • • • • • • • • • • • • • • • • •	
Governance		······································	• • • • • • • • • • • • • • • • • • • •	
ගි	2 Check thi	s box If the organization discontinued its operations or disposed of more than 25% of	ite not accore	
-త	3 Number of	of voting members of the governing body (Part VI, line 1a)	ا م ا	3
es	4 Number of	of independent voting members of the governing body (Part VI, line 1b)	1 4 1	3
Σij	5 Total num	hber of individuals employed in calendar year 2017 (Part V, line 2a)	5	0
Activities	l o Loral Hull	ider of volunteers (estimate if necessary)	1 6 1	4
_	7a Total unre	elated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrela	ated business taxable income from Form 990-T, line 34	7a 7b	0
	i	! P	rior Year	Current Year
re	8 Contribution	ons and grants (Part VIII, line 1h)	87,143	67,706
Revenue	9 Program :	service revenue (Part VIII, line 2g)	46,956	496,213
Re	i o mvesuner	it income (Part VIII, column (A), lines 3, 4, and 7d)		0
	11 Other reve	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,130	23,126
	12 Total reve	nue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	138,229	587,045
	13 Grants an	d similar amounts paid (Part IX, column (A), lines 1–3)		0
	14 Benefits p	aid to or for members (Part IX, column (A), line 4)		0
Ses	15 Salaries, o	other compensation, employee benefits (Part IX, column (A), lines 5–10)	34,063	106,692
en	16a Profession	nal fundraising fees (Part IX, column (A), line 11e)		0
Expenses	i birotai iuliu	raising expenses (Part IX, column (D), line 25)	eren) Egypten	Annual State of the Control of the C
	17 Other exp	enses (Part IX, column (A), lines 11a-11d, 11f-24e)	181,659	529,671
	10 Poverne	enses. Add lines 13–17 (must equal Part IX, column (A), line 25)	215,722	636,363
- 등 성		less expenses. Subtract line 18 from line 12	-77,493	-49,318
t Assets o	20 Total asse		of Current Year	End of Year
ASS	21 Total liabil	Hing (Dark V. Burg 200)	43,705 151,961	87,971
Fund	l .		108,256	245,545
P		nature Block	100,236	-157,574
Ur	nder penalties of p	perjury. I declare that I have examined this return, including accompanying schedules and etate and		
tru	ie, correct, and co	implete. Declaration of preparer (other than officer) is based on all information of which preparer has a	and to the best of any knowledge	my knowledge and belief, it is
			, , , , , , , , , , , , , , , , , , , ,	
Sig	n Sig	nature of officer	Date	
Hei	re 📗	PAMELA WESTBROOKS TREASURER/		v
	Тур	ne or print name and title	DECKETAR	<u> </u>
	1	preparer's name Preparer's signature Di	ate Check	if PTIN
Paic	MIGETIA	W. HAMILTON	self-emp	LJ"
-	parer Firm's nam	LEE MACBAY HAMILTON & ASSOCIATES, LLC	Firm's EIN	20-5063807
Use	Only	PO BOX 5476	FIRMS EIN F	20-300380/
_	Firm's addr		Phone no.	864-574-3620
May	the IRS discuss	s this return with the preparer shown above? (see instructions)	FIIORE NO.	X Yes No
For I	Paperwork Redu	ction Act Notice, see the separate instructions.		Form 990 (2017)
שאים				10mm 000 (2017)

m 990 (2017) NASHVILLE YO	OUTH SPORTS CLUB, INC. 8	1-1702436	Page 2
art III Statement of Progra	am Service Accomplishments	–	
Briefly describe the organization's m	contains a response or note to any line	in this Part III	X
ODD COURDITY A			
* * * * * * * * * * * * * * * * * * * *			
	•••••••••••••••••••••••••••••••••••••••	• • • • • • • • • • • • • • • • • • • •	

Did the organization undertake any s	significant program services during the year which	were not listed on the	
prior Form 990 or 990-EZ?	an Schodulo O	word flot listed off the	Yes X No
ii roo, describe triese new services	s on schedule O.		. Lies A NO
Did the organization cease conducting	ng, or make significant changes in how it conducts	s, any program	
services?			Yes X No
ii res, describe these changes on	Schedule O.		
Describe the organization's program	service accomplishments for each of its three large	gest program services, as measured by	
expenses. Section 501(c)(3) and 501	(c)(4) organizations are required to report the am	ount of grants and allocations to others	,
the total expenses, and revenue, if a	ny, for each program service reported.		
(Code:) (Expenses \$	606 -		
WOUATTIE AOUTH SEOI	606,748 including grants of\$ RTS CLUB OPERATES AS AN RY OF JESUS THROUGH SPOR	ORGANIZATION THAT E	496,213) XISTS TO
THLETES. AND THE C	OMMUNITIES THEY SERVE TO	TS. WE BRING CHRIS	TIAN LEADE
ANGUAGE OF SPORTS	STRENGTHENING YOUNG ATH	FTEC BY DETERMO THE	UNIVERSAL
THE RODY AND SOUP.	AS A NON-DENOMINATIONA	CHRISTIAN SDODTS	MINITONDY
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PORTS CLUB PROVIDES	S VALUABLE RESOURCES THAT	AID IN PLANNING	TRATNITNIC
VECOTING LIVET CTW	OS, ORGANIZED, AND DETAIL	IND SPORTS OFFEDINGS	2 NIX CUITTI
	CCOMPLECITED THE MEGATOR	· · · · · · · · · · · · · · · · · · ·	YATALIY L
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Checklist of Required Schedules

1	Is the organization described in a star FOA/ VOV		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A			
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	. 1	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	X	
	candidates for public office? If "Von" complete Cabadula O. D. J. J.	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(b)	 		^
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	is the organization a section so i(c)(4), so i(c)(5), or so i(c)(6) organization that receives membership dues.			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,		1	
_	Part III	5		Х
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		ļ	
-	"Yes," complete Schedule D, Part I	6		x
7	bid the digalization receive or floid a conservation easement, including easements to preserve open space			
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
٥	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III			
9	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	8		X
-	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	dobt negotiation convices 2 15 "Ver"	1 _		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	9		<u>X</u>
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	40		37
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		X
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	1697:-2461	Physical	
	complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	1,14		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11ь		Х
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Bit the diganization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
12a	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		X
	Schedule D, Parts XI and XII			
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	12a	X	
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	401		37
13		12b		$\frac{x}{x}$
14a	Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		$\frac{\Lambda}{X}$
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	144		
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	1	Х
15	Did the diganization report on Part IX, column (A), line 3, more than \$5 (10) of grants or other assistance to or			
40	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Fait IA, column (A), line 3. More than \$5 000 of addredate grants or other			
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	bid the organization report a total of more triall \$15,000 of expenses for professional fundralising convices on		Γ	
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundamental accounts.	17		<u>X</u> _
	Det VIII lines and 0.0 15 16 17 17 17 1000 total or fundraising event gross income and contributions on			
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		<u>X</u>
_	If "Yes," complete Schedule G. Part III	1.5		17
	If "Yes," complete Schedule G, Part III	19		<u>X</u>

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I

or IV, and Part V, line 1

19? Note. All Form 990 filers are required to complete Schedule O.

