Form **990**

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)

OMB No. 1545-0047 2003

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Α	For t	he 2003 calend	lar year, o	r tax year beginning	7/01	, 2003, a	nd endi	ng 6/30		, 2004
В	Check	if applicable:							D Employer i	dentification Number
	ПА	ddress change		NASHVILLE AREA (CHAPTER OF	THE AME	RICAN		NONE	
	\square_{N}	ame change						E Telephone	number	
	\vdash	itial return	See specific	2201 CHARLOTTE					615-2	50-4300
	\vdash	nal return	instruc- tions.	NASHVILLE, TN 3	1203				F Accounting	
	\vdash	mended return	40,101							(specify)
	H	pplication pending	a Sortio	on 501(c)(3) organizations	and 4947(a)(1)	nonevemnt	ша	nd are not applie		527 organizations.
	^	ppileation pending	charit	able trusts must attach a	completed Sch	edule A		(a) is this a grou		
			(Form	ı 990 o r 990-EZ).			1 '	(b) If 'Yes,' enter		
G	Web	site: ► HTTP	://WWW	.NASHVILLEREDCRO	SS.ORG/		1 1	(C) Are all affiliat		
J	Orga	nization type		(C)			' ' '	• •	h a list. See ins	
	(che	ck only one)	<u></u>	X 501(c) 3 ◄ (in	sert no.) 494	7(a)(1) or	527 H ((d) Is this a sepa		•
K				nization's gross receipts a			1			oup ruling? X Yes No
	\$25,	000. The organ	nization ne M Packao	eed not file a return with the in the mail, it should file	ne IRS; but if th a return withou	e organization it financial dat	a. T		emption Nun	
	Som	e states requir	e a compl	ete return.	a rotarr minot	at manda aut	М			nization is not required
L	Gros	s receints: Add	l lines 6b	8b, 9b, and 10b to line 12	× 2.930.5	95.	```			990, 990-EZ, or 990-PF).
	HI			ses, and Changes in			alance			<u> </u>
er er		*****		ants, and similar amounts				(
							1 a	1,164,	492.	
	1	-							071.	
	1	•		ons (grants)						
	d	Total (add lines	sch \$	1,545,563. none	ash Ŝ		1			1,545,563.
	2			ue including government f						780,647.
	3	•		assessments		· ·		•		12.57 42.54
	4	•		temporary cash investme					}	2,571.
	5		-	from securities					_	
	6 a	Gross rents					6 a			
	b	Less: rental e	xpenses .				6b			
	С	Net rental inc	ome or (lo	oss) (subtract line 6b from	line 6a)				6	<u> </u>
R	7			ne (describe ►				STATEMEN		65,005.
RE>E>U	R a			es of assets other	(A) S	Securities		(B) Othe	r	
E	O a	than inventor	y			55,186.	8a	1,	500.	
E	b	Less: cost or	other bas	is and sales expenses		56,771.	8b	1,	408.	
	С	Gain or (loss) (at	tach schedul	e)S.TATEMENT2.		-1,585.	8c		92.	
	d	Net gain or (le	oss) (com	bine line 8c, columns (A)	and (B))				8	d −1,493.
	9	Special event	s and acti	ivities (attach schedule). I	-		check h	nere 🏲		
	a	Gross revenu	e (not incl	uding \$	of c	ontributions				
		•	•			1	9 a		013.	
				other than fundraising exp		•	9Ь		827.	
				om special events (subtra		1	1	STATEME	NT.3 9	337,186.
				y, less returns and allowa			10 a			
			~	d			10b			
	С			les of inventory (attach schedule)	•					
	11			art VII, line 103)						26,110.
	12			s 1d, 2, 3, 4, 5, 6c, 7, 8d,						2,755,589.
E	13	-		line 44, column (B))						1,731,499.
EXPESSES	14	-	-	ral (from line 44, column (314,840.
N	15	- -		14, column (D))						436,686.
Ē	16			attach schedule)						2 402 005
5	17			es 16 and 44, column (A)						2,483,025.
Ą	18		-	ne year (subtract line 17 fi	-					272,564.
N S E E T	19			nces at beginning of year						1,979,286.
T	20	-		ssets or fund balances (at	•					3,679.
	21	ivet assets or	iung balai	nces at end of year (comb	ine lines 18, 19	o, and 20)	· · · · · · ·	· · · · · · · · · · · · · · · · · · ·	21	2,255,529.

Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

E	Oo not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (att sch)					
	(cash \$					
	non-cash \$)	22	176 705	176 705		
23	Specific assistance to individuals (att sch)ST 5		176,785.	176,785.		
24	Benefits paid to or for members (att sch) Compensation of officers, directors, etc	24	469,118.	315,390.	60,777.	92,951.
25 26	Other salaries and wages	26	603,114.	405,477.	78,137.	119,500.
27	Pension plan contributions	27	17,721.	11,790.	2,589.	3,342.
28	Other employee benefits	28	89,798.	56,620.	11,937.	21,241.
29	Payroll taxes	29	83,032.	57,259.	9,601.	16,172.
30	Professional fundraising fees	30	81,941.			81,941.
31	Accounting fees	31	8,901.	6,118.	1,002.	1,781.
32	Legal fees	32				
33	Supplies	33	294,644.	281,948.	6,354.	6,342.
34	Telephone	34	57,837.	43,475.	3,830.	10,532.
35	Postage and shipping	35	20,598.	12,685.	1,161.	6,752.
36	Occupancy	36	30,100.	23,066.	3,541.	3,493.
37	Equipment rental and maintenance	37	27,599.	21,930.	778.	4,891.
38	Printing and publications	38	26,838.	14,877.	1,864.	10,097.
39	Travel	39	6,751.	4,650.	971.	1,130.
40	Conferences, conventions, and meetings	40	16,404.	9,462.	5,199.	1,743.
41	Interest	41				
42	Depreciation, depletion, etc (attach schedule)	42	68,261.	21,422.	44,993.	1,846.
43	Other expenses not covered above (itemize):			,		
а	BAD DEBT	43a	21,972.	21,972.		
Ł	CONTRACTUAL SERVICES	43b	53,643.	33,937.	5,634.	14,072.
	INTER-RED CROSS EXPENSES	43c	96,458.	71,415.	13,964.	11,079.
d	NATIONAL SECTOR ASSESMEN	43d	231,510.	141,221.	62,508.	27,781.
е	,	43e				
44	Total functional expenses (add lines 22 - 43). Organizations completing columns (B) - (D), carry these totals to lines 13 - 15					
			2,483,025.	1,731,499.	314,840.	436,686.
	t Costs. Check . Lif you are following					
	any joint costs from a combined educationa		-			
	es,' enter (i) the aggregate amount of these				mount allocated to Prog	
\$_		ocated	to Management and ge	neral \$; and (iv) th	e amount allocated
	Indraising \$.	rico A	ssamplichments			
	Statement of Program Sen			ED CBOSS OBERN	ידאר וואדיי	Drogram Camina Evnance
wnat	is the organization's primary exempt purp	ose: P		ED CROSS OPERAT		Program Service Expenses (Required for 501(c)(3) and
clien	rganizations must describe their exempt puts served, publications issued, etc. Discussions and 4947(a)(1) nonexempt charitable tr	achiev	ements that are not me	asurable. (Section 501(c	(3) & (4) organ-	(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)
zatio	ans and 494/(a)(1) nonexempt charitable tr	usts m	ust also enter the amou	nt of grants & allocations	DROUTDING	optional for others.)
а	THE CHAPTER SERVES COUNTI			- -		
	DISASTER RELIEF, FINANCIA			WITCHWT COUKSE	P WIND OTHER	
	SERVICES TO NEEDY INDIVIL	DOWT				1 721 400
			(Grants and	d allocations \$		1,731,499.
b						
			(Grants and	d allocations \$)	
С						
						
