SCANNED APR 1 4 2010

990-EZ

Department of the Treasury Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

OMB No 1545-1150

2009

Open to Public Inspection

B Crose of superceive Names and superceive Name of regression and started in Name of Section 501(c)(3) organizations and startic Name of Section 501(c)(3) organizations and section 501(c)(3) organizations and section 501(c)(3) organization and startic Name of Section 501(c)(3) organization in section 501(c)(3) organization and startic Name of Section 501(c)(3) organization in Section 501(c)(3) organization and startic Name of Section 501(c)(3) organization section 501(c)(3) o	A For the 2009 calendar year, or tax year beginning , 2009, and ending , 20							, 20	
Website: Windows and street (cir P7) box, from an ordinary and 2014 Circles P3 P5 P5 P5 P5 P5 P5 P5	В	Check if	applicable		C Name of organization	D Empl	oyer id	lentification number	
Number and street for P. Coo., it must not delivebed to street address) Room/suite Enterphone number Col. 20 Sec. 1 Col. 20 Col. 2		Address	change		Chinese Arts Alliance of Nashville	06	- 1 (0665-26	
Terminated Proposition	닖		•	print or	Number and street (or P O. box, if mail is not delivered to street address) Room				
Section name Section	H				1PO Box 120025	(615	15) 385 - 434 (
Newtoning Section 501(c)(3) organizations and 4017(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 590 or 590-E2). Cancella Schedule B (Form 590). Tax-exempt status (check only one) — [3] 501(c) (3) 4 (insert no.) 4947(a)(1) or 527 Section 590-E2). Cancella Schedule B (Form 590). Section 590-E2 or Form 590 return is not required, but attach Schedule B (Form 590.) Section 590-E2 or Form 590-E2 or Form 590 return is not required, but attach Schedule B (Form 590.) Section 590-E2 or Form 590-E2 or Form 590 return is not required, but attach Schedule B (Form 590.) Section 590-E2 or Form 590-E2 or Form 590 return is not required, but attach Schedule B (Form 590.) Section 590-E2 or Form 590-E2 or Form 590-E2 or Form 590 return is not required, but attach Schedule B (Form 590.) Section 590-E2. Section 59	=			Specific	City or town, state or country, and ZIP + 4	F Gro	ло Ехе	motion	
Section 501(c)(8) organizations and 4017(s)(11) noncempt charitable trusts must attach a completed Schedule A (Form 590 or 590-E2). I Website: NUN	Ħ				1 Noshville TN37212-4115		•	•	
Website:	=	• Sec	ction 501(c)(3)	organiz		G Accounting M	ethod:	Cash Accrual	
Website: ► NWWW ChincseArtsAllicance Org Hebsite: ► MWWW ChincseArtsAllicance Org 1947(a)(1) or 527 1930-Pr).				•	• • • • • • • • • • • • • • • • • • • •	-			
Website: ► NIV. N. Chincs Pris Alliunus no. Sotio() (3) = 4 insuranto. 347(a)(1) or 527 Tax-exemptr status (check only one) Sotio() (3) = 4 insuranto. 347(a)(1) or 527 K Check ► drive organization is not a section 509(a)(3) supporting organization and its gross necepts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to a complete return.	_							omanization is not	
Tax-exempt status (check only one)		Nehsi	ite. > \VIV	141.	Chinese Arts Alliance, ora				
Check □ dithe organization is not a section 509(x)3 supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990-EZ						-		onoddie B (i omi 550,	
Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.							<u>_</u>	oro than \$25,000. A	
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) 1 Contributions, grits, grants, and similar amounts received. 1 6 / 66 / 2 Program service revenue including government fees and contracts 2 2 3 / 3 / 7 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory 5b Less: cost or other basis and sales expenses 6 Special everts and activates of the state of th				_					
Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) 1							• •	turi.	
1 Contributions, girts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory 5 b Less: cost or other basis and sales expenses. C Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5 c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 c Gross great great sale great great sale great sale great gr							ction	s for Part I)	
2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory 5b Less: cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 Special eyetis and activate equation and personal special parts of Schedule Gil if any amount is from gaming, check here □ 7 Gross that Comprise the first parts and activative (Subtract line 6b from line 6a) 6 Note that Comprise the first parts and activative (Subtract line 6b from line 6a) 7 Gross that Comprise the first parts and activative (Subtract line 6b from line 6a) 7 Gross that Comprise the first parts and activative (Subtract line 7b from line 7a) 8 Other revenue (describe ► 9 Total revenue (describe ► 10 Grants and similar amounts paid (attach schedule) 10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 12 I I (Benefits paid to or for members 13 Professional fees and other payments to independent contractors 13 \$,32.0,— 14 Occupancy, rent, utilities, and maintenance 14 \$20.0— 15 Printing, publications, postage, and shipping 16 Other expenses (describe ► Production cost (proceduse) of the Supplied (Supplied Composition) of the Composition of the C		_				occ the motio			
3 Membership dues and assessments 3 575 5 4 Investment income 5 6 7 5 6 7 7 6 7 7 7 7 6 8 7 7 7 7 8 8 8 9 9 9 9 9 9 9					-				
Second Formula Sec		1	•						