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

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,

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and

controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2

Checklist of Required Schedules (continued)

Yes No 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 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 X 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III X 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J X 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 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 X 25a 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 X 25b 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 X 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 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 X 27 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 X 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31

> X 36 37 X

35b

32

X

X

X

X

32

33

34

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38

For	m 990 (2017) NASHVILLE YOUTH SPORTS CLUB, INC. 81-1702436			Page
∴H.	art 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		<u></u>	<u>. L</u>
1a	Enter the number reported in Box 2 of Form 1000 February 2 is not 1000 february 2.	20000000	Yes	No
b	Ta 41		1 1000	
c	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	-		
	reportable gaming (gambling) winnings to prize winners?		- Paran	6. Jan. 1
2a		1c		81 53 564
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0	38165		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	\$1886832		1000
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	WAY:	
3a	Did the organization have unrelated husiness gross income of \$1,000 or more during the year?	2-		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in School of O	3a 3b	 	 ^
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		+-
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ►	100		1
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	ir "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	boes the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	if "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		10235	50000
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	130200		
_	and services provided to the payor?	7a		
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 was			
d	required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7d	7c		
e	Did the organization receive any funds directly or indirectly as indirec			5003
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e		L
g g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g		<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h	2250 May -	Section 1
	sponsoring organization have excess business holdings at any time during the year?	1000	4556	S88600
9	Sponsoring organizations maintaining donor advised funds.	8	0.000	74803515
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	YOR DOLL	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 301(c)(7) organizations. Enter:	30		(instance)
а	Initiation fees and capital contributions included on Part VIII, line 12			l de la companya de l
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter:			19005437 19005437
а	Gross income from members or shareholders		7000	
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	·	
, D	If Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more, than one state?	13a		
h	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
С	the organization is licensed to issue qualified health plans Enter the amount of resource on band		200000	
14a	Enter the amount of reserves on hand Did the organization receive any payments for indeed tapping continue the traverse.	32300		Vingalia.
b	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		<u>X</u>
DAA	provide an explanation in Scredule O	14b	000	(2017)

For	m 990 (2017) NASHVILLE YOUTH SPORTS CLUB, INC. 81-1702436		F	Page 6
·P	Governance, Management, and Disclosure For each "Yes" response to line 8a, 8h, or 10h below,	and	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule C Check if Schedule O contains a response or note to any line in this Part VI	. See	instr	
Se	ction A. Governing Body and Management			_ X
			Yes	No
1a	1 13 1 3	0.90525	100	
	If there are material differences in voting rights among members of the governing body, or			Mary .
	if the governing body delegated broad authority to an executive committee or similar		Process of the second	i i
	committee, explain in Schedule O.	100000		A.
b	Enter the number of voting members included in line 1a, above, who are independent 1b 3	10000000	War.	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
2	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct	ļ.		
4	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
6	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
7a	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint	6_		X
	one or more manchine of the manufacture of the	_		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a	<u> </u>	<u>X</u>
	stockholders, or persons other than the governing body?	7b		v
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow	ind	TOTAL STATE	X
а	The governing body?	8a	Х) persitain
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 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 Reven-	ле С	ode.)	
102	Did the organization have level shorters to the second of		Yes	No
b	Did the organization have local chapters, branches, or affiliates?	10a		<u>X</u>
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
11a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	10b		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	X	-905-200-00
12a	Did the organization have a written conflict of interest policy? If "No" go to line 13	40		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a		<u>X</u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b		
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			96504
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		3.7807944 3.48044	
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	officers of key employees of the organization	15b	X	
46-	if Yes to line 15a or 15b, describe the process in Schedule O (see instructions).	100 E	edeku ed	leterate Leterate
102	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	Agre (A)	Line St.	Lawai
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a	W. W	<u>X</u>
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		292.575	
	organization's exempt status with respect to such arrangements?		GRASI G	4型的(4)
Sec	tion C. Disclosure	16b		
17	List the states with which a copy of this Form 990 is required to be filed ▶ TN			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
20	financial statements available to the public during the tax year.			
20 1274	State the name, address, and telephone number of the person who possesses the organization's books and records: MELA WESTBROOKS 198 WHITE STAR POINT			
	A DWA MDUDO			700
	ARTANBURG SC 29301 864-	949	1-57	/00

Form 990 (2017) NASHVILL	E YOUTH	S	PO	RTS	<u>s</u> (CLU	В,	INC. 81-170	2436	Pac	qe 7
Part VII Compensation Independent	n of Officers	s, C	ire	cto	s,	Trus	tee	es, Key Employees,	Highest Compens	ated Employees,	and
			a ra	esni	าทร	e or	no	te to any line in this	Dort VIII	1	
Section A. Officers, Director	rs, Trustees, K	(ey	<u>a n</u> Emp	love	es,	and I	Hia	hest Compensated Emp	Part VII		Ш.
1a Complete this table for all pers organization's tax year.	sons required to	be	liste	d. R	epor	t com	per	sation for the calendar ye	ear ending with or within t		
 List all of the organization's compensation. Enter -0- in column 	current officers	s, dir	ecto	rs, t	ruste	es (w	vhet	her individuals or organiz	ations), regardless of am	ount of	
List all of the organization's	current key em	ר) ו Volan	по ees.	con if a	ıpen nv. S	satior See ir	1 Wa 1stri	as paid. Ictions for definition of "ke	av employoo "		
 List the organization's five c who received reportable compensa organization and any related orga 	urrent highest ation (Box 5 of	com	nenc	ate	l am	nlovo	00	Other then on officer div		loyee) e	
 List all of the organization's: 	former officers	. kev	em	plov	ees	and I	hiat	est compensated employ	and who received many 4	L	
wroo,ooo or reportable compensa	auon nom me o	ırqar	ıızatı	on a	ına a	anv r ϵ	etale	ed organizations			
 List all of the organization's organization, more than \$10,000 c 	Ji repultable co	HIDE	แระเ	ion i	rom	ine c	าเกล	nization and any related .	organizatione	f the	
List persons in the following order compensated employees; and form	: individual trust	tees	or c	lirec	tors;	instit	utio	nal trustees; officers; key	employees; highest		
Check this box if neither the o			rela	ted i	orga	nizatio	n (compensated any current	officer director as tweet-	_	
(A)	(B)	T			(C)	· made		(D)	(E)	T	
Name and Title	Average hours per	(4	o not	Po	sition	than o	ne	Reportable	Reportable	(F) Estimated	
	week (list any	bo	x, uni	ess p	erson	is both or/truste	an	compensation from	compensation from related	amount of other	
	hours for	1					- /	the organization	organizations (W-2/1099-MISC)	compensation from the	
	related organizations	or director	Institutional	Officer	Key en	nploye	Former	(W-2/1099-MISC)		organization and related	
	below dotted line)	of a	_		employee	e com				organizations	
		trustee	trustee		l &	Highest compensated employee				į	
(1) NATHAN HOLM		-	"		-	e e					
CHAIRMAN	2.00	x						0	0		^
(2) BILL PALMER					T			0			0
DOADD AGREED	2.00	١									
BOARD MEMBER (3) PAMELA WESTBROO	50.00	X	_		-	\vdash		0	0		0
(-)	2.00			ĺ						I	
TREASURER/SECRETARY	50.00	X		X				0	0	ı	0
(4) LANCE AKRIDGE	E0 00	-									
EXECUTIVE DIRECTOR	50.00			х				106,692			_
(5)	0.00				-			100,092	0		0
					:						
(6)		-					_				
(0)											
(7)											
	,						١				
(8)						+	\dashv				
(9)						_					
(3)											
10)											
•••••											
11)		\dashv		_	-	\dashv	\dashv				
AA											
~ ^											

Form **990** (2017)

h , rai	Page 8
(F) Estimated amount of other mpensatior from the rganization and related ganizations	
	•
Yes	No
3	X
5	X

For P	m 990 (20 art VII	017) NASHVILL Section A. Office	E YOUTH	SI	POF	RTS Ke	v Er	LU	B,	INC. 81-170	02436 sated Employees (continued)		Page
(A) Name and title		(B) Average hours per week (list any bours for				than	one h an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation			
			related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organization	d
								ä					
		• • • • • • • • • • • • • • • • • • • •											
	• • • • • • • • • • • • • • • • • • • •												
1b	Sub-tota	I							•	106,692			
c d 2	Total fro Total (ad Total nu	m continuation she	ets to Part VII,	Sec	ted t	Α.		••	▶ • abo	106,692 ove) who received more	than \$100,000 of		
3	Did the o	organization list any f e on line 1a? <i>If "Yes</i> , ndividual listed on lin	ormer officer, d " complete Sche	irecte	or, o	o <i>r su</i> ortab	ich i le co	ndivi	idual ensat	ployee, or highest compe ion and other compensal complete Schedule J fo	tion from the	3 Ye	s No
5	Did any for service	person listed on line ses rendered to the c	1a receive or acorganization? If '	CCTU	 e cor	 mpe	 nsati	on f	rom :	any unrelated organization		4 5	X
Sect 1	Complete	dependent Contract this table for your fation from the organi	ive highest com	pens	sated	l ind	eper	nden the	t cor	ntractors that received mo	ore than \$100,000 of within the organization's tax yea		
		Name and	(A) business address							Descripti	(B)	(C) Compen	sation
2	Total nun	nber of independent	contractors (incl	udin	g bu	t noi	t limi	ted	to the	ose listed above) who			
1ΔΔ	received	more than \$100,000	of compensatio	n fro	om th	ne o	rgan	izatio	on 🕨	· ·	0		