				-, -, - - , ,	- 	
			(Grants and	d allocations \$)	
d						
				d allocations \$)	
	Other program services			d allocations \$)	1 701 100
f	Total of Program Service Expenses (show	uld equ	al line 44, column (B), f	rogram services)	······	1,731,499.

73

1,979,286

574,915

Page 3

Part IV Balance Sheets (See Instructions) (B) End of year (A) Where required, attached schedules and amounts within the description Note: Beginning of year column should be for end-of-year amounts only. 55,520. 508,908 45 Cash — non-interest-bearing..... 547,022. 168,212. 46 46 Savings and temporary cash investments 47 a 47 a Accounts receivable 47 b 47 c 1,115,297 48 a 48 a Pledges receivable 571,507. 48 c 1,040,636. 74.661 48b b Less: allowance for doubtful accounts..... 49 Grants receivable Receivables from officers, directors, trustees, and key 50 employees (attach schedule)..... 51 a 51 a Other notes & loans receivable (attach sch)..... 51 c **b** Less: allowance for doubtful accounts..... 51 b 50,773 19,456. 52 52 Inventories for sale or use..... 11,794. 13,200. 53 53 Prepaid expenses and deferred charges 33,000. 33,000 54 Investments – securities (attach schedule)...SEE.ST..6. ► Cost X FMV 54 55 a Investments - land, buildings, & equipment: basis. 55 a b Less: accumulated depreciation 55 c 55 b (attach schedule)..... 56 56 Investments - other (attach schedule)..... 1,871,984. 57 a Land, buildings, and equipment: basis..... 57 a b Less: accumulated depreciation (attach schedule)..........STATEMENT..7.... 704,473 1,209,286. 1,167,511. 57 c 20,029. 58 Other assets (describe ► 58 2,874,939 2,574,915 59 Total assets (add lines 45 through 58) (must equal line 74)..... 312,406. 243,266. 60 61 62 Deferred revenue..... 62 Loans from officers, directors, trustees, and key employees (attach schedule)..... 63 64 a 64 a Tax-exempt bond liabilities (attach schedule)..... 50,571 **b** Mortgages and other notes payable (attach schedule) SEE . STATEMENT . . 8 47,418. 64 b 325,573. 235,805. 65 Other liabilities (describe . SEE STATEMENT 9 595,629 619,410. Total liabilities (add lines 60 through 65)..... X and complete lines 67 Organizations that follow SFAS 117, check here ▶ through 69 and lines 73 and 74. 1,392,172. 67 924,431 Unrestricted..... 67 1,019,855 68 828,357. Temporarily restricted..... 35,000. 35,000. Permanently restricted..... Organizations that do not follow SFAS 117, check here ▶ and complete lines 70 through 74. UND 70 70 Capital stock, trust principal, or current funds..... 71

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Paid-in or capital surplus, or land, building, and equipment fund.....

72 Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances (add lines 67 through 69 or lines 70 through

Total liabilities and net assets/fund balances (add lines 66 and 73).....

BAA

BALANCES

71

				· ·	
				,	
_ 					
					•
75	Did any officer, director, trustee, or key	employee receive aggregate	e compensation of more		
	Did any officer, director, trustee, or key than \$100,000 from your organization a \$10,000 was provided by the related or	ganizations?	· · · · · · · · · · · · · · · · · · ·	▶	Yes X No
	If 'Yes,' attach schedule - see instructi			_	_
BAA					Form 990 (2003
					•
		TEEA0104L 1	0/02/03		

P	art VI Other Information (See instructions.)			Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		76		Х
77	Were any changes made in the organizing or governing documents but not reported to the IRS If 'Yes,' attach a conformed copy of the changes.		77		Χ
	a Did the organization have unrelated business gross income of \$1,000 or more during the year b If 'Yes,' has it filed a tax return on Form 990-T for this year?	-	78 a 78 b	N,	X /A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement		79		Х
	a Is the organization related (other than by association with a statewide or nationwide organizat membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt org		80 a		Х
	b If 'Yes,' enter the name of the organization $ ightharpoons$ N/\dot{A}				
	and check whether it is a Enter direct and indirect political expenditures. See line 81 instructions	81a 0.			
	b Did the organization file Form 1120-POL for this year?		81 b	200000000000000000000000000000000000000	X
82	a Did the organization receive donated services or the use of materials, equipment, or facilities substantially less than fair rental value?	at no charge or at	82a	Χ	
	b If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)				
	a Did the organization comply with the public inspection requirements for returns and exemption		83 a	X	
	b Did the organization comply with the disclosure requirements relating to quid pro quo contribu		83 b	Х	
84	a Did the organization solicit any contributions or gifts that were not tax deductible?	• • • • • • • • • • • • • • • • • • • •	84 a		X
	b If 'Yes,' did the organization include with every solicitation an express statement that such connot tax deductible?		84 b		/A
	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?. b Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85 a		A
	If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the waiver for proxy tax owed for the prior year.		85 b	N,	/A
	c Dues, assessments, and similar amounts from members	85c N/A			
	d Section 162(e) lobbying and political expenditures				
	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices				
	f Taxable amount of lobbying and political expenditures (line 85d less 85e)				
,	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85 q	N	/A
	h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reason dues allocable to nondeductible lobbying and political expenditures for the following tax year?		85 h	N,	Λ
	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a N/A			
1	b Gross receipts, included on line 12, for public use of club facilities	86b N/A	1		
	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a N/A	1		
1	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable or an entity disregarded as separate from the organization under Regulations sections 301.77 If 'Yes,' complete Part IX	orporation or partnership, 01-2 and 301.7701-3?	88		х
	a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year unsection 4911 ►	der:	- 00		^_
ł	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess during the year or did it become aware of an excess benefit transaction from a prior year? If explaining each transaction	s benefit transaction Yes ' attach a statement	89 b		Х
ď	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958				0.
c	Enter: Amount of tax on line 89c, above, reimbursed by the organization				0.
	The same of the sa				
	Number of employees employed in the pay period that includes March 12, 2003 (See instruction	ons.)	90 b		47
91	The books are in care of ► MARY JO WIGGINS Telephone nu	mber ► 615-250-430	00		
92	Located at ► 2201 CHARLOTTE AVE, NASHVILLE, TN Section 4947(a)(1) nonexempt charitable trusts filling Form 990 in lieu of Form 1041 — Check h	ere		Ā i	-
	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 92			N/A