Sa Gross amount from sale of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c Special everys and activate company of contributions report of the part of the part of Schedule Gi. If any amount is from gaming, check here ▶ □ a Gross the soft inventory. Each of contributions report of the part of the part of the part of Schedule Gi. If any amount is from gaming, check here ▶ □ b Less of the expenses other than fundraising expenses c Net in the part of the part		1		•			<u> </u>	3/13,-	
b Less: cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5 bits of a Grospid eyens and actually eyengued that the form of contributions report or firm? b Less of the typenses of the flam inventory (Subtract line 6 bits of		1 _					"	1, -	
C Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) .									
Special events and activates (express of Schedule G). If any amount is from gaming, check here □ a Gross Part of Schedule G). If any amount is from gaming, check here □ a Gross Part of Schedule G). If any amount is from gaming, check here □ a Gross Part of Schedule G). If a Gross Part of Schedule G). If any amount is from gaming, check here □ a Gross Part of Gross Part II.) 20 Other changes in net assets or fund balances at end of year. Combine lines 18 through 20 17 6.— 21 Part of Gross Part II.) Part of Gross Part II.) 22 Cash, savings, and investments 12 12 12, 550.— 23 Land and buildings (See the instructions for Part II.) 24 Other assets (describe P 12, 550.— 25 Total assets (describe P 12, 550.— 26 Total liabilities (describe P 12, 550.— 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 28 Part II Balance Sheets. If Total assets on line 25, column (B) must agree with line 21) 29 Part II Balance Sheets. If Total assets on line 25, column (B) must agre		_				-1	_		
b Less bot expenses other than for aising expenses c Net in the bot loss from special (boths and activities (Subtract line 6b from line 6a). 7a Gross less of inventory, less reptime and allowances. 7b	Φ	1					5 C	······································	
b Less bet expenses other than for arising expenses c Net incline by loss from special (boths and activities (Subtract line 6b from line 6a). 7a Gross less of inventory, less reptime and allowances 7b Less: 1000 1000 1000 1000 1000 1000 1000 1	Ĕ	1				ICCA HOICE			
b Less bet expenses other than for arising expenses c Net incline by loss from special (boths and activities (Subtract line 6b from line 6a). 7a Gross less of inventory, less reptime and allowances 7b Less: 1000 1000 1000 1000 1000 1000 1000 1	ě	4							
C Net in Company less returns and allowances 7a 531.	Œ	_							
Ta Gross less of inventory. Less return and allowances		1	Less OF	BAM.	the sound that individual structures (Subtract line 6b from line 6				
b Less: Total revenue (describe		I				8) 5 3 1 —	- OC		
C Gross Costs From sales of inventory (Subtract line 7b from line 7a) 7c 5 1 8 Other revenue (describe						221			
8 Other revenue (describe ▶ 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		1	Gross	CU		٩,	70	5211	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 5,320,— 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe ▶ Production cost (Diop Cotton) of the Supplication of the year (Subtract line 17 from line 9) 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 Net assets or fund balances (attach explanation) of the transparence of from 990 instead of from 990-EZ. 10 See the instructions for Part II.) 11 Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of from 990-EZ. 11 Cash, savings, and investments 12 Space of the form seed of year. Combine lines 18 through 20 13 Space of the form 990 instead of from 990-EZ. 15 Cash, savings, and investments 16 Cash, savings, and investments 17 Space of the form 990 instead of from 990-EZ. 18 Cash (describe >) (24) 19 Other assets (describe >) (24) 10 Other assets (describe >) (25) 11 Dentity of the year (B) End of year. 12 Space of the form 990 instead of from 990-EZ. 12 Space of the form 990 instead of from 990-EZ. 12 Space of the form 990 instead of from 990-EZ. 12 Space of the form 990 instead of from 990-EZ. 12 Space of the form 990 instead of from 990-EZ. 13 Space of the form 990 instead of from 990-EZ. 14 Occupancy, rent, utilities, and employee of the file of year. 15 Part III Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of from 990-EZ. 15 Otal liabilities (describe >) (24) 16 Other assets of fund balances (line 27 of column (B) must agree with line 21)		1 -	-		•			0311,—	
10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe ► Production cost (procedim) of the supplied (equipm) 15 553 — 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on pnor year's return) 20 Other changes in net assets or fund balances (attach explanation) 20 difficulty 20 12, 550. ☐ Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (A) Beginning of year (B) End of year (B) End of year Cother assets (describe ► 22 Cash, savings, and investments 23 Land and buildings 24 Other assets (describe ► 25 Total assets 26 Total liabilities (describe ► 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 28 Net assets or fund balances (line 27 of column (B) must agree with line 21)				•			⊢-	30. 437 -	