Form 990 (2017) NASHVILLE YOUTH SPORTS CLUB, INC. 81-1702436
Part VIII Statement of Revenue

Page 9

	Check if Schedule			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
1a	Federated campaigns	1a		250 200 200	2652		512-514
ŀ	Membership dues	1b		April 10 Conference of the Con	1 67 1 1 1 1 1	170 C	E 200 C 200 C
(Fundraising events	1c		50,000 000 000 000 000 000 000 000 000 0	100 mg		
(d Related organizations	1d		and the second	100 CH 10		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
6	Government grants (contributions)	1e		10 Oct 10	entide contraction		
'	f All other contributions, gifts, grants, and similar amounts not included above			35 <u>10 1 10 10 10 10 10 10 10 10 10 10 10 10</u>	500.00 ± 2019 000		
			67,706	40	10 mm	3000 2000 3000 4	
2	Noncash contributions included in lines 1	a-1f: \$	· · · · · · · · · · · · · · · · · · ·	67 700	(E)	100 miles	Part of the second of the second
	1 Total. Add lines 1a-1f			67,706		000 FE 200 SELECTION OF SELECTI	4 17 18 18 18 18 18 18 18 18 18 18 18 18 18
2a	LEAGUE/TEAMS		Busn. Code	260 077	260 077	(Trick Participation Computer	20000 2000 2000
b	TOTIENAMENT	• • • • • • • • • • • • • • • • • • • •		368,077 38,846	368,077	·	
c	CAMPS			34,419			
d	I DEVELOPMENTAT			33,231	33,231		
е				21,640	21,640		
f	All other program service reve	enue			21,040		
	Total. Add lines 2a-2f			496,213	(4) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	Language Commission	Control of the Control
3	and the contracting	dividends,	interest,			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	and other similar amounts)		>				
4	Income from investment of tax	x-exempt bo	ond proceeds				
5	Royalties						
_	(i) Real		(ii) Personal		0.000m21a (0.6425)00 (0.6425)		15 - 15 - 15 - 15 - 15 - 15 - 15 - 15 -
	Gross rents 21,	612		2211 TANK TO SERVE COME.	000 (000 (000 (000 (000 (000 (000 (000		A 1987
	Less: rental exps. Rental inc. or (loss) 21,0	610			2000 C 100	1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1,0506° (550 - 10)
				5 945 Shifts		h and the second	100
7a	Net rental income or (loss) Gross amount from (i) Securities	······	(ii) Other	21,612		ya Maraka Maraka Maraka Nasara Maraka Ma	21,61
	sales of assets other than inventory		(ii) Other			1984 TO 1984 T	
b	Less: cost or other				LONG TO COMPANY	A SECTION OF THE SECT	100000000000000000000000000000000000000
	basis & sales exps	1				14 P	1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1
С	Gain or (loss)				ACCOUNT OF THE PROPERTY OF THE		7 Per 3 20 1 10 10
d	Net gain or (loss)			reary to see a market from the field to		-2.43	
8a	Gross income from fundraising eve	nts		ALCONOMIC CONTRACTOR	CARACTER TO THE STATE OF THE ST	Principle Control	
	(not including\$			3524 WHO - 1000	14	(2) (1) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	5 (10) (10) (10) (10) (10) (10) (10) (10)
	of contributions reported on line 1c).		(Mr. 1974) - 51 102			NAME OF THE PERSON OF THE PERS
	See Part IV, line 18	. a		102572 34400 		er die Stellen	
	Less: direct expenses			100 (100 m) (100 m)	2070	SG I all other	
	Net income or (loss) from fund		nts ▶			The state of the s	 London Control (1997) Acrost Artiful Control (1997) Control (1997)
9a	Gross income from gaming activitie				A CALLED A CALLED	and a challength and	100 100 100 100 100 100 100 100 100 100
L	See Part IV, line 19	. a		2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -		200	- 1985 E 1985 1989 1
	Less: direct expenses						
	Net income or (loss) from gam	ing activitie	s 🕨	3/0000000000000000000000000000000000000	MORE TO A CONTROL OF THE OWNER.	2 (A. C. 1984), V.	
ıva	Gross sales of inventory, less returns and allowances		2 010	Seesa 11 125 Seesa 1			No. of the control of
h	Less: cost of goods sold	a	2,910 1,396	CONT. 1004.7	or Survey (St.	Could be a second of the country of	(200) 10 (200) 10 (200) 10 (200) 10 (200)
	Net income or (loss) from sale			1,514	1 614		
	Miscellaneous Revenue	- CI IIIVGIRU	Busn. Code	+,314	1,514		200200
11a						event contents	
b	* * * * * * * * * * * * * * * * * * * *						
C	* * * * * * * * * * * * * * * * * * * *						
d	All other revenue						
е	Total. Add lines 11a-11d		>		estable to the second	Avisa robitati k	2471 3156475
	Total revenue. See instruction		· • [587,045	497,727	0	21,612

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 res		In this Part IX	<u></u>	X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			200200	
	and domestic governments. See Part IV, line 21			10 0000000 - 0000000 - 0000000 - 00000000	Committee of the commit
2	The same same to domitorio		****	TENER STATE OF THE PARTY OF THE	
_	individuals. See Part IV, line 22				
3	and the same and t			enter a service de la constant de la	3500 CH 122 CH 132
	organizations, foreign governments, and foreign			The Control of the Co	
	individuals. See Part IV, lines 15 and 16			Section Collection and Collection	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	106 600			
c	trustees, and key employees	106,692	96,023	10,669	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)				
8	Other salaries and wages				
a	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Payroll taxes Fees for services (non-employees):				
a					
b					
c	Legal	9,770		A 550	
q	l obbuing	3,110		9,770	
e	Professional fundraising services. See Part IV, line 17	7	2-1-23 (March 1)		
f					
g	1				
Ū	(A) amount, list line 11g expenses on Schedule O.)	141,747	137,761	3,986	
12	Advertising and promotion	2,108	2,108	3,900	
13	Office expenses		2,100		
14	Information technology				
15	Royalties	35,510	35,510		
16	Occupancy	211,695	211,695		
17	Travel	1,693	1,693		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,976	777	4,199	
20	Interest			-,200	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	5,782	5,477	305	
24	Other expenses. Itemize expenses not covered		100 market 100 mm	Teles de Calledo.	100 P
	above (List miscellaneous expenses in line 24e. If		A STATE OF THE STA		
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	mare a series		The second secon	
a	COGS	107,580	107,580		
b	SMALL EQUIPMENT	6,067	6,067		
C	SUPPLIES	2,743	2,057	686	
ď	All and				
е 25	All other expenses	606.05			
25	Total functional expenses. Add lines 1 through 24e	636,363	606,748	29,615	0
26	come costs. Complete this line only if the				
26	organization reported in column (B) joint costs	l		1	
26	organization reported in column (B) joint costs from a combined educational campaign and				
26	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)			į	