Part VII	Analysis of Income-Produc	cing Activit	ties (See instructions.)		
		Unrelated	business income	Excluded by se	ection 512, 513, or 514	/E)
Note: Ente otherwise	er gross amounts unless indicated.	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	(E) Related or exempt function income
	ogram service revenue:					
	ONTRACTS					52,776.
	ROGRAM FEES & MATERI					727,871.
c						
u	······································					
	edicare/Medicaid payments					
	s & contracts from government agencies					
_	mbership dues and assessments			1		
	rest on savings & temporary cash invmnts			14	2,571.	
96 Div	vidends & interest from securities					
97 Net	rental income or (loss) from real estate:					
	bt-financed property					
	t debt-financed property					
	rental income or (loss) from pers prop		* .	14	CE 00E	
	ner investment income			14	65,005.	
oth	ner than inventory			18	-1,493.	
101 Net	income or (loss) from special events				337,186.	
102 Gro	ss profit or (loss) from sales of inventory					
	ner revenue: a					
	THER REVENUE			-		26,110.
ć		-		 		
d e						
104 Sub	total (add columns (B), (D), and (E))				403,269.	806,757.
105 Tot	tal (add line 104, columns (B), (D), a	ind (E))				1,210,026.
	105 plus line 1d, Part I, should equa					1,220,020.
6//10						
	Relationship of Activities t	o the Acco		empt Purpo:	ses (See instructions.)	
	Explain how each activity for which	income is re	mplishment of Exported in column (E) o	f Part VII contrib	uted importantly to the	
Part VIII	Explain how each activity for which of the organization's exempt purpo	n income is reposes (other tha	mplishment of Exported in column (E) on by providing funds for	f Part VII contrib or such purpose:	uted importantly to the s).	accomplishment
Part VIII	Explain how each activity for which of the organization's exempt purpo PROVIDE DISASTER RELI	n income is reposes (other that EF AND OT	mplishment of Exported in column (E) on by providing funds for	f Part VII contrib or such purpose:	uted importantly to the s).	accomplishment
Part VIII Line No. 93A&B	Explain how each activity for which of the organization's exempt purportion of the Organization's exempt purportion of the MIDDLE TENNESSEE	n income is reposes (other that EF AND OT AREA.	mplishment of Exported in column (E) of an by providing funds for the PRODUCTS A	f Part VII contrib or such purpose: AND SERVICE	uted importantly to the s). ES TO NEEDY INC	accomplishment
Part VIII	Explain how each activity for which of the organization's exempt purport PROVIDE DISASTER RELIMITE MIDDLE TENNESSEE PROVIDE DISASTER RELIMITED	n income is reposes (other that EF AND OT AREA.	mplishment of Exported in column (E) of an by providing funds for the PRODUCTS A	f Part VII contrib or such purpose: AND SERVICE	uted importantly to the s). ES TO NEEDY INC	accomplishment
Part VIII Line No. 93A&B 103	Explain how each activity for which of the organization's exempt purportion of the organization's exempt purportion. THE MIDDLE TENNESSEE PROVIDE DISASTER RELIGIOUS TENNESSEE	n income is reposes (other that EF AND OT AREA. EF AND OT AREA.	mplishment of Exported in column (E) of an by providing funds for the PRODUCTS AND THER PRODUCTS AND THER PRODUCTS AND THER PRODUCTS AND THER PRODUCTS AND THE	f Part VII contrib or such purpose AND SERVICE	uted importantly to the s). ES TO NEEDY INC	accomplishment
Part VIII Line No. 93A&B 103	Explain how each activity for which of the organization's exempt purport PROVIDE DISASTER RELIMITE MIDDLE TENNESSEE AT THE MIDDLE TENNESSEE AT THE MIDDLE TENNESSEE AT INformation Regarding Tax	n income is reposes (other that EF AND OT AREA. EF AND OT AREA.	mplishment of Exported in column (E) of an by providing funds for the PRODUCTS AT THER PRODUCTS AT THER PRODUCTS AT THER PRODUCTS AT THE PRODU	f Part VII contrib or such purpose AND SERVICE AND SERVICE garded Entit	uted importantly to the s). ES TO NEEDY INC ES TO NEEDY INC ES (See instructions.)	OIVIDUALS IN
Part VIII Line No. 93A&B 103 Part IX	Explain how each activity for which of the organization's exempt purport PROVIDE DISASTER RELIDITHE MIDDLE TENNESSEE PROVIDE DISASTER RELIDITHE MIDDLE TENNESSEE Information Regarding Tax (A)	income is reposes (other that EF AND OT AREA. EF AND OT AREA. (able Subside (B)	ported in column (E) of an by providing funds for the PRODUCTS AT THER PRODUCTS AT THER PRODUCTS AT THER PRODUCTS AT THE PRODU	f Part VII contrib or such purposes AND SERVICE AND SERVICE garded Entit	uted importantly to the s). ES TO NEEDY INC ES TO NEEDY INC ies (See instructions.) (D)	OIVIDUALS IN OIVIDUALS IN OIVIDUALS IN
Part VIII Line No. 93A&B 103 Part IX Name.	Explain how each activity for which of the organization's exempt purport PROVIDE DISASTER RELIMITE MIDDLE TENNESSEE AT THE MIDDLE TENNESSEE AT THE MIDDLE TENNESSEE AT INformation Regarding Tax	n income is reposes (other that EF AND OT AREA. EF AND OT AREA.	mplishment of Exported in column (E) of an by providing funds for the PRODUCTS ATTEMPT OF THER PRODUCTS ATTEMPT OF Nature of the PRODUCTS ATTEMPT OF Nature of the PRODUCTS ATTEMPT OF THE PRODUCTS AT	f Part VII contrib or such purposes AND SERVICE AND SERVICE garded Entit	uted importantly to the s). ES TO NEEDY INC ES TO NEEDY INC ES (See instructions.)	OIVIDUALS IN
Part VIII Line No. 93A&B 103 Part IX Name.	Explain how each activity for which of the organization's exempt purport of the organization of the organization's exempt purport of the organization of the organizatio	income is reposes (other that EF AND OT AREA. EF AND OT AREA. (able Subsite (B) Percentage	mplishment of Exported in column (E) of an by providing funds for the PRODUCTS AT THER PRODUCTS AT THE PRODUCT	f Part VII contrib or such purposes AND SERVICE AND SERVICE garded Entit	uted importantly to the s). ES TO NEEDY INC ES TO NEEDY INC (See instructions.) (D) Total	OIVIDUALS IN OIVIDUALS IN OIVIDUALS IN (E) End-of-year
