## 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)

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

	For the	2009 calend	ar year, c	r tax year beginn	ing 7/01	, 200	09, and ending	6/30		, 2010	
В		applicable:		С					yer Ident	ification Number	
	Addr	ress change	Please use IRS label	THE ARC OF	TENNESSEE,	INC.		62-	0639	154	
	Nam	ie change	or print or type.	151 ATHENS	WAY, SUITE	100		E Teleph			
	$\vdash$	al return	See specific	NASHVILLE,	TN 37228			615	-248	-5878	
	$\vdash$	nination	Instruc- tions.					010			
	$\vdash$	nded return						G Gross	ropointa !	• 2 628	3,907.
	$\vdash$	lication pending	F Name a	I and address of principal	officer:		Н	(a) Is this a group retu			Table 1
	, ,, <sub>1</sub> , <sub>2</sub> ,	neation penaling	l	AS C ABOVE				(b) Are all affiliates inc		Ye	
1	Tax-e	exempt statu			(insert no.)	4947(a)(1) or	527	If 'No,' attach a list.	(see ins	structions)	
 J				RCTN.ORG	(III)OCI ( TIO.)	13-47 (4)(1) 61		(c) Group exemption n	umbar Þ	•	
K		of organization:			Association Othe	xr <b>▶</b> [1	L Year of Formation			egal domicile: T	NT
	nt I	Summa		71011	713300141011		L Teal Of Formation	1. 1302 M	state of t	egai domicile: 1.	LV
0000000		Briefly descri	be the ord	anization's missio	on or most significa	ant activities:	TO PROMOT	E THE GENER	ΔT. Ta	FI.IBETM	2 OF
d.	7	ALL CITI	ZENS W	ITTH TNTELLE	CTUAL_AND/C	R DEVELOPM	ENTAL DIS	ABILITIES	7.7TT 1.7	<u>,                                    </u>	3_ Oī
Activities & Governance					3 - 3 - 2 - 2 - 2			**********			
ıne	_										
OV6		heck this bo	× ►	if the organization	discontinued its o	perations or dis	posed of more	than 25% of its a	ssets.		
ত			ting mem	bers of the goverr	ning body (Part VI,	, line 1a)			3		26
es					of the governing b				4		26
Ϋ́Ε	5 T	otal number	of emplo	yees (Part V, line	2a)				5		71
₽cti					ecessary)						20
•					from Part VIII, colu						0.
	D IV	iet ui li elateu	DUSINESS	taxable income in	rom Form 990-T, li	116 34			7b		0.
		\ambuita, diama		to (Dont VIII line 1	11-1			Prior Year	F 0	Current \	
ne					1h)			1,723,1			7212.
Revenue					29)			531,7	15.	900	784.
æ					es 5, 6d, 8c, 9c, 10				700.		818. 5,093.
	1				must equal Part V	•	ļ	2,263,5			3,093. 3,907.
					(, column (A), line:			2,200,0	707.	2,020	7,301.
					, column (A), line						
			nsation, employee	1,339,3	158	1 730	938.				
ses	}			· -	olumn (A), line 11e	* * *	· •	1,000,0	750.	1,750	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Expenses				• • •	. ,.	•	į.				
X					ımn (D), line 25) ►		2,103.			= = =	
					es 11a-11d, 11f-24	-	t t	822,8			,871.
	;				qual Part IX, colun		, t	2,162,1			,809.
	19 R	devenue less	expenses	s. Subtract line 18	from line 12			101,3		110	,098.
Net Assets or Fund Balances								Beginning of Y		End of Y	
tssel Bala				*				726,8			,652.
let /				,				313,0			,373.
		*		<del></del>	e 21 from line 20.			413,8	16.	535	,279.
Pa	ırt II	<u> </u>	ure Bloc								
		Under penaltie true, correct, a	s of perjury, and complete	I declare that I have ex Declaration of prepare	amined this return, incluer (other than officer) is	iding accompanying s based on all informati	chedules and state	ments, and to the best er has any knowledge.	of my kr	nowledge and belie	ef, it is
c:		- 11	)	ilabbo 191				1 12/12	1	2	
Sig He	gn re	Signature	of officer	NEXU VI	MUN				QUI	<u> </u>	
110	10	► Con	or officer	the Count	on Enge	dia no	actor	Date			
		Type or pr	int name and	ed title	er Exect	Hive Dire	ector_				
		.,,,,,,			<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		Date		Dr	eparer's identifying	number
Pa	iА		i		Λ.		Date	Check if self-	(se	e instructions)	Hamber
Pro		Preparer's signature		74: 7/	Itta Com		10-11-10	employed <b>•</b>		00001450	
pa	rer's		ADII	CDA DIT	<u> </u>		""		[P(	00291458	
Us	e	Firm's name (or yours if self-		, CPAS, PLL		0.0			A 4 A	0.4.0.0.0	
Or	ıly	employed), address, and	<b>→</b> 332	····	VE DR STE 5	UU				84008	
	.,	ZIP + 4			7067-4836			Phone no.	615-	376-8800	
Ma	y the IR:	S discuss th	ıs return v	vith the preparer s	shown above? (see	e instructions)				X Yes	No