	art	Check if Schedule O contains a response or note to any line in this Part X			
		2 - Supplied 5. Hold to drift mild I art A	(A) Beginning of year	Ť	(B)
	1	Cash—non-interest bearing	22,708	1	End of year
	2	Savings and temporary cash investments	22,700	2	66,700
ł	3	Pledges and grants receivable, net			
- 1	4	Accounts receivable, net	20,997	4	21 271
	5	Loans and other receivables from current and former officers, directors,	20,331	889	21,271
- 1		trustees, key employees, and highest compensated employees.	新 有 名 (1986年 1987年)		
		Complete Dort II of Cahadula I		5	**************************************
I	6	Loans and other receivables from other disqualified persons (as defined under section	and the second second) 3	
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers an	d sections		
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary	Y 18th and the second of the s		
<u>ν</u>		organizations (see instructions). Complete Part II of Schedule L			The state of the s
Assets	7	Notes and loans receivable, net		7	
۴	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or	TO SECURE	9	WEST CONTROL OF THE C
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		40-	
- [-	11	Investments—publicly traded securities		10c	
	12	Investments—other securities. See Part IV, line 11		11	
.	13	Investments—program-related. See Part IV, line 11		12	
.	14	Intangible assets		13	
	15	Other assets. See Part IV, line 11		14	
-	16	Total assets. Add lines 1 through 15 (must equal line 34)	43,705	15	07 071
1	17	Accounts payable and accrued expenses	85,558	16	87,971
- -	18	Grants payable	83,338	17	220,196
1	19	Deferred revenue	66,403	18	0E 240
	20	Tax-exempt bond liabilities	00,403	19	25,349
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		20	
y 2	22	Loans and other payables to current and former officers, directors,	CONTROL TO A PROPERTY OF THE P	21	84025 2007 2007 200 Epitember 1990 Epitember 1990 Epitember 1990 Epitember 1990 Epitember 1990 Epitember 1990
Liabilities		trustees, key employees, highest compensated employees, and			
i <u>ā</u>		diamontification and the Country of	1000 A 2 A 100	444	
1 2	23	Secured mortgages and notes payable to unrelated third parties		22	
2	24	Unsecured notes and loans payable to unrelated third parties		23	
2	25	Other liabilities (including federal income tax, payables to related third		24	
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	•
2	26	Total liabilities. Add lines 17 through 25	151,961	25 26	245,545
sə		Organizations that follow SFAS 117 (ASC 958), check here ▶X and	131,301	20	243,343
()		complete lines 27 through 20, and lines 22 and 24	100 ME		
Fund Balan	27	Unrestricted net assets	-108,256	27	_157 574
<u>m</u> 2	28	Temporarily restricted net assets	100,230	27 28	-157,574
E 2	29	Permanently restricted net assets			
ᄄ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and		29	ender - Total Control
ğ		complete lines 30 through 34.	000 000 000 000 000 000 000 000 000 00		
Net Assets	30	Capital stock or trust principal, or current funds		30	Arabida Taraba Santa Santa (Inc.) (1992)
ξ 3	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
<u>ಕ</u> 3	32	Retained earnings, endowment, accumulated income, or other funds			
		Total net assets or fund balances	-108,256	32	_157 574
3	34	Total liabilities and net assets/fund balances	43,705	33 34	<u>-157,574</u>
			23,703	54	87,971

87,971 Form 990 (2017)

For	m 990 (2017) NASHVILLE YOUTH SPORTS CLUB, INC. 81-1702436		Pa	nge 12
P	art XIII Reconciliation of Net Assets			.go
	Check if Schedule O contains a response or note to any line in this Part XI			\Box
1	rotal revenue (must egual Part VIII, column (A), line 12)	5	87.	045
2	rotar expenses (must equal Part IX, column (A), line 25)			363
3	revenue less expenses, subtract line 2 from line 1			318
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	-10	08,	256
5	Net unrealized gains (losses) on investments			
6	borrated services and use of radiffiles			
7	Investment expenses 7			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain in Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B)) 10	-15	57	574
P.	art XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
				No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	40/10/09/20	200000	1000000
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	- 0.00030		
	Schedule O.			
28	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	x	9,486,60,107
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	THERE		\$5505X
	reviewed on a separate basis, consolidated basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis	4576		
b	Were the organization's financial statements audited by an independent accountant?	2b	234.40	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	1000	STATES	
	separate basis, consolidated basis, or both:	3059		
	Separate basis Consolidated basis Both consolidated and separate basis	iş, şer		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	-E-1005000	(Meyassay)	[Stream]
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in	20	STATE OF	
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	169/6999	1909(5)60	, istorije:
	the Single Audit Act and OMB Circular A-1332	2-		v
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	3a		X
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
	2		000	
		Form	, 99U	(2017)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Vam	of th	ne organization	NASHVILLE Y	OUTH SPORTS CI	ר מונ.	rnc		mployer identification n	umber
P	art	l Rea	son for Public Charit	ty Status (All organizat	tions mu	st compl	ete this nart)	11-1702436	
The	orga	anization is n	ot a private foundation beca	ause it is: (For lines 1 throug	h 12. chec	k only one	hox)	Jee manuchons	
1		A church, c	convention of churches, or a	association of churches desc	ribed in se	ection 170	(b)(1)(A)(i).		
2		A school de	escribed in section 170(b)((1)(A)(ii). (Attach Schedule E	(Form 99	0 or 990-E	Z).)		
3		A hospital of	or a cooperative hospital se	ervice organization described	in section	n 170(b)(1)	(A)(iii).		
4		A medical r	esearch organization opera	ted in conjunction with a hos	spital desc	ribed in se	ction 170(b)(1)(A)	(iii). Enter the hose	ital's name
		city, and sta	ate:						narro,
5	Ш	An organiza	ation operated for the benef	it of a college or university o	wned or o	perated by	a governmental u	nit described in	
_		section 17	'0(b)(1)(A)(iv). (Complete P	art II.)					
6	Н	A federal, s	tate, or local government o	r governmental unit describe	d in secti	on 170(b)(1)(A)(v).		
7		described in	n section 170(b)(1)(A)(vi).			governme	ntal unit or from th	e general public	
8	Ц	A communit	ty trust described in section	n 170(b)(1)(A)(vi). (Complete	e Part II.)				
9		An agricultu or university university:	ral research organization d or a non-land grant colleg-	lescribed in section 170(b)(e of agriculture (see instruction	1)(A)(ix) o ons). Ente	perated in r the name	conjunction with a , city, and state of	land-grant college the college or	
10	X	An organiza receipts fror support fron	n activities related to its exe n gross investment income	(1) more than 33 1/3% of it empt functions—subject to ce and unrelated business taxa 30, 1975. See section 509	ertain exce ble incom	ptions, and e (less sec	(2) no more than	33 1/3% of ite	
11	П	An organiza	tion organized and operate	d exclusively to test for publi	c safety S	impiete Par	t III.) n 500/a\/4\		
12	П	An organiza	tion organized and operated	d exclusively for the benefit of	of to perfo	rm the fund	n 509(a)(4).	a out the numeroes	
	L	of one or m	ore publicly supported orga	nizations described in section	n 509/a\/	1) or section	n 509(a)(2) Sec.	coction E00/a\/2\	
	а	Type I	OX IN lines 12a through 12d A supporting organization of	I that describes the type of soperated, supervised, or cont	supporting	organizatio	n and complete lin	es 12e, 12f, and 12	g.
	_	the supp	ported organization(s) the po	ower to regularly appoint or e complete Part IV, Sections	elect a ma	iority of the	directors or truste	typically by giving es of the	
	b	Type II.	A supporting organization s	supervised or controlled in coorting organization vested in	onnection	with its sur	oported organizatio	n(s), by having	
		organiza	tion(s). You must complet	te Part IV, Sections A and	C.	pordono tr	at control of mana	ige the supported	
	С	Type III its supp	functionally integrated. A priced organization(s) (see i	supporting organization oper instructions). You must com	erated in c	onnection v	with, and functiona	lly integrated with,	
	d	Type III	non-functionally integrat	ed. A supporting organization he organization generally mu	n operated	l in connec	tion with its suppo	rted organization(s)	
		requirem	ient (see instructions). You	⊨must complete Part IV, Se	ctions A	and D, and	l Part V.		
	е	Check th	nis box if the organization re	eceived a written determination	on from the	RS that i	tis a Type I Type	II, Type iII	
	£	TUNCUONE	any integrated, or Type III r	non-functionally integrated su	apporting o	organization).	,	
			mber of supported organization about	ationsthe supported organization(
(i)		of supported	(ii) EIN	·				<u> </u>	
(1)		nization	(II) ENV	(iii) Type of organization (described on lines 1–10		organization our governing	(v) Amount of mon support (see	, , , , , , , , , , , , , , , , , , , ,	Amount of
	`			above (see instructions))		ment?	instructions)		support (see structions)
					Yes	No			·
A)									
B)						ļļ.			
13)									
C)									
D)									
E)									
			V-Complete party and a result of the complete section						
otal			and production of the second o	200 - 100 -		3136533			

Schedule A (Form 990 or 990-EZ) 2017

NASHVILLE YOUTH SPORTS CLUB, INC. 81-1702436 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2013 (c) 2015 (b) 2014 (d) 2016 (e) 2017 (f) Total Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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, etc. (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2016 Schedule A, Part II, line 14 15 % 33 1/3% support test-2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization 33 1/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions _____