Part VIII Line No. 93A&B 103 Part IX Name, par	Explain how each activity for which of the organization's exempt purport of the organization of the organization's exempt purport of the organization of the organizatio	income is reposes (other that EF AND OT AREA. EF AND OT AREA. (able Subsite (B) Percentage	mplishment of Exported in column (E) of seriest in column (E) of mplishment of Exported in column (E) of seriest in colum	f Part VII contrib or such purposes AND SERVICE AND SERVICE garded Entit	uted importantly to the s). ES TO NEEDY INC ES TO NEEDY INC (See instructions.) (D) Total	OIVIDUALS IN OIVIDUALS IN OIVIDUALS IN (E) End-of-year
Part VIII Line No. 93A&B 103 Part IX Name, par	Explain how each activity for which of the organization's exempt purport of the organization of the organization's exempt purport of the organization of the organizatio	income is reposes (other that EF AND OT AREA. EF AND OT AREA. (able Subsite (B) Percentage	mplishment of Exported in column (E) of Nature of Exported in column (E) of Nature of Exported in column (E) of Nature of Exported in Column (C) of Nature of Exported Exporte	f Part VII contrib or such purposes AND SERVICE AND SERVICE garded Entit	uted importantly to the s). ES TO NEEDY INC ES TO NEEDY INC (See instructions.) (D) Total	OIVIDUALS IN OIVIDUALS IN OIVIDUALS IN (E) End-of-year
Part VIII Line No. 93A&B 103 Part IX Name, part N/A	Explain how each activity for which of the organization's exempt purport of the organization's exempt purport PROVIDE DISASTER RELIMITE MIDDLE TENNESSEE INformation Regarding Tax (A) address, and EIN of corporation, thership, or disregarded entity	n income is reposes (other that is see that is seat that is see th	mplishment of Exported in column (E) of Nature of State Stat	f Part VII contrib or such purposes AND SERVICE AND SERVICE garded Entit (a) activities	uted importantly to the s). ES TO NEEDY IND ES TO NEEDY IND ies (See instructions.) (D) Total income	OIVIDUALS IN OIVIDUALS IN OIVIDUALS IN (E) End-of-year assets
Part VIII Line No. 93A&B 103 Part IX Name, par N/A Part X	Explain how each activity for which of the organization's exempt purport of the organization and the organization and the organization of the organization	n income is reposes (other that is see (other that	mplishment of Exported in column (E) of Nature of September 2 (C) Nature 2 (C) Natu	f Part VII contrib or such purposes AND SERVICE AND SERVICE garded Entit c) activities	uted importantly to the s). ES TO NEEDY IND ES TO NEEDY IND ies (See instructions.) (D) Total income Contracts (See inst	OIVIDUALS IN OIVIDUALS IN OIVIDUALS IN (E) End-of-year assets
Part VIII Line No. 93A&B 103 Part IX Name, par N/A Part X a Did the	Explain how each activity for which of the organization's exempt purport of the organization's exempt purport PROVIDE DISASTER RELIDING THE MIDDLE TENNESSEE INFORMATION REGARDING TAX (A) address, and EIN of corporation, thership, or disregarded entity Information Regarding Trae organization, during the year, receive any fundamental process.	income is reposes (other that is see (other that is	mplishment of Exported in column (E) of an by providing funds for the PRODUCTS AND THER PRODUCTS AND THER PRODUCTS AND THER PRODUCTS AND THE P	f Part VII contrib or such purposes AND SERVICE AND SERVICE garded Entit c) activities conal Benefit a personal benefit co	uted importantly to the s). ES TO NEEDY IND ES TO NEEDY IND ies (See instructions.) (D) Total income Contracts (See inst	CIVIDUALS IN OIVIDUALS IN (E) End-of-year assets ructions.)
Part IX Name, part IX Part X a Did the b Did the	Explain how each activity for which of the organization's exempt purpor PROVIDE DISASTER RELIDINESSEE THE MIDDLE TENNESSEE THE MIDLE TENNESSEE THE MIDDLE TE	n income is reposes (other that is see (other that	mplishment of Exported in column (E) of the PRODUCTS A column (E) of the PRODUCTS A column (E) of the PRODUCTS A column (C) of the P	f Part VII contrib or such purposes AND SERVICE AND SERVICE garded Entit c) activities conal Benefit a personal benefit co	uted importantly to the s). ES TO NEEDY IND ES TO NEEDY IND ies (See instructions.) (D) Total income Contracts (See inst	CIVIDUALS IN OIVIDUALS IN (E) End-of-year assets ructions.)
Part IX Name, part IX Part X a Did the b Did the	Explain how each activity for which of the organization's exempt purpor PROVIDE DISASTER RELIDINESSEE THE MIDDLE TENNESSEE THE MIDLE TENNESSEE THE MIDDLE TE	n income is reposes (other that is see (other that	mplishment of Exported in column (E) of the PRODUCTS A diaries and Disrement of the Property o	f Part VII contributor such purposes AND SERVICE AND SERVICE garded Entition activities conal Benefit a personal benefit co	uted importantly to the s). ES TO NEEDY IND ES TO NEEDY IND ies (See instructions.) (D) Total income Contracts (See instructions)	CIVIDUALS IN OIVIDUALS IN (E) End-of-year assets ructions.) Yes X No No
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Part VIII Line No. 93A&B 103 Part IX Name, part N/A Part X a Did the b Did the Note: /	Explain how each activity for which of the organization's exempt purpor PROVIDE DISASTER RELIDINESSEE THE MIDDLE TENNESSEE THE MIDLE TENNESSEE THE MIDDLE TE	n income is reposes (other that is see (other that	mplishment of Exported in column (E) of the PRODUCTS A diaries and Disrement of the Property o	f Part VII contributor such purposes AND SERVICE AND SERVICE garded Entition activities conal Benefit a personal benefit co	uted importantly to the s). ES TO NEEDY IND ES TO NEEDY IND ies (See instructions.) (D) Total income Contracts (See instructions)	CIVIDUALS IN OIVIDUALS IN (E) End-of-year assets ructions.) Yes X No No