	990 (2009) THE ARC OF TENNESSEE, INC.	62-0639154	Page 2
Par	g g g g g g g g g g g g g g g g		
1	Briefly describe the organization's mission:  TO PROMOTE THE GENERAL WELL-BEING OF ALL CITIZENS WITH INTEL  DEVELOPMENTAL DISABILITIES.	LECTUAL AND/OR	
2	Did the organization undertake any significant program services during the year which were not listed		<del></del>
	Form 990 or 990-EZ?	Yes X	. No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program s	services? Yes X	No
4	If 'Yes,' describe these changes on Schedule O.  Describe the exempt purpose achievements for each of the organization's three largest program service and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants a expenses, and revenue, if any, for each program service reported.	es by expenses. Section 501(c)(3) and allocations to others, the total	)
<b>4</b> a	(Code:) (Expenses \$ 498,445. including grants of \$ 567,874 CLASS MEMBER ADVOCACY SERVICES (CMAS) - THE ARC TN PROVIDES IT SERVICES TO INDIVIDUALS WHO ARE PART OF THE DIDS SERVICE SYSTEOLLOWING PROTECTED CLASSES: ARLINGTON CLASS, SETTLEMENT CLARED TO PAST LAWSUITS). ADVOCACY IS SPECIFIC TO A GIVEN SWORKS WITH ALL INVOLVED TO ADDRESS THE CONCERN AND ASSURE PROPLACE.	TEM AND ARE IN ONE OF ASS, AT-RISK CLASS (A SITUATION WHERE THE S OPER SUPPORTS ARE IN	$\overline{L}$
4b	(Code:) (Expenses \$ 452,524. including grants of \$ SUPPORT BROKERAGE - THE ARC TN PROVIDES SUPPORT BROKERAGE SEE THE DIDS SELF-DETERMINATION WAIVER THAT HELPS THEM TO LOCATE, THEIR OWN SERVICES RATHER THAN RELYING ON TRADITIONAL PROVIDE	RVICES TO INDIVIDUALS , ACCESS AND COORDINA ERS.	294.) S_IN TE
-	(Code: 389,110 ADVOCACY, EDUCATION AND PUBLIC AWARENESS - THE ARC TN PROVIDE REFERRAL TO ANYONE WHO CONTACTS THE OFFICE SEEKING ASSISTANCE NEEDED, AND TRAINING/WORKSHOPS/CONSULTATION ON IN A VARIETY C SELF-DETERMINATION, PERSON-CENTERED PRACTICE, SELF-ADVOCACY, CONDUCT PATHS (PLANNING ALTERNATIVE TOMORROWS WITH HOPE) FOR ORGANIZATIONS UPON REQUEST.	ES INFORMATION AND E, INDIVIDUAL ADVOCAC DE AREAS INCLUDING AND OTHERS. WE ALSO	
<b>4</b>	Other program services. (Describe in Schedule O.)  SEE SCHEDULE O		
	(Expenses \$ 875,200. including grants of \$ 903,441.) (Revenue	e \$ 27,490.)	
4e	Total program service expenses ► 2,168,103.	- , 21, 130.)	