Schedule A (Form 990 or 990-EZ) 2017

Part III

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II

_	If the organization fails t	to qualify unde	er the tests list	ed below, plea	se complete Pa	art II.)	under Part II.
	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership						
	fees received. (Do not include any "unusual grants.")				87,143	67,706	154,849
2	Gross receipts from admissions, merchandise sold or services performed, or facilities	:					
	furnished in any activity that is related to the	1			· .		
	organization's tax-exempt purpose				47,006	499,123	546,129
3	Gross receipts from activities that are not an unrelated trade or business under section 513	;					
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to the			ĺ		1	
	organization without charge						
6	Total. Add lines 1 through 5				134,149	566,829	700,978
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						,
b							
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b	2.74.04.00000000000000000000000000000000					
8	Public support. (Subtract line 7c from	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10/54/504 E		ACCURATION OF THE RESERVE OF THE RES		
<u></u>	line 6.)		a come a	00100	and the second second second	5 (1885)	700,978
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6				134,149	566,829	700,978
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.				5 500	01.610	
b					5,583	21,612	27,195
	section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b				5,583	21,612	27,195
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)				139,732	588,441	700 170
14	First five years. If the Form 990 is for the	he organization's	first second third	fourth or fifth tax	Vear as a section	500,441	728,173
	organization, check this box and stop he	ere			·····		▶ X
Sec	tion C. Computation of Public		entage			<u></u>	
15	Public support percentage for 2017 (line	8. column (f) divi	ded by line 13, col	lumn (fl)		15	0/
16	Public support percentage from 2016 Sci	hedule A. Part III	. line 15		• • • • • • • • • • • • • • • • • • • •	15	<u>%</u>
Sec	tion D. Computation of Investm	ent Income	Percentage		*****************	16	%
7	Investment income percentage for 2017	(line 10c. column	(f) divided by line	13 column (f))		17	0/
8	Investment income percentage from 201	6 Schedule A. P.	art III line 17	10, 65141111 (1)	• • • • • • • • • • • • • • • • • • • •		<u>%</u>
9a	33 1/3% support tests—2017. If the org	ranization did not	check the boy on	ling 14 and line 4	5 in more than 22 r	1/20/ 18	%
-	17 is not more than 33 1/3%, check this	hox and stop he	re The organization	mic i n , aliu iiie 1	o is more than 33.1	1/3%, and line	, [
b	33 1/3% support tests—2016. If the org	anization did not	chack a hov on lin	ni qualines as a p	outline 10 in in-	rganization	▶ 凵
-	line 18 is not more than 33 1/3%, check	this how and eta-	here The erges	zation qualifies	and line to is more	ınan 33 1/3%, and	, L
20	Private foundation. If the organization of	tid not chack a b	ov on line 44 40-	or 10b charles as	a publicly supporte	ed organization	▶ -
	Touridation it the Organization C	and HOL CHECK & DO	JA OH IIIIE 14, 198,	or 190, check this	s pox and see instru	actions	▶ ∐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 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.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If "Yes," answer 10b below.
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Ye	es	No
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Sche Pa	dule A (Form 990 or 990-EZ) 2017 NASHVILLE YOUTH SPORTS CLUB, INC. 81-170 ort IV Supporting Organizations (continued)	2436		Page 5
	Capporting Organizations (continued)			T
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
а				
	below, the governing body of a supported organization?	11a		a determinati
b	,	11b		<u> </u>
	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	····	
Sec	tion B. Type I Supporting Organizations			<u></u>
4			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	10000		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	.0000		mesth.
2	Did the organization operate for the benefit of any supported organization other than the supported	1	gadonianos	14-14-15-01-01
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	45.556		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	12.00		
	supervised, or controlled the supporting organization.	2		5,500mm
Sect	ion C. Type II Supporting Organizations			L
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	5.2.788.9		13.50000001
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			20000994455 - 2000099445
	or management of the supporting organization was vested in the same persons that controlled or managed	4Em2(4)		10000000000000000000000000000000000000
Soci	the supported organization(s).	1		
3661	ion D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	100,800,000	Yes	No
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	5000		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	105		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	ALCOHOL:		TOWERS.
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	1		NATURAL STATE
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			2016
	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			500 COCOVI 91
	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	assessing the	
	ion E. Type III Functionally-Integrated Supporting Organizations	- <u> </u>		-
1_	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see inst	tructions).		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (so	e instructio	ns).	
2 /	Activities Test. Answer (a) and (b) below.	Г	· ·	
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	30.55550	Yes	No
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			44
	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		ny agilly general
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	70000	9000	52000000
	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		200 (A)	
	activities but for the organization's involvement.	2b	-constitute (CD)	
3	Parent of Supported Organizations. Answer (a) and (b) below.			775 1
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		410000	
	trustees of each of the supported organizations? Provide details in Part VI.	3a	-,,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-	, reconstitute (A)
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			Service .
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2017 NASHVILLE YOUTH SPORTS CT	LUB,	INC. 81-1702	436 Page 6
The in item and integrated 303(a)(3) 3upporting	g Organ	izations	
	t on Nov.	20, 1970 (explain in Part	VI).See
instructions. All other Type III non-functionally integrated supporting organization	ns must c	omplete Sections A throu	ugh E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see	9000000		
instructions for short tax year or assets held for part of year):	1000000		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			English and the second second
factors (explain in detail in Part VI):	3000		
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,	1-1		
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		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	T - 200 (12)	
2 Enter 85% of line 1.	2	20,700 (17,500) 21 22 23 24 25 26 27 27 27 27 27 27 27 27 27 27	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	A TOTAL CONTROL OF THE CONTROL OF TH	
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5	To Superhouse 2 4 22	
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-functionally integ	rated Tvn	e III supporting organizat	ion (see
instructions)	,	sepporting organizat	ion (ace

Schedule A (Form 990 or 990-EZ) 2017

100	t V Type III Non-Functionally Integrated 509(a)	SPORTS CLUB,	INC. 81-1702	2436 Page
	rt V Type III Non-Functionally Integrated 509(a)(tion D - Distributions	3) Supporting Orga	nizations (continued)
1				Current Year
2	Amounts paid to supported organizations to accomplish exempt parameters and to perform activity that directly furthers exempt purp	urposes		
-	organizations, in excess of income from activity	oses of supported		
3	Administrative expenses paid to accomplish exempt purposes of			
4	Amounts paid to acquire exempt-use assets	supported organizations		
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 organizations	anization is responsive		
	(provide details in Part VI). See instructions.	ariization is responsive		
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
	·		Pre-2017	Amount for 2017
1	Distributable amount for 2017 from Section C, line 6	200 (150 A) 200 (150 A) 200 (150 A)	-4	Amount for 2017
2	Underdistributions, if any, for years prior to 2017	TOWNS TO STATE OF THE STATE OF		e majorio de la composición del composición de la composición de la composición de la composición de la composición del composición de la
	(reasonable cause required-explain in Part VI). See	CONT. 1990.		10.40 (1975)
	instructions.			
3	Excess distributions carryover, if any, to 2017:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	200 (200 (200 (200 (200 (200 (200 (200
a L			2	47haga - 17
	From 2013	10 02 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1000 - 1000 Ph. 1000	Spale Section (Section)
	From 2014	2000 m 20	98612 2007 2 3 8072 c	(15 1 (2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	Fram 2010	Could be appropriately a state of	(3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	1,000 200 000 000 0000
	Total of lines 3a through e			
	Applied to underdistributions of prior years		MANUAL STREET,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Applied to 2017 distributable amount	The Control of the Co		The second of th
	Carryover from 2012 not applied (see instructions)	668 A C C C C C C C C C C C C C C C C C C		
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			and the second s
4	Distributions for 2017 from		A STATE OF THE STA	Control of the Contro
	Section D, line 7: \$	Epister 200 (200 (200 (200 (200 (200 (200 (200	a careful and an analysis	
а	Applied to underdistributions of prior years	1010005	200 CO 100 CO	2 Brown - 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	Applied to 2017 distributable amount	4 1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.		X. The standard of the standar
	Remainder, Subtract lines 4a and 4b from 4.		2.0 (1845) 2.0 (1945)	
5	Remaining underdistributions for years prior to 2017, if			- specialist control (2000)
	any. Subtract lines 3g and 4a from line 2. For result	100 CONT.		
	greater than zero, explain in Part VI. See instructions.	Approximate the second		
6	Remaining underdistributions for 2017. Subtract lines 3h			Comment of
	and 4b from line 1. For result greater than zero, explain in	0.75 (2.77) 0.47 (2.77)	1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945	
	Part VI. See instructions.		445 T	
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c.			A CONTRACTOR OF THE STATE OF TH
	Breakdown of line 7:	and the second s		700 to 1
	Excess from 2013			and a property and are
	Excess from 2014	(1) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	metric —	130 (4945) (1961)
	Excess from 2015	Marin Company	Control Contro	ANALY CONTRACTOR
	Excess from 2016	Comments Comments of the Comme		
е	Excess from 2017			V576940250507 #66223050655505049466235050