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Part VIII Line No. 93A&B 103 Part IX Name, part N/A Part X a Did the b Did the Note: /	Explain how each activity for which of the organization's exempt purpor PROVIDE DISASTER RELIDINESSEE THE MIDDLE TENNESSEE THE MIDDLE T	n income is reposes (other that is see (other that	mplishment of Exported in column (E) of the PRODUCTS A diaries and Disrement of the Property o	f Part VII contributor such purposes AND SERVICE AND SERVICE garded Entition activities conal Benefit a personal benefit co	uted importantly to the s). ES TO NEEDY IND ES TO NEEDY IND ies (See instructions.) (D) Total income Contracts (See instructions) effit contract?	CIVIDUALS IN OIVIDUALS IN (E) End-of-year assets ructions.) Yes X No No
Part VIII Line No. 93A&B 103 Part IX Name, part N/A Part X a Did the b Did the Note: /	Explain how each activity for which of the organization's exempt purportion of the organization's exempt purportion. PROVIDE DISASTER RELIDINESSEE PROVIDE DISASTER RELIDINESSE PROVIDE DISASTER RELIDINESSE PROVIDE DISASTER	n income is reposes (other that is see (other that	mplishment of Exported in column (E) of the PRODUCTS A diaries and Disrement of the Property o	f Part VII contributor such purposes AND SERVICE AND SERVICE garded Entition activities conal Benefit a personal benefit co	uted importantly to the s). ES TO NEEDY IND ES TO NEEDY IND ies (See instructions.) (D) Total income Contracts (See instructions) effit contract?	CIVIDUALS IN OIVIDUALS IN (E) End-of-year assets ructions.) Yes X No Yes X No knowledge and belief, it is
Part VIII Line No. 93A&B 103 Part IX Name, part IX A Did the b Did the Note: / Please Sign Here	Explain how each activity for which of the organization's exempt purportion of the organization's exempt purportion. PROVIDE DISASTER RELIDER THE MIDDLE TENNESSEE PROVIDE DISASTER RELIDER THE MIDDLE TENNESSEE Information Regarding Tax (A) address, and EIN of corporation, thership, or disregarded entity Information Regarding Trace organization, during the year, receive any function of the organization, during the year, pay for 'Yes' to (b), file Form 8870 and Form Under penalties of perjury, I declare that I have true, correct, and complete. Declaration of present the penaltic of officer Signature of officer Type or print name and title	n income is reposes (other that is reposes (other that is reposes (other that is reposes (other that is reposes (other than is reposes (o	mplishment of Exported in column (E) of the PRODUCTS A diaries and Disrement of the Property o	f Part VII contribor such purposes AND SERVICE AND SERVICE garded Entit activities conal Benefit a personal benefit ca a personal benefit ca a personal benefit ca a personal benefit ca	uted importantly to the s). ES TO NEEDY IND ES TO NEEDY IND ICS (See instructions.) (D) Total income Contracts (See instructions) effit contract? effit contract? Date Check if self.	Creparer's SSN or PTIN (see
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Part VIII Line No. 93A&B 103 Part IX Name, part IX A Did the b Did the Note: / Please Sign Here Paid Preparer's	Explain how each activity for which of the organization's exempt purpor PROVIDE DISASTER RELIDINESSEE PROVIDE DISASTER RELIDINESSEE PROVIDE DISASTER RELIDINESSEE INformation Regarding Tax (A) address, and EIN of corporation, thership, or disregarded entity Information Regarding Trae organization, during the year, receive any funder organization, during the year, pay for 'Yes' to (b), file Form 8870 and Form Under penalties of perjury, I declare that I have true, correct, and complete. Declaration of presentation of pres	n income is reposes (other that is reposes (other that is reposes (other that is reposes (other than is reposes (o	mplishment of Exported in column (E) of the products A column (E) of the products A column (E) of the products A column (E) the products A column (C) the products A column (C) the product A column	f Part VII contribor such purposes AND SERVICE AND SERVICE garded Entit activities conal Benefit a personal benefit ca a personal benefit ca a personal benefit ca a personal benefit ca	uted importantly to the s). ES TO NEEDY IND ES TO NEEDY IND ies (See instructions.) (D) Total income Contracts (See instructions) effit contract? Date Check if self-employed Check if self-	Creparer's SSN or PTIN (see
Part VIII Line No. 93A&B 103 Part IX Name, part IX A Did the b Did the Note: / Please Sign Here Paid Pre-	Explain how each activity for which of the organization's exempt purpor PROVIDE DISASTER RELIDINESSEE PROVIDE DISASTER RELIDINESSEE PROVIDE DISASTER RELIDINESSEE INformation Regarding Tax (A) address, and EIN of corporation, thership, or disregarded entity Information Regarding Trae organization, during the year, receive any funder organization, during the year, pay for 'Yes' to (b), file Form 8870 and For Under penalties of perjury, I declare that I have true, correct, and complete. Declaration of president properties of perjury, I declare that I have true, correct, and complete. Declaration of president properties of perjury. I declare that I have true, correct, and complete. Declaration of president properties of perjury. I declare that I have true, correct, and complete. Declaration of president properties of perjury. I declare that I have true, correct, and complete. Declaration of president properties of perjury. I declare that I have true, correct, and complete. Declaration of president properties of perjury.	n income is reposes (other than the poses (o	mplishment of Exported in column (E) of the PRODUCTS A start of the providing funds for the product of the prod	f Part VII contribor such purposes AND SERVICE AND SERVICE garded Entit activities conal Benefit a personal benefit ca a personal benefit ca a personal benefit ca a personal benefit ca	uted importantly to the s). ES TO NEEDY IND ES TO NEEDY IND ICS (See instructions.) (D) Total income Contracts (See instructions) effit contract? ements, and to the best of my rer has any knowledge. Date Check if self.	CIVIDUALS IN OIVIDUALS IN (E) End-of-year assets ructions.) Yes X No Yes X No Knowledge and belief, it is Preparer's SSN or PTIN (see linear all instruction w)