Form 990 (2009) THE ARC OF TENNESSEE, INC.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	24	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II.	4	X	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III.	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.			
•	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII			
•	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.			
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X			
	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	Х	
12 A	Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional			
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II.	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If 'Yes,' complete Schedule F, Part III</i>	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I.	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	10		v
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	19 20		X X

Form 990 (2009) THE ARC OF TENNESSEE, INC.

Part IV Checklist of Required Schedules (continued)

	entertained Continuedy			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	00		37
2/		23		<u>X</u>
	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		Х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25 a		X
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I.	251		v
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	25b		X
	disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	<b>a</b> A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Χ
	<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes</i> ,' <i>complete Schedule L, Part IV</i>	28b		Х
	c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Χ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I.</i>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Х	

BAA

Form 990 (2009)

## Form 990 (2009) THE ARC OF TENNESSEE, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1	a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	)		
	<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	-		
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		Х
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
2	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
1	<b>b</b> If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule O</i>	3b		
4	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
-	b If 'Yes,' enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Χ
•	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5с		
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Х
ı	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
á	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Χ
1	<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
6	d If 'Yes,' indicate the number of Forms 8282 filed during the year			
	benefit contract?	7e		X
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 <b>g</b>		
	h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	-		
á	a Did the organization make any taxable distributions under section 4966?	9a		700000000
	b Did the organization make any distribution to a donor, donor advisor, or related person?	9 b		
10	Section 501(c)(7) organizations. Enter:			
ä	a Initiation fees and capital contributions included on Part VIII, line 12			
	b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	a Gross income from other members or shareholders			
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
k	b if 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			

BAA Form **990** (2009) Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ction A.	Governing Body and M	lanagement				w.v		
	<i></i>					1	F	Yes	No
1		number of voting members of				1a	26		
		number of voting members th	•			L	26		
	officer, di	ficer, director, trustee, or key ector, trustee or key employe	e?				2		Х
3	Did the or	ganization delegate control ov directors or trustees, or key	er management du	uties customarily pe	rformed by or u	nder the direct supervis	sion		177
4		ganization make any significal				n/	3		X
_		orior Form 990 was filed?						-	A
5	Did the or	ganization become aware duri	ing the vear of a m	naterial diversion of	the organization	i's assets?	5		X
6		organization have members o							- 21
7	a Does the governing	rganization have members, s body?SEE SCHEI	stockholders, or oth	ner persons who ma	ay elect one or m	nore members of the		a X	
	<b>b</b> Are any d	ecisions of the governing body							
	the follow	9				-			
	a The gover	ning body?					8	a X	
	<b>b</b> Each com	nittee with authority to act on	behalf of the gove	erning body?			8	b X	
	organizati	y officer, director or trustee, on's mailing address? <i>If 'Yes</i> ,	' provide the name	s and addresses in	Schedule 0		9		X
		Policies (This Section	n B requests in	formation about	t policies not	required by the In	iternal		
Rev	venue Code.	www.window						-,	
10	• Doos tha	rappization have lead chapte	vo bronches su si	66111 at a a 2			-	Yes	No
		rganization have local chapte						a X	-
	and brand	es the organization have writhes to ensure their operations	ten policies and pr are consistent wit	ocedures governing th those of the organ	itne activities of nization?	such chapters, affiliate	es,   10	ьХ	
11		ganization provided a copy of						X	
		Schedule O the process, if a							
		rganization have a written co					12	a X	
	to conflict	s, directors or trustees, and k ?	* * * * * * * * * * * * * * * * * * * *				12	X	
	<b>c</b> Does the Schedule	rganization regularly and con O <i>how this is done</i>	sistently monitor a	nd enforce compliar	nce with the poli	cy? If 'Yes,' describe in	7 12	c X	
13	Does the	rganization have a written wh	istleblower policy?				13	X	
14	Does the	rganization have a written do	cument retention a	and destruction polic	y?	***************	14	Х	
15	Did the pr persons, o	cess for determining compen omparability data, and conten	sation of the follow	ving persons include antiation of the delib	e a review and a eration and deci	pproval by independen ision?	t		
		zation's CEO, Executive Direc					15:	a X	
	<b>b</b> Other office	ers of key employees of the o	rganization				151	X	
		ine 15a or 15b, describe the p		`	,				
16	<b>a</b> Did the or entity duri	anization invest in, contribute	assets to, or parti	icipate in a joint ver	nture or similar a	rrangement with a taxa	able 16:	3	Х
	in joint vei	s the organization adopted a ture arrangements under app respect to such arrangement	dicable federal tax	law and taken sten	is to safediliard t	he organization's avon	nt li	3	
Se	ction C.	Disclosures						-1	
17	List the st	tes with which a copy of this	Form 990 is require	ed to be filed ► _	TN				
18	inspection	04 requires an organization to Indicate how you make these	e available. Check	all that apply.	icable), 990, and	1 990-T (501(c)(3)s only	') available	for pub	olic
	X Own v			X Upon request					
19		Schedule O whether (and if available to the public.							cial
20	State the NICOLE	ame, physical address, and t DAVIDSON 151 ATHER	elephone number ( NS_WAY, SUIT	of the person who p TE 100 NASHV	ossesses the bo	ooks and records of the 7228 615-248-58	organizati 878	on: — — <del></del> -	