11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe ▶ Production cost (propostium) of the Supplies (equipment payment) 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on pnor year's return) 19 Net assets or fund balances (attach explanation) □ ∞ column (A) (must agree with end-of-year figure reported on pnor year's return) 20 Other changes in net assets or fund balances (attach explanation) □ ∞ column (A) (must agree with end-of-year figure reported on pnor year's return) 21 Net assets or fund balances at end of year. Combine lines 18 through 20 22 Cash, savings, and investments 23 Land and buildings 24 Other assets (describe ▶ 25 Total assets 26 Total liabilities (describe ▶ 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 28 Net assets or fund balances (line 27 of column (B) must agree with line 21) 29 Net assets or fund balances (line 27 of column (B) must agree with line 21)		+					-	9-1-1-11	
12 Salaries, other compensation, and employee benefits 12 14 (45, -		1			·				
Professional fees and other payments to independent contractors 13 5,320,— 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe Production cost (prof.cedian) of the Supplies (supplies (supplies (supplies)) 16 9,961,— 17 Total expenses. Add lines 10 through 16 17 30,609,— 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 20 Other changes in net assets or fund balances (attach explanation) 20 17 6.— Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (A) Beginning of year (B) End of year Cash, savings, and investments 12, 546,—22 12, 550.— 24 Other assets (describe P) 25 Total assets (describe P) 26 Total liabilities (describe P) 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 28 Printing, publications, postage, and shipping 15 553,—14 (b) 30,000,—15 (c) 40,000,—15 (c) 40,000,—16 (c) 40,000,—16 (c) 40,000,—17 (c) 40,00	Ø						_	14 105-	
16 Other expenses (describe ► Production cost (prof.cedium) of the Supplies (equiples, paper) 17 Total expenses. Add lines 10 through 16. 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on pnor year's return) 20 Other changes in net assets or fund balances (attach explanation) 20 UT 6.— 21 Net assets or fund balances at end of year. Combine lines 18 through 20 ≥ 21	28								
16 Other expenses (describe ► Production cost (prof.cedium) of the Supplies (equiples, paper) 17 Total expenses. Add lines 10 through 16. 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on pnor year's return) 20 Other changes in net assets or fund balances (attach explanation) 20 UT 6.— 21 Net assets or fund balances at end of year. Combine lines 18 through 20 ≥ 21	96								
16 Other expenses (describe ► Production cost (prop.cettive) of the Supplied (supplied (supplied (supplied)) 16 9,961 17 30,609, — 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 (172) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 12,546,— 20 Other changes in net assets or fund balances (attach explanation) 20 176.— Net assets or fund balances at end of year. Combine lines 18 through 20 21 12,550,— Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (A) Beginning of year (B) End of year 22 Cash, savings, and investments 12,546,—22 12,550,— 23 Land and buildings 23 24 Other assets (describe ► 1) 24 25 Total assets . 12,546—25 12,550,— 26 Total liabilities (describe ► 1) 26 Net assets or fund balances (line 27 of column (B) must agree with line 21) 2 546,—27 12,550,	Ä		-						
17 Total expenses. Add lines 10 through 16		1				(eemoras may	16		
18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 (72)					Add lines 10 through 16	C B T C C P			
Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on pnor year's return) Other changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net assets or fund balances (attach explanation) of the changes in net asse		_					_		
Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (A) Beginning of year (B) End of year (B) End of year (Cash, savings, and investments Land and buildings (D) Total assets (describe (D) Total assets (D) Total liabilities (describe 12,546, - 25,12,550, - 26, - 27,13,550, - 27,	ets						10		
Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (A) Beginning of year (B) End of year (B) End of year (Cash, savings, and investments Land and buildings (D) Total assets (describe (D) Total assets (D) Total liabilities (describe 12,546, - 25,12,550, - 26, - 27,13,550, - 27,	188	'				or agree with	10	12 546,-	
Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (A) Beginning of year (B) End of year (B) End of year (Cash, savings, and investments Land and buildings (D) Total assets (describe (D) Total assets (D) Total liabilities (describe 12,546, - 25,12,550, - 26, - 27,13,550, - 27,	¥	20	-	_	· · · · · · · · · · · · · · · · · · ·	· · · · · ·			
Part Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (A) Beginning of year (B) End of year	ž			-	• • • • • •	· · · · ·		7 7 011	
(See the instructions for Part II.) 22 Cash, savings, and investments	P								
22 Cash, savings, and investments [2, 546, - 22 12, 550, - 23] 23 Land and buildings 23 24 Other assets (describe ►) 24 25 Total assets (12, 546, - 25 12, 550, - 25 12, 550, - 25 12, 550, - 25 12, 550, - 25 12, 550, - 27 1									
23 Land and buildings	2	, ,	ach cavings	and in	·	4			
24 Other assets (describe ►) 24 25 Total assets							•		
25 Total assets				-	_	1	-		
26 Total liabilities (describe ►) 26 27 Net assets or fund balances (line 27 of column (B) must agree with line 21)			•			13 64/			
27 Net assets or fund balances (line 27 of column (B) must agree with line 21) . 12, 546, 27 12,550 =						12,340			
						13 #-11		1 - 12-21	
						<u> 1 — 4 5>4≃ 65</u> at No. 10642	<u>,</u>	Form 990-EZ (2009)	