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information — (See separate instructions.)

2003

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

NASHVILLE AREA CHAPTER OF THE AMERICAN NONE RED CROSS Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See instructions. List each one. If there are none, enter 'None.') (a) Name and address of each (b) Title and average (c) Compensation (d) Contributions (e) Expense account and other employee paid more than \$50,000 hours per week devoted to position to employee benefit plans and deferred allowances compensation NONE Total number of other employees paid over \$50,000 Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions. List each one (whether individuals or firms). If there are none, enter 'None.') (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation GRIZZARD ADVERTISING, INC. 1144 MAILING AVE SE, ATLANTA, GA 30315 DIRECT MAIL SERVICE 90,145. Total number of others receiving over \$50,000 for professional services.

NASHVILLE AREA CHAPTER OF THE AMERICAN

NONE

Page 2

Schedule A (Form 990 or 990-EZ) 2003

Schedule A (Form 990 or 990-EZ) 2003 NASHVILLE AREA CHAPTER OF THE AMERICA Page 3 Part IV:A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. **(b)** 2001 Calendar year (or fiscal year (a) 2002 beginning in)..... Total Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.). 2,165,883 2,240,665 1,675,151 1,245,921 7,327,620. Membership fees received . . Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's 2,551,982. 790.726. 655,533 594,600 511,123. charitable, etc, purpose Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organ-<u>6,2</u>51 <u>33,</u> 385 ization after June 30, 1975 . 24,211 22,751 86,598. Net income from unrelated business activities not included in line 18... Tax revenues levied for the 20 organization's benefit and either paid to it or expended on its behalf..... The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge. 22 Other income, Attach a schedule. Do not include gain or (loss) from sale of capital assets. SEE . STMT . 11 16,837. 27,191 17,031 61,059. 2,979,697. 2,947,600. 2,309,533. 1,790,429. 23 Total of lines 15 through 22 10,027,259. 1.279,306 2,292,067. 2,188,971 1,714,933. 7,475,277 24 Line 23 minus line 17...... 17,904. 29,476 23,095. Enter 1% of line 23..... 29,797. a Enter 2% of amount in column (e), line 24..... 26 a Organizations described on lines 10 or 11: 149,506. b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your 26 b 67,482. c Total support for section 509(a)(1) test: Enter line 24, column (e) 26 c 7,475,277. 86,598. 19 d Add: Amounts from column (e) for lines: 61,059. 215,139. 26 b 26 d e Public support (line 26c minus line 26d total)..... 26 e 7,260,138. f Public support percentage (line 26e (numerator) divided by line 26c (denominator))..... 26 f 97.12 % 27 Organizations described on line 12: N/A a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year: (2002)---- (2001) _____(2000) _ _ _ _ _ (1999) bFor any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: _ _ _ _ _ (2001) _ _ _ c Add: Amounts from column (e) for lines: 27 c d Add: Line 27a total..... and line 27b total..... 27 d e Public support (line 27c total minus line 27d total)..... 27 e f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) > 27f q Public support percentage (line 27e (numerator) divided by line 27f (denominator))...... 27 q 응 h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 27 h

Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Private School Questionnaire (See instructions.) Part V (To be completed ONLY by schools that checked the box on line 6 in Part IV) N/A Yes No Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, 29 other governing instrument, or in a resolution of its governing body?..... Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, 30 and scholarships?..... Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?..... 31 If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.) 32 Does the organization maintain the following: a Records indicating the racial composition of the student body, faculty, and administrative staff?..... 32 a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?... 32b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?..... 32c 32 d If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.) 33 Does the organization discriminate by race in any way with respect to: a Students' rights or privileges?..... 33 a 33b **b** Admissions policies?..... c Employment of faculty or administrative staff?..... 33c d Scholarships or other financial assistance?..... 33 d 33 e e Educational policies?..... f Use of facilities?..... 33 f g Athletic programs?..... 33 g h Other extracurricular activities? 33 h If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.) 34a Does the organization receive any financial aid or assistance from a governmental agency?..... b Has the organization's right to such aid ever been revoked or suspended?..... 34 b If you answered 'Yes' to either 34a or b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.....

NONE Schedule A (Form 990 or 990-EZ) 2003 NASHVILLE AREA CHAPTER OF THE AMERIC Page 5 Lobbying Expenditures by Electing Public Charities (See instructions.) (To be completed ONLY by an eligible organization that filed Form 5768) N/A if the organization belongs to an affiliated group. Check ► b if you checked 'a' and 'limited control' provisions apply. Check ► (a) Affiliated group (b) Limits on Lobbying Expenditures To be completed totals for ALL electing (The term 'expenditures' means amounts paid or incurred.) organizations 36 Total lobbying expenditures to influence public opinion (grassroots lobbying)...... Total lobbying expenditures to influence a legislative body (direct lobbying) 37 37 38 Other exempt purpose expenditures 39 39 40 40 Lobbying nontaxable amount. Enter the amount from the following table -If the amount on line 40 is -The lobbying nontaxable amount is -Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000...... \$175,000 plus 10% of the excess over \$1,000,000 41 Over \$1,500,000 but not over \$17,000,000...... \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000...... \$1,000,000..... 42 Grassroots nontaxable amount (enter 25% of line 41)..... 42 43 43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36...... Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38...... Caution: If there is an amount on either line 43 or line 44, you must file Form 4720. 4 -Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50.) Lobbying Expenditures During 4 -Year Averaging Period (a) (b) Calendar year (c) (d) (e) (or fiscal year 2003 2002 2001 2000 Total beginning in) > Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e)) . . . Total lobbying expenditures. Grassroots nontaxable amount. Grassroots ceiling amount (150% of line 48(e)). Grassroots lobbying expenditures. Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See instructions.) N/A During the year, did the organization attempt to influence national, state or local legislation, including any Yes No Amount attempt to influence public opinion on a legislative matter or referendum, through the use of: b Paid staff or management (Include compensation in expenses reported on lines c through h.)....... c Media advertisements..... e Publications, or published or broadcast statements..... f Grants to other organizations for lobbying purposes g Direct contact with legislators, their staffs, government officials, or a legislative body......

h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means......

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

i Total lobbying expenditures (add lines c through h.)

Part VIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

of the	Code (other than section	n 501(c)(3) o	rganizations) or in section 527, relatir		in section		
	•	-	o a noncharitable exempt organization			Yes	No_
• • •				• • • • • • • • • • • • • • • • • • • •	51 a (i)		X
(ii) O	other assets	• • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	a (ii)		X
	transactions:					•	
(i) S	ales or exchanges of ass	ets with a n	oncharitable exempt organization				_X_
(ii)P	furchases of assets from a	a noncharita	able exempt organization		b (ii)		X
							Χ
(iv)R	leimbursement arrangeme	ents			b (iv)		X
	_						Χ
(vi)P	erformance of services or	r membersh	ip or fundraising solicitations		b (vi)		X
							X
d If the the go any tr	answer to any of the abo oods, other assets, or ser ransaction or sharing arra	ve is 'Yes,' vices given ngement, st	complete the following schedule. Coll by the reporting organization. If the o now in column (d) the value of the go	umn (b) should always show the fair mar organization received less than fair mar ods, other assets, or services received	arket value ket value i :	e of in	
(a) Line no.	(b) Amount involved		(c) noncharitable exempt organization	(d) Description of transfers, transactions, and			is 2
N/A							
					-		
							
					·		
-							
	organization directly or in ibed in section 501(c) of the s.' complete the following		liated with, or related to, one or more her than section 501(c)(3)) or in secti	tax-exempt organizations on 527?	► Ye	s X	No
D // 100		Jonedaic.	(b)	(c)			
N/A	(a) Name of organization		(b) Type of organization	(c) Description of relation	nship		
.1/ 11							
					_		
			· · · · · · · · · · · · · · · · · · ·				
				-			
				· · · · · · · · · · · · · · · · · · ·			

FEDERAL STATEMENTS

NASHVILLE AREA CHAPTER OF THE AMERICAN **RED CROSS**

PAGE 1

NONE

STATEMENT 1 FORM 990, PART I, LINE 7 OTHER INVESTMENT INCOME

ANNUITY INCOME....