Schedule A (Fa	orm 990 or 990-EZ) 2017	NASHVILLE	OUTH SE	PORTS CT	IIB TNC	91-1702426	
Part VI	Supplemental Info III, line 12; Part IV, B, lines 1 and 2; Pa 3a and 3b; Part V, lines 2, 5, and 6. A	Provide Section A, lines 1, art IV, Section C, li line 1: Part V. Sec	the explana 2, 3b, 3c, 4 ne 1; Part I\ tion B. line 1	tions require b, 4c, 5a, 6 /, Section D le: Part V S	ed by Part II, lir , 9a, 9b, 9c, 1 ⁻ , lines 2 and 3 Section D. lines	ne 10; Part II, line la, 11b, and 11c; ; Part IV, Section	17a or 17b; Part Part IV, Section
			sait for any	additional in	iornation. (36	e mstructions.)	
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Schedule B (Form 990, 990-EZ,

or 990-PF)
Department of the Treasury
Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

2017

NASHVILLE VOUTH SDODES CLUB INC

Employer identification number

Organization type (sheek a		81-1702436				
Organization type (check or	ne):					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
Check if your organization is a Note: Only a section 501(c)(7 instructions.	covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Spe	cial Rule. See				
General Rule						
X For an organization fill or more (in money or contributor's total con	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions tot property) from any one contributor. Complete Parts I and II. See instructions for ctributions.	taling \$5,000 determining a				
Special Rules						
regulations under sect 13, 16a, or 16b, and tl	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % supportions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EA) hat received from any one contributor, during the year, total contributions of the given amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete	EZ), Part II, line				
contributor, during the	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For an organization de contributor, during the contributions totaled m during the year for an General Rule applies	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received to year, contributions exclusively for religious, charitable, etc., purposes, but no such one than \$1,000. If this box is checked, enter here the total contributions that we exclusively religious, charitable, etc., purpose. Don't complete any of the parts unto this organization because it received nonexclusively religious, charitable, etc.,	from any one ch re received nless the				
990-EZ, or 990-PF), but it mus	isn't covered by the General Rule and/or the Special Rules doesn't file Schedule st answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-	B (Form 990,				

Name of organization
NASHVILLE YOUTH SPORTS CLUB

Employer identification number

IVAC	HATTIE TOOTH SPORTS CLUB, INC.	81	<u>1702436</u>
Part	Contributors (see instructions). Use duplicate copies of	of Part I if additional space	is needed.
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.1	UPWARD SPORTS 198 WHITE STAR POINT SPARTANBURG SC 29301	\$ 49,550	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d)
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
• • • • • • • • • • • • • • • • • • • •		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

			Employer Identification in	umber
N	ASHVILLE YOUTH SPORTS CLUB, INC.		81-1702436	
Pa	Organizations Maintaining Donor Advised F Complete if the organization answered "Yes" o	unds or Other Similar Funds n Form 990, Part IV. line 6	or Accounts.	
		(a) Donor advised funds	(b) Funds and othe	r accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
5	Did the organization inform all donors and donor advisors in writing	that the assets held in donor advised		
	funds are the organization's property, subject to the organization's e	exclusive legal control?	Г	Yes No
6	Did the organization inform all grantees, donors, and donor advisors	in writing that grant funds can be used	·····	∐ Yes ∐ No
	only for charitable purposes and not for the benefit of the donor or d	onor advisor, or for any other purpose		
	conferring impermissible private benefit?	parpood	Г	Yes No
25	conservation Easements.		····	
_	Complete if the organization answered "Yes" or	n Form 990, Part IV, line 7.		
ĺ	Purpose(s) of conservation easements held by the organization (che	eck all_that apply).		
	Preservation of land for public use (e.g., recreation or education)) Preservation of a historically im	portant land area	
	Protection of natural habitat	Preservation of a certified histor		
	Preservation of open space			
	Complete lines 2a through 2d if the organization held a qualified con	nservation contribution in the form of a c	conservation	
	easement on the last day of the tax year.		Held at the End	d of the Tax Yea
а	Total number of conservation easements		2a	
b	rotal acreage restricted by conservation easements		2h	
С	Number of conservation easements on a certified historic structure in	ncluded in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/2	25/06 and not on a	1	····
	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, released,	extinguished, or terminated by the orga	nization during the	
	tax year ▶		J	
Ļ	Number of states where property subject to conservation easement i	is located ▶		
5	Does the organization have a written policy regarding the periodic m	onitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling	g of violations, and enforcing conservation	on easements during t	he vear
	P			
•	Amount of expenses incurred in monitoring, inspecting, handling of v	iolations, and enforcing conservation ea	asements during the ve	•ar
	P \$			JUI
	Does each conservation easement reported on line 2(d) above satist	fy the requirements of section 170/h)/4)	(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
	In Part XIII, describe how the organization reports conservation ease	ments in its revenue and expense state	ement and	, .co no
	balance sheet, and include, if applicable, the text of the footnote to tl	he organization's financial statements th	at describes the	
	organization's accounting for conservation easements.			
'a	t III Organizations Maintaining Collections of Art	, Historical Treasures, or Othe	er Similar Assets	
_	Complete if the organization answered "Yes" on	Form 990, Part IV, line 8.		
а	If the organization elected, as permitted under SFAS 116 (ASC 958),	not to report in its revenue statement a	and balance sheet	
	works of art, historical treasures, or other similar assets held for publ	ic exhibition, education, or research in f	urtherance of	
	public service, provide, in Part XIII, the text of the footnote to its finar	ncial statements that describes these ite	ems.	
)	If the organization elected, as permitted under SFAS 116 (ASC 958),	to report in its revenue statement and	balance sheet	
	works of art, historical treasures, or other similar assets held for publi	ic exhibition, education, or research in f	urtherance of	
	public service, provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1		> \$	• • • • • • • • • • • • • • • • • • • •
	(ii) Assets included in Form 550, Part X		▶ \$	• • • • • • • • • • • • • • • • • • • •
	If the organization received or held works of art, historical treasures, o	or other similar assets for financial gain.	, provide the	• • • • • • • • • • • • • • • • • • • •
	following amounts required to be reported under SFAS 116 (ASC 958	3) relating to these items:	•	
i	Revenue included on Form 990, Part VIII, line 1		> \$	
b	Assets included in Form 990, Part X		🛴 🚆	