Form **990-EZ** (2009)

Part	Other Information (Note the statement requirements in the instructions for Part V.)			
			Yes	No
33 `	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		Х
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		×
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		_
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		×
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		×
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		×
ь	If "Yes," complete Schedule L, Part II and enter the total amount involved			 -
39	Section 501(c)(7) organizations. Enter:	1		
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities	1		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	1		
404	section 4911 ▶; section 4912 ▶; section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
	transaction during the year or is it 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	40b		<u>×</u>
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		×
41	List the states with which a copy of this return is filed. ▶ Tenneduce			
42a	TO TO 1	1383	-9	37
		2/2-		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority	-1		.≥
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	Nο
	account)?	42b	103	×
	If "Yes," enter the name of the foreign country: ▶	420		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	1		
	and Financial Accounts.	İ		
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	1	×
•	If "Yes," enter the name of the foreign country: ► h / <		L	<u> </u>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year		•	
	and enter the amount of tax-exempt interest received of accided duffing the tax year			
			Vee	Na.
4.6	Did the exponential maintain any dense advised funds of \$1/40 ft Form 000 and be asset to the		Yes	140
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	1		V
4-		44	ļ.,	<u>×</u>
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If	1		~
	"Yes," Form 990 must be completed instead of Form 990-EZ	45	لــــا	<u>X</u>
	For	m 99 0)-EZ	(2009)

Form 99	30-EZ (2009)					P	age 4	
Part	Section 501(c)(3) organizations and section 494 501(c)(3) organizations and section 4947(a)(1) none and complete the tables for lines 50 and 51.	7(a)(1) nonex exempt charit	kempt charita table trusts mu	ble trusts only. A st answer question	All sec ons 46	tion 5-491	b	
46	Did the organization engage in direct or indirect political can	npaign activitie	es on behalf of	or in opposition to		Yes	No	
	candidates for public office? If "Yes," complete Schedule C,	Partl			46		X	
47	Did the organization engage in lobbying activities? If "Yes," c	omplete Sched	dule C, Part II		47		X	
48	48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E							
49a								
b	If "Yes," was the related organization a section 527 organizat	on?			49b			
50	Complete this table for the organization's five highest compe	nsated employ	ees (other than	officers, directors,	truste	es an	d key	
	employees) who each received more than \$100,000 of compe	ensation from t	the organization	. If there is none, er	iter "N	one."	•	
	(a) Name and address of each employee paid more hours	nd average er week to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	ac	Expensount a allowa	and	
	None		-					
						·····		
	Total number of other employees paid over \$100,000							
51	Complete this table for the organization's five highest comp \$100,000 of compensation from the organization. If there is no (a) Name and address of each independent contractor paid more than \$1.00 or \$	one, enter "No	one."	ype of service	(c) Cor			
	hone							
	T-l-l	A.22.22						
d	Total number of other independent contractors each receiving	over \$100,00	ʊ▶					
	Under penalties of perjury, I declare that I have examined this return, including and belief, it is true correct, and complete Declaration of preparer (other	uding accompany r than officer) is ba	ing schedules and s ased on all information	tatements, and to the be	st of my any kno	knowle wledge	edge	
Sign Here	Vin Jen Jen			3/18/2	201	0		
. 1016		ector		Date				
Paid	Type or print name and title Preparer's signature	Date	Check if self-	Preparer's identifying nui	nber (See	 e instruct	tions)	
Prepar	rer's Firm's name (or		employed ▶ L					
Use Oı	yours if self-employed),			in ▶				
	address, and ZIP + 4		l F	hone no 🕨				

May the IRS discuss this return with the preparer shown above? See instructions

Phone no ▶

► Yes No
Form 990-EZ (2009)

EIN:06-166626.