65,005. TOTAL \$ 65,005.

STATEMENT 2 FORM 990, PART I, LINE 8 NET GAIN (LOSS) FROM NONINVENTORY SALES

PUBLICLY TRADED SECURITIES

GROSS SALES PRICE: COST OR OTHER BASIS: 55,186.

56,771.

TOTAL GAIN (LOSS) PUBLICLY TRADED SECURITIES \$ -1,585.

OTHER ASSETS

DESCRIPTION:

DESCRIPTION:
DATE ACQUIRED:
HOW ACQUIRED:

GENERATOR 2/10/1999 PURCHASE 2/10/1999

DATE SOLD: TO WHOM SOLD: 6/30/2004

GROSS SALES PRICE: COST OR OTHER BASIS:

1,500.

6,500.

DEPRECIATION:

5,092.

GAIN (LOSS)

92.

TOTAL GAIN (LOSS) OTHER ASSETS \$ 92.

TOTAL NET GAIN (LOSS) FROM NONINVENTORY SALES \$

STATEMENT 3 FORM 990, PART I, LINE 9 **NET INCOME (LOSS) FROM SPECIAL EVENTS**

SPECIAL EVENTS	GROSS RECEIPTS	LESS CONTRI- BUTIONS	GROSS REVENUE	LESS DIRECT EXPENSES	NET INCOME (LOSS)
RHAPSODY IN RED BANQUET AND		_			
PATTON DINNER	181,750. 148,068.	0. 0.	181,750. 148,068.		133,989. 94,292.
LIFE SAVER SOCIETY B'FAST TOTAL	124,195. \$ 454,013.	<u>\$</u> 0.	124,195. \$ 454,013.	15,290. \$ 116,827.	108,905. \$ 337,186.

2003			ATEMENTS ER OF THE AMI OSS		PAGE NON
	I, LINE 20 IS IN NET ASSETS OR FUIN ON INVESTMENTS			TOTAL	\$ 3,679. \$ 3,679.
FOOD, SHELTER	II, LINE 23 TANCE TO INDIVIDUALS AND CLOTHING			TOTAL	8,413.
STATEMENT 6 FORM 990, PART INVESTMENTS -				VALUATION	
OTHER SECURITI INVESTMENT IN	ARC ENDOWMENT FUND			METHOD MARKET VALUE TOTAL	\$ 33,000. \$ 33,000.
		TOTA	L INVESTMENT	S - SECURITIES	\$ 33,000.
STATEMENT 7 FORM 990, PART LAND, BUILDING	S, AND EQUIPMENT			ACCUM.	BOOK
MACHINERY AND BUILDINGS LAND	CATEGORY EQUIPMENT	TOTAL	BASIS 367,015 1,301,813 203,156 1,871,984	509,108.	792,705. 203,156.

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FEDERAL STATEMENTS

NASHVILLE AREA CHAPTER OF THE AMERICAN **RED CROSS**

PAGE 3

42,421.

8,150.

NONE

STATEMENT 8 FORM 990, PART IV, LINE 64B MORTGAGES AND OTHER NOTES PAYABLE

OTHER NOTES PAYABLE

LENDER'S NAME: DATE OF NOTE: MATURITY DATE: REPAYMENT TERMS:

SECURITY PROVIDED: PURPOSE OF LOAN:

ORIGINAL AMOUNT: BALANCE DUE:

LENDER'S NAME:

DATE OF NOTE:

US BANK 3/28/2003

3/28/2006 MONTHLY PAYMENTS \$345 COMPUTERS

CAPITAL LEASE AGREEMENT

53,346.

FIFTH THIRD BANK

12/11/2003 12/11/2006

MATURITY DATE: REPAYMENT TERMS: MONTHLY PAYMENTS OF \$281

INTEREST RATE: 4.99%

SECURITY PROVIDED:

ORIGINAL AMOUNT:

2000 PLYMOUTH VOYAGER

10,233.

BALANCE DUE:

TOTAL \$ 50,571.

\$

STATEMENT 9 FORM 990, PART IV, LINE 65 OTHER LIABILITIES

INTER-RED CROSS PAYABLES.....

325,573. 325,573. TOTAL \$

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
ANTHONY S. HIGGINBOTHAM	CEO 40	\$ 113,000.	\$ 10,265.	\$ 0.
BRENTWOOD, TN	40			
EVELYN ACOSTA	ACCOUNTING MGR	55,000.	4,785.	0.
NASHVILLE, TN	40			
BRENDA BLACKMORE	DIR. EMERG SVCS	62,629.	5,252.	0.
ANTIOCH, TN	40			

FEDERAL STATEMENTS

NASHVILLE AREA CHAPTER OF THE AMERICAN RED CROSS

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NONE

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	 COMPEN- SATION	CONTRI- BUTION TO EBP & DC	ACCOUNT/
MATTHEW BOURLAKAS	DIR. HLTH/SAFE	\$ 60,000.	\$ 2,285.	\$ 0.
NASHVILLE, TN				
SHIRLEY DRESCHER	DIR. FINANC DEV	53,133.	2,131.	0.
NASHVILLE, TN	40			
JAMES BLACKSTONE	BOARD MEMBER	0.	0.	0.
BRENTWOOD, TN	.,			
MARC FORTUNE	BOARD MEMBER	0.	0.	0.
BRENTWOOD, TN	• /			
MICKI SLINGERLAND	TREASURER	0.	0.	0.
NASHVILLE, TN	1			
BILL PENNY	SECRETARY 1	0.	0.	0.
NASHVILLE, TN	1			
RAMON CISNEROS	BOARD MEMBER	0.	0.	0.
FRANKLIN, TN	. /			
RICK OSGOOD	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	. /			
PETER ROUSOS	BOARD MEMBER	0.	0.	0.
BRENTWOOD, TN	.7			
STEVE BRUMFIELD	BOARD MEMBER	0.	0.	0.
BRENTWOOD, TN	.7			
CARL MCCAMMON	BOARD MEMBER	0.	0.	0.
BRENTWOOD, TN	.7			
CHRISTY COLEMAN	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	.7			