Schedule D (Form 990) 2017 NASHVILI	E YOUTH S	PORTS CLUB	, INC.	81-1702	436		Page 2
Part III Organizations Maintaini	ng Collections	of Art, Historica	al Treasure	s. or Other	Similar As	sets (co	ntinuec
3 Using the organization's acquisition, acce collection items (check all that apply):	ssion, and other rec	cords, check any of the	he following tha	at are a significa	ant use of its		
a Public exhibition	d 🗌	Loan or exchange	programs				
b Scholarly research	e	Other					
c Preservation for future generations	-						
4 Provide a description of the organization's	s collections and ex	plain how they furthe	r the organizat	ion's exempt n	urnose in Parl	÷	
XIII.		. , , , , , , , , , , , , , , , , , , ,		one exempt pt	arpose arriant	•	
5 During the year, did the organization solid	it or receive donation	ons of art, historical t	reasures or of	her similar			
assets to be sold to raise funds rather tha	n to be maintained	as part of the organi	ization's collecti	ion?		□ v	
Part IV Escrow and Custodial	Arrangements.		- Conson			. Yes	No.
Complete if the organizati 990, Part X, line 21.	on answered "Y	es" on Form 990), Part IV, Iir	ne 9, or repo	rted an am	ount on I	Form
1a Is the organization an agent, trustee, cust	odian or other inter	mediany for contributi	one or other a				
included on Form 990. Part X?	oddin or other litter	mediary for contribut	ons or other as	sseis not		г	
included on Form 990, Part X? b If "Yes," explain the arrangement in Part X		o following table:				Yes Yes	∐ No
and the same and an engineers and are	un and complete th	e lollowing table.					
c Reginning balance					<u> </u>	Amount	
c Beginning balance	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·		1c		
d Additions during the year		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		1d		
e Distributions during the year		• • • • • • • • • • • • • • • • • • • •			1e		
f Ending balance					1f		
2a Did the organization include an amount or	i Form 990, Part X,	line 21, for escrow of	or custodial acc	ount liability?		Yes	∐ No
b If "Yes," explain the arrangement in Part X Part V Endowment Funds.	iii. Check here if th	ie explanation has be	en provided or	Part XIII	<u></u>		
	on oncurred "V	" C 000					
Complete if the organization							
de Destrutes et al. 1	(a) Current year	(b) Prior year	(c) Two years	s back (d) Th	ree years back	(e) Four ye	ears back
1a Beginning of year balance							
b Contributions							
c Net investment earnings, gains, and							
losses						1	
d Grants or scholarships							
e Other expenditures for facilities and							
programs							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentage of the control	urrent year end bala	ance (line 1g, column	(a)) held as:				
a Board designated or quasi-endowment ▶	%		- ,,				
b Permanent endowment ▶ %							
c Temporarily restricted endowment ▶	%						
The percentages on lines 2a, 2b, and 2c s							
3a Are there endowment funds not in the pos	session of the organ	nization that are held	and administe	red for the			
organization by:						Ye	es No
(i) unrelated organizations						3a(i)	23 140
(ii) related organizations						20(ii)	_
b If "Yes" on line 3a(ii), are the related organ	izations listed as re	guired on Schedule I	 R?		• • • • • • • • • • • • • • • • • • • •	3b	
4 Describe in Part XIII the intended uses of	the organization's e	ndowment funds	*** **********	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	[30]	
Part VI Land, Buildings, and Eq	uipment.						
Complete if the organization	n answered "Ye	es" on Form 990	Part IV line	11a See F	Orm 000 E	Dart V lin	10
Description of property	(a) Cost or other	basis (b) Cost or	other basis	(c) Accumulate		(d) Book valu	
	(investment)	(oth		depreciation	,	(a) Book valu	16
1a Land				producti			
b Buildings					5-5-22-3-		
c Leasehold improvements							
d Equipment							
e Other							
Total. Add lines 1a through 1e. (Column (d) mus	t equal Form 000 1	Part V politima (D) 15	1001				
(U) mus	coquai i Oiiii 990, F	; art ∧, column (B), III	ie TUC.)				

DAA

			81-17	•		Page
Complete if the organization answered "Yes" or	n Form 990, Parl	t IV, line	e 11b. s	See Form	1 990, Part X,	line 12
(a) Description of security or category	(b) Book value	ļ		(c) Metho	d of valuation:	
(including name of security)				Cost or end-of	f-year market value	
) Financial derivatives						
2) Closely-held equity interests						
3) Other						
(A)						
(B)						
(C)						
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Part VIII Investments—Program Related.						
Complete if the organization answered "Voc" on	Farm 000 David	. IV / . P	44 6			
Complete if the organization answered "Yes" on (a) Description of investment	roim 990, Part	. IV, IINE	9 11C. S			ine 13
(-) woodspace of introduction	(b) Book value				d of valuation:	
1)				Cost or end-of-	year market value	
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tal. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.		± 1,438)	100 March 1970	constitution.	1000 00 00 00 00 00 00 00 00 00 00 00 00	
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Complete if the organization answered "Yes" on	romi 990. Part	IV, line	11a. S	ee Form		
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1) 2) 3) 4) 5) 6) 7) 8) 9) tal. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		IV, line	11e or	11f. See		
1) 2) 3) 4) 5) 5) 7) 8) 9) tal. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	Form 990, Part	IV, line	11e or	▶ 11f. See		
(a) Description of liability		IV, line	11e or	11f. See		
(a) Description of liability Federal income taxes	Form 990, Part	IV, line	11e or	11f. See		
(a) Description of liability Federal income taxes	Form 990, Part	IV, line	11e or	11f. See		
(a) Description of liability Federal income taxes	Form 990, Part	IV, line	11e or	11f. See		
(a) Description of liability Federal income taxes (b) Discontinuous equal Form 990, Part X, col. (B) line 15.) (a) Description of liability (b) Federal income taxes	Form 990, Part	IV, line	11e or	11f. See		
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(a) Description of liability Federal income taxes (b) Description of liability (c) Description of liability (c) Description of liability (d) Description of liability (e) Description of liability	Form 990, Part	IV, line	11e or	11f. See		
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Schedule D (Form 990) 2017

Sch P	edule D (Form 990) 2017 NASHVILLE YOUTH SPORTS CLUE art XI Reconciliation of Revenue per Audited Financial Stat	tements With F	Revenue ner Retur	Page 4
	Complete if the organization answered "Yes" on Form 99	90. Part IV. line	12a	
1	Total revenue, gains, and other support per audited financial statements		1	587,045
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c	0.000000	
d	Other (Describe in Part XIII.)	2d	2000	
e	Add lines 2a through 2d	<u>Zu</u>		
3			<u>2e </u>	
4	Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		3	587,045
a	Proortment expenses not included an Form 200 Part VIII is an			
	mile / b	4a		
a	Other (Describe in Part XIII.)	4b	100000	
c	Add lines 4a and 4b		4c	
_ <u></u>	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	587,045
Pa	art XII Reconciliation of Expenses per Audited Financial Sta	atements With	Expenses per Ret	urn.
	Complete if the organization answered "Yes" on Form 99	0. Part IV. line	12a.	
1	Total expenses and losses per audited financial statements		1	636,363
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		5600	030,303
а		2a	666546	
b	Prior year adjustments	2b		
c	Other Insses	20		
d		2c		
	The American Mark Anna American	2d	Page 100	
2	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	636,363
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	1,001000	
C	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	636,363
Pa	ort XIII Supplemental Information.			
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	art IV, lines 1b and	2b; Part V, line 4; Part 2	ζ, line
2; Pa	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro	ovide any additional	information.	

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Schedule D (I	Form 990) 201	7 NASH	VILLE	YOUTH	SPORTS	CLUB,	INC.	81-1702436	Page 5
Part XIII	Suppleme	entai into	ormation (continued)	<u> </u>				
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

NASHVILLE YOUTH SPORTS CLUB, INC.

Employer identification number 81–1702436

FORM 990 - ORGANIZATION'S MISSION NASHVILLE YOUTH SPORTS CLUB OPERATES AS AN ORGANIZATION THAT EXISTS TO PROMOTE THE DISCOVERY OF JESUS THROUGH SPORTS. WE BRING CHRISTIAN LEADERS, ATHLETES, AND THE COMMUNITIES THEY SERVE TOGETHER THROUGH THE UNIVERSAL LANGUAGE OF SPORTS, STRENGTHENING YOUNG ATHLETES BY HELPING THEM GROW IN MIND BODY AND SOUL. AS A NON-DENOMINATIONAL CHRISTIAN SPORTS MINISTRY PROVIDER, NASHVILLE YOUTH SPORTS CLUB OFFERS PROGRAMS DESIGNED TO GIVE ATHLETES, WHO HAVE FOUND THEIR LOVE OF THE GAME, A PLACE TO BE CHALLENGED SO THAT THEY CAN STRIVE FOR MORE PERFORMANCE. NASHVILLE YOUTH SPORTS CLUB PROVIDES VALUABLE RESOURCES THAT AID IN PLANNING, TRAINING, AND EXECUTING FIRST-CLASS, ORGANIZED, AND DETAILED SPORTS OFFERINGS. NASHVILLE YOUTH SPORTS CLUB ACCOMPLISHES ITS MISSION PRIMARILY THROUGH THE 360 PROGRESSION WHICH IS A UNIQUELY DESIGNED TOTAL SPORTS EXPERIENCE THAT ADAPTS AND EXPANDS AS PLAYERS DEVELOP AND GROW IN THEIR PERSONAL JOURNEY. THE 360 PROGRESSION OFFERS COMPREHENSIVE TRAINING AND INSTRUCTION THAT INCREASES IN INTENSITY WITH EACH ATHLETE AS THEY IMPROVE, ENRICHING THEIR PHYSICAL, EMOTIONAL, SOCIAL AND SPIRITUAL DEVELOPMENT. PROGRAMMING IS RUN BY LOCAL LEADERS AND COACHES AND FOCUSES ON ATHLETES IN MIDDLE SCHOOL AND HIGH SCHOOL. NASHVILLE YOUTH SPORTS CLUB IS DESIGNED TO PROVIDE A UNIQUE TOTAL SPORTS EXPERIENCE FOR PLAYERS (AND PARENTS) WANTING TO CONTINUE THEIR ATHLETIC JOURNEY WHILE NOT COMPROMISING CHARACTER AND INTEGRITY. PROGRAMMING DESIGNED TO INTENTIONALLY DEVELOP ALL PARTICIPANTS MENTALLY, ATHLETICALLY, SPIRITUALLY AND SOCIALLY IS PROVIDED IN BASKETBALL