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

## Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. See instructions for definition of 'key employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did	not compens	sate ar	пу сі	urrer	nt o	fficer,	dire	ctor, or trustee.		
(A)	(B)	(c) Position (check all that apply)						(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
MARY ANN SCHENK		-								
BOARD MEMBER	0			ļ				0.	0.	0.
KENNETH WINTER										
BOARD MEMBER	0							0.	0.	0.
LOIS DAVIS										
BOAR REP	0							0.	0.	0.
NORMAN TENENBAUM										
AT LARGE BM	0							0.	0.	0.
VONDA BERRY										1919
BOARD MEMBER	0							0.	0.	0.
MELISSA HALFACRE										
BOARD MEMBER	0							0.	0.	0.
DEL RAY NICHOLS									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
BOARD MEMBER	0							0.	0.	0.
SHARON BOTTORFF			ĺ		ļ					
BOARD REP	0							0.	0.	0.
GLENDA BOND						1				
PRESIDENT	5	X		Х				0.	0.	0.
HOLLY LU CONANT REES										
VICE PRESIDENT	5	X		X				0,	0.	0.
GINA LYNETTE				İ	ĺ					
SECRETARY	5	Х		X				0.	0.	0.
RON BUTLER			l				Ì			
TREASURER	5	X		X				0.	0.	0.
RUTH ROBERTS						İ				_
PAST PRESIDENT	5	X			_			0.	0.	0.
MADELINE NICHOLS										
REGIONAL VP	5	Х	_					0.	0.	0.
KATIE POWERS										
REGIONAL VP	5	X						0.	0.	0.
MERLE SMITH	_									
REGIONAL VP	5	X						0.	0.	0.
DONALD REDDEN	-	.,								
BOARD MEMBER	5	X						0.	0.	0.