FEDERAL STATEMENTS

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NASHVILLE AREA CHAPTER OF THE AMERICAN RED CROSS

NONE

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
TODD CREASY	BOARD MEMBER	\$ 0.	\$ 0.	\$ 0.
GALLATIN, TN	• 1			
DOUG ROHLEDER	BOARD MEMBER	0.	0.	0.
BRENTWOOD, TN	• 1			
JEFF KAPLAN	BOARD MEMBER	0.	0.	0.
FRANKLIN, TN	. 1			
KEVIN CRUMBO	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	. /			
JANA DAVIS	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	. 1			
RAUL REGALADO	CHAIRMAN 2	0.	0.	0.
NASHVILLE, TN	2			
CHARLES BADER	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	• 1			
RAY DAYAL	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	. 1			
DEKE ELLWANGER	BOARD MEMBER	0.	0.	0.
BRENTWOOD, TN	. /			
HATTIE M. DEWALT	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	.7			
ANNETTE DORRIS	BOARD MEMBER	0.	0.	0.
HERMITAGE, TN	.7			
FARSHEED FERDOWSI	BOARD MEMBER	0.	0.	0.
BRENTWOOD, TN				

FEDERAL STATEMENTS NASHVILLE AREA CHAPTER OF THE AMERICAN RED CROSS

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NONE

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	ACCOUNT/
HOWARD GENTRY	BOARD MEMBER			\$ 0.
NASHVILLE, TN	• /			
VINCENT W. DURNAN	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	• 1			
MARK EZELL	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	• /			:
KEITH FRAZIER	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	. /			
DENNIS GEORGE	BOARD MEMBER	0.	0.	0.
OLD HICKORY, TN	• 1			
NANCY LEACH	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	• /			
KATHLEEN MCENERNEY	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	. /			
MARTEE HARRIS	BOARD MEMBER	0.	0.	0.
OLD HICKORY, TN	• /			;
QUENCY HOLMES	BOARD MEMBER	0.	0.	0.
GALLATIN, TN	. /			
RICHARD PATTON	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	. 1			
CRISSY PAXTON	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	• 1			
WALT LEAVER	BOARD MEMBER .7	0.	0.	0.
NASHVILLE, TN	• 1			

FEDERAL STATEMENTS

NASHVILLE AREA CHAPTER OF THE AMERICAN RED CROSS

NONE

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NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED		CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
GUS PURYEAR	BOARD MEMBER	\$ 0.	\$ 0.	\$ 0.
NASHVILLE, TN	.7			
RONAL SERPAS	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	. /			
JOHN PARKER	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	.7			
CARTER TODD	BOARD MEMBER	0.	0.	0.
NAHSVILLE, TN	.7			
HEATHER PETERSON	BOARD MEMBER	0.	0.	0.
FRANKLIN, TN	.7			
PRAMOD WASUDEV	BOARD MEMBER	0.	0.	0.
NASHVILLE, TN	.7			
SPENCER WIGGINS	BOARD MEMBER	0.	0.	0.
BRENTWOOD, TN	.7			
ANN WHITESIDE	BOARD MEMBER	0.	0.	0.
GALLATIN, TN	.7			
JOHN WRIGHT	BOARD MEMBER	0.	0.	0.
BRENTWOOD, TN	.7			
MARY JO WIGGINS	CFO	39,167.	4,937.	0.
NASHVILLE, TN	40			
KARLA SMITH	CHAIR ELECT	0.	0.	0.
NASHVILLE, TN	2			
SUSAN S. WEISS	BOARD MEMBER	0.	0.	0.
BRENTWOOD, TN	.7			

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FEDERAL STATEMENTS

NASHVILLE AREA CHAPTER OF THE AMERICAN RED CROSS

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NONE

STATEMENT 10 (CONTINUED) FORM 990, PART V LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
AMY HALL	DIR PUBLIC COMM	\$ 38,189.	\$ 2,957.	\$ 0.
NASHVILLE, TN	40			
JEREMY STEPHENS	BOARD MEMBER	0.	0.	0.
FRANKLIN, TN	.7			
JOE FLYNN	DIR VOLUNT. SVC	48,000.	8,239.	0.
NASHVILLE, TN	40			
	TOTAL	\$ 469,118.	\$ 40,851.	\$ 0.

STATEMENT 11 SCHEDULE A, PART IV-A, LINE 22 OTHER INCOME

DESCRIPTION		(A) 2002	_(B) 2001	(C) 2000	(D) 1999	(E) TOTAL
OTHER INCOME		\$ 16,837.	\$ 27,191.	\$ 17,031.	\$ 0.	\$ 61,059.
	TOTAL	\$ 16,837.	\$ 27,191.	\$ 17,031.	\$ 0.	\$ 61,059.

FEDERAL SUPPLEMENTAL INFORMATION

NASHVILLE AREA CHAPTER OF THE AMERICAN RED CROSS

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NONE

DEPRECIATION EXPENSE 990, PART II, LINE 42

BUILDING IMPROVEMENTS:

EQUIPMENT:

\$29,351 38,910

\$68,261

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2003 FEDERAL EXEMPT ORGAN NASHVILLE AREA CHAPTE	PAGE 1		
RED CR	NONE		
	2003	2002	DIFF
REVENUE	2003	2002	DIFF
CONTRIBUTIONS, GIFTS, AND GRANTS. PROGRAM SERVICE REVENUE INTEREST ON SAVINGS/TEMP CASH INVEST OTHER INVESTMENT INCOME NET GAIN (LOSS) - NONINV. ASSETS/DISP NET INCOME (LOSS) - SPECIAL EVENTS OTHER REVENUE.	1,545,563 780,647 2,571 65,005 -1,493 337,186 26,110	2,083,672 653,454 6,251 0 -5,442 86,524 16,837	-538,109 127,193 -3,680 65,005 3,949 250,662 9,273
TOTAL REVENUE	2,755,589	2,841,296	-85,707
EXPENSES PROGRAM SERVICES MANAGEMENT AND GENERAL FUNDRAISING	1,731,499 314,840 436,686	2,121,258 329,043 606,003	-389,759 -14,203 -169,317
TOTAL EXPENSES	2,483,025	3,056,304	-573,279
NET ASSETS OR FUND BALANCES EXCESS OR (DEFICIT) FOR THE YEAR NET ASSETS/FUND BAL. AT BEG. OF YEAR OTHER CHANGES IN NET ASSETS/FUND BAL NET ASSETS/FUND BAL. AT END OF YEAR	272,564 1,979,286 3,679 2,255,529	-215,008 2,196,755 -2,461 1,979,286	487,572 -217,469 6,140 276,243

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