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

THE EXECUTIVE DIRECTOR IS LEASED FROM UPWARD SPORTS. THEY WORK WITH AN

INDEPENDENT THIRD PARTY TO DETERMINE A SALARY RANGE THAT IS REASONABLE FOR

PAGE 1 OF 3

	\$	3,562	\$	0	\$	0
MINISTRY			***************************************			
	\$	72	\$	0	\$	0
BANK FEES	FOR DIRE	ECT DEPOSIT				
	\$	117,211	\$	0	\$	0
CONTRACT L	ABOR					······································
	\$	1,890	\$	0	s	n
COACH APPR	ECIATION	1				······································
	\$	0	\$	178	\$	0
BANK CHARG	ES					······································
	\$	8,906	\$	2,969	\$	0
BONZI ADMI	N FEE	•••••			······································	· · · · · · · · · · · · · · · · · · ·
	\$	3,583	\$	0	 \$	0
BONZI CRED	IT CARD	FEE			······································	······································
******	\$	21	\$	0	\$	0
BACKGROUND	CHECKS					iining
	PROGR <i>i</i>	AM SERVICE	MGT	& GENERAL	FINDR	AISING
DESCRIPTION	N					
FORM 990,	PART IX	, LINE 11G - C	THER FEES	FOR SERVICE	S	•••••
	==		OBIIIC.		••••••	••••••
			PUBLIC.	OCCUMENTS DIS	CLOSURE EXPLA	NATION
FORM 990.	PART VT	, LINE 19 - G	OVEDNITHE F	OCTIMENING DEC		······
APPROVAL.				•••••		
	D SUBSE	QUENT VOTE IS	DOCUMENTE	D IN THE BOA	RD MINUTES UP	ON
DETERMINES			ARY FOR T		DIRECTOR. T	HIS
		HE NASHVILLE Y		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	REVIEWS THAT	RANGE
ATT EMETAS						
NASHVILLE ALL EMPLOY	YOUTH S	PORTS CLUB, IN	1C.		81-1702436	

Schedule O (Form 9 Name of the organizate	990 or 990-EZ) ((2017)				Page 2
		SPORTS CLUB,	TNC:		Employer identification in 81–1702436	umber
					81-1702436	
SHIPPING	& HANDL	LNG		• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •
	\$	2,516	\$	839	\$	0
	TOTAL					
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	\$	137,761	\$	3,986	\$	0

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					PAGE 3 OF 3	

Two Year Comparison Report Form **990** 2016 & 2017 For calendar year 2017, or tax year beginning 10/01/17 09/30/18 , ending Name Taxpayer Identification Number NASHVILLE YOUTH SPORTS CLUB, INC. 81-1702436 2016 2017 Differences 1. Contributions, gifts, grants _____ 87,143 67,706 -19,4372. Membership dues and assessments 2. 3. Government contributions and grants 4. Program service revenue 46,956 496,213 449,257 5. Investment income 5. 6. Proceeds from tax exempt bonds 6. 7. Net gain or (loss) from sale of assets other than inventory 7. 8. Net income or (loss) from fundraising events 8. 9. Net income or (loss) from gaming 9. 10. Net gain or (loss) on sales of inventory 1,887 17,109 10. -373 1,514 11. Other revenue 11. 4,503 21,612 12. Total revenue. Add lines 1 through 11 138,229 12. 587,045 448,816 13. Grants and similar amounts paid 13. 14. Benefits paid to or for members 14. 15. Compensation of officers, directors, trustees, etc. 15. 106,692 106,692 16. Salaries, other compensation, and employee benefits 34,063 16. -34,06317. Professional fundraising fees 17. 18. Other professional fees 41,769 18. 151,517 109,748 19. Occupancy, rent, utilities, and maintenance 82,867 19. 211,695 128,828 20. Depreciation and Depletion 20. 21. Other expenses 166,459 636,363 -49,318 57,023 21. 109,436 22. Total expenses. Add lines 13 through 21 215,722 22. 420,641 23. Excess or (Deficit). Subtract line 22 from line 12 23. -77,493 28,175 24. Total exempt revenue 24. 138,229 587,045 448,816 25. Total unrelated revenue 25. 25. Total unrelated revenue
26. Total excludable revenue
27. Total assets
28. Total liabilities
29. Retained corriegs 51,086 43,705 151,961 519,339 87,971 26. 468,253 27. 44,266 28. 245,545 93,584 29. Retained earnings 29. -108,256 -157,574 -49,318 30. Number of voting members of governing body 30. 3 31. Number of independent voting members of governing body 31. 3 3 32. Number of employees 0 0 32. 33. Number of volunteers 4

Form 990		Tax	Return History			2017
lame NA CURITITE	NOTIFIE GROSS	TG GT	-		Employe	er Identification Numbe
NASHVILLE	YOUTH SPOR	IS CLUB, INC.			81-	1702436
	2013	2014	2015	2016	2017	
Contributions, gifts, grants			20.0	87,143	67,706	2018
Membership dues		-70		07,143	67,706	· · · · · · · · · · · · · · · · · · ·
Program service revenue				46,956	496,213	
Capital gain or loss				40,956	490,213	
Investment income						
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue				4,130	23,126	
Total revenue				138,229	587,045	
Grants and similar amounts paid				130,229		
Benefits paid to or for members						
Compensation of officers, etc.			***	<u> </u>	106,692	
Other compensation	****			34,063	100,092	····
Professional fees				41,769	151,517	
Occupancy costs				82,867	211,695	
Depreciation and depletion		* ***		02,007	211,095	
Other expenses				57,023	166,459	
Total expenses				215,722	636,363	
Excess or (Deficit)	79.7			-77,493	-49,318	100 100
				11,493	-49,316	
Total exempt revenue	***		WAL W	138,229	587,045	
Total unrelated revenue				130,229	367,043	
Total excludable revenue	77/4			51,086	519,339	
Total Assets		***		43,705		
Total Liabilities		-	77	151,961	87,971 245,545	
Net Fund Balances				-108,256	-157.574	

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81-1702436

Federal Statements

FYE: 9/30/2018

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total	Program	Management &	Fund
	Expenses	Service	General	Raising
BACKGROUND CHECKS BONZI CREDIT CARD FEE BONZI CADMIN FEE BANK CHARGES COACH APPRECIATION CONTRACT LABOR BANK FEES FOR DIRECT DEPOSIT MINISTRY SHIPPING & HANDLING TOTAL	\$ 21 3,583 11,875 178 1,890 117,211 72 3,562 3,355 \$ 141,747	\$ 21 3,583 8,906 1,890 117,211 72 3,562 2,516 \$ 137,761	\$ 2,969 178 839 \$ 3,986	\$ \$

Schedule A, Part III, Line 1(e)

Description	Amount	
OTHER UPWARD SPORTS	\$ 18,15	6
CASH CONTRIBUTION	49,55	0
TOTAL	\$ <u>67,70</u>	6

00804815SP NASHVILLE YOUTH 81-1702436 FYE: 9/30/2018	Federal Statements	
	Schedule A, Part III, Line 2(e)	
FUNDRAISING INCOME CAMPS DEVELOPMENTAL MERCHANDISE LEAGUE/TEAMS TOURNAMENT TRYOUTS TOTAL	Description	Amount \$ 34,419 33,231 2,910 368,077 38,846 21,640 \$ 499,123
	Schedule A, Part III, Line 10a(e)	
FACILITY RENTALS	Description	Amount
TOTAL		\$ <u>21,612</u> \$ <u>21,612</u>