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No 1545-0047

2009

Open to Public

Department of the Treasury ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Inspection Internal Revenue Service Name of the organization Employer identification number Nashville 06: 1666626 hinese Arts Alliance Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi), (Complete Part II.) ☐ An organization that normally receives: (1) more than 33½ % of its support from contributions, membership fees, and gross 9 receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33/4 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a 🔲 Type I **b** Type II c Type III-Functionally integrated d ☐ Type III-Other e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col. (i) listed in your the organization in organization in col. support above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? U S.? Yes Yes Yes

Total

Page 2

Par	Support Schedule for Org (Complete only if you chec					and 170(b)(1)(A)(vi)
Sec	tion A. Public Support						
	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	18,400,-	zo, 156,-	30,436	6,861,-	6,187,-	82046
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	12,837,-	17,611,-	/	17,505	23,137,-	71090,
3	The value of services or facilities furnished by a governmental unit to the organization without charge						, .
4	Total. Add lines 1 through 3	31,237-	37,767-	30,436-	24,373	29, 333	153,136
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						1,500
6	shown on line 11, column (f) Public support. Subtract line 5 from line 4.						151,636-
	tion B. Total Support						
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	31,287,-	37, 767,-	30,436-	24,3,2,-	29,333,-	153/136
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	45,-	48,-	41,-	13	9,-	156
9	Net income from unrelated business activities, whether or not the business is regularly carried on						4
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10 .						153/136-
12	Gross receipts from related activities, etc.	. (see instructio	ons)			12 2	·3,137.一
13	First five years. If the Form 990 is for organization, check this box and stop he	ere	<u> </u>			rear as a section	
	tion C. Computation of Public Su			4 1 (2)		A	8.89 %
14	Public support percentage for 2009 (line	• •	_				
15	11 1						
16a	and stop here. The organization qualifies as a publicly supported organization						
b	b 33% % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33% % or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17a	a 10%-facts-and-circumstances test—2009. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.						
b 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "forganization meets the "facts-and-circumstation diction". If the organization dictions is the organization diction of the organization diction.	facts-and-circum ances" test. The	istances" test, o organization qua	check this box a alifies as a public	and stop here. By supported or	Explain in Part ganization	IV how the

Page 3

SCH	Dule A (FORM 990 of 990-EZ) 2009						Page 3
Pa	t III Support Schedule for Orga (Complete only if you check	enizations De ed the box o	escribed in S n line 9 of Pa	ection 509(a art I.))(2)		
Sec	tion A. Public Support						
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 2	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or 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 organization without charge				· · · · · · · · · · · · · · · · · · ·		
6	Total. Add lines 1 through 5	_					
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b					· · · · · · · · · · · · · · · · · · ·	
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6					 	
-	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	<u> </u>				<u> </u>	<u> </u>
14	First five years. If the Form 990 is for organization, check this box and stop	here					on 501(c)(3) ▶ □
	tion C. Computation of Public Su					 	
15 16	Public support percentage for 2009 (lir Public support percentage from 2008	Schedule A, Pa	art III, line 15	e 13, column (15 16	<u>%</u> %
	tion D. Computation of Investmen					 	
17 18	Investment income percentage for 200 Investment income percentage from 20			-		17	<u>%</u> %
19a	33% % support tests - 2009. If the org 17 is not more than 33% %, check this b						
b	33½ % support tests – 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33½ %, and line 18 is not more than 33½ %, check this box and stop here. The organization qualifies as a publicly supported organization						
20	Private foundation. If the organization						

Schedule A (F	orm 990 or 990-E2) 2009		Page 4
Part IV	Supplemental Information. Cor Part II, line 17a or 17b; and Part	mplete this part to provide the call, line 12. Provide any other a	explanations required by Part II, line 10; additional information. See instructions.

		••••••	

EIN:06-1666626

CAAN Tax Return 990 EZ
Attachment for Line 20

Chinese Arts Alliance of Nashville accounts for \$176. More in asset than it reported in 2008 year-end balance sheet. Chinese Arts Alliance of Nashville will like to make adjustment for that.