BAA

Part VII Section A. Officers, Directors, Trus	tees,	Key	Er	npl	оу	ees,	an	nd Highest Co	mpensated Em	ployees (cont.)		
(A)	(B) (c) Average Position (check all that apply)							(D)	(E)	(F)		
Name and Title			tion (	(checl	k all i			Reportable	Reportable compensation from	Estimated		
	per week	or d	insti	Officer	Key	Highest employe	Former	compensation from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	amount of other compensation		
		Individual trustee or director	Institutional trustee	ĕ	em	Highest co	ner	(W-2/1099-WISC)	(W-2/1099-WISC)	from the organization		
		or tru	nal		employee	compensa				and related organizations		
		stee	trust		ď	pens						
			ee			ated						
		<u> </u>										
MEGAN_HART	l _											
BOARD MEMBER	5	X	<u> </u>		ļ			0.	0.	0.		
CAROL GREENWALD	_					l	ĺ	_				
BOARD MEMBER	5	Х						0.	0.	0.		
DORIA PANVINI	_							_				
BOARD MEMBER	5	X						0.	0.	0.		
CARLENE LEAPER												
BOARD MEMBER	5	X		ļ	<u> </u>		_	0.	0.	0.		
LUKE RANDALL	_											
BOARD MEMBER	5	X						0.	0.	0.		
JOHN LEWIS	_					1 1						
BOARD MEMBER	5	X						0.	0.	0.		
MELINDA SWAFFORD												
BOARD MEMBER	5	Х						0.	0.	0.		
PAT BUTLER												
BOARD MEMBER	5	Х						0.	0.	0.		
MARY JORDAN												
BOARD MEMBER	5	X						0.	0.	0.		
ELISE MCMILLAN					İ							
BOARD MEMBER	5	X						0.	0.	0.		
CARRIE HOBBS GUIDEN												
EXECUTIVE DIREC	40				X			90,664.	0.	0.		
									***			
						<u></u>	<b>&gt;</b>	90,664.	0.	0.		
2 Total number of individuals (including but not limited	to those	e list	ed a	abov	/e) v	vho r	ece	ived more than \$	100,000 in reportabl	e compensation		
from the organization   0												
										Yes No		
3 Did the organization list any former officer, director of	or truste	e, ke	еу е	mple	oye	e, or	high	hest compensated	l employee			
on line 1a? If 'Yes,' complete Schedule J for such in.  4 For any individual listed on line 1a, is the sum of rep										3 X		
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th	ortable an \$150	com 0.000	pen  ? <i> 1</i>	satio 'Ye	on a s' c	na oi ombl	tner <i>ete</i>	compensation fro Schedule J for su	om ch			
individual		·								4 X		
5 Did any person listed on line 1a receive or accrue co	mpensa	ation	fror	n ar	าง นเ	nrela	ted	organization for s	ervices			
rendered to the organization? If 'Yes,' complete Sch	edule J	for s	uch	per	śon					5 X		
Section B. Independent Contractors	1											
1 Complete this table for your five highest compensate compensation from the organization.	a inaep	enae	ent	contr	ract	ors tr	nat i	received more tha	n \$100,000 of			
(1)				•••				(D)				
(A) (B) Name and business address Description of S										<b>(C)</b> Compensation		
S 3 3 5 1 1 1 1 2 5 1												
2 Total number of independent contractors (including b	ut not li	mite	d to	tho	se l	isted	abo	ove) who received	more than			
\$100,000 in compensation from the organization	0											

Pa	rt VIII Statement of Revenue	***			
		<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns     1a       b Membership dues     1b     5,331.       c Fundraising events     1c     3,799.       d Related organizations     1d     9,800.       e Government grants (contributions)     1e     1,860,425.       f All other contributions, gifts, grants, and similar amounts not included above     1f     75,857.       g Noncash contribns included in Ins 1a-1f:     \$				
SON	h Total. Add lines 1a-1f	1,955,212.			
	Business Code	1,955,212.			
PROGRAM SERVICE REVENUE	2a CONTRACT REVENUE 624100	656,784.	656,784.		
REV	b MEGACONFERENCE 561000	10,000.		74.54	
CE	c	10,000.	10,000.		
ERV	d				
S	_				
GRA	f All other program service revenue	-			
Š	g Total. Add lines 2a-2f.	666,784.			
	3 Investment income (including dividends, interest and	000,704.			
	other similar amounts)	818.			818.
	4 Income from investment of tax-exempt bond proceeds.	-			
	5 Royalties				
	(i) Real (ii) Personal				
	<b>6a</b> Gross Rents 5,600.				
	<b>b</b> Less: rental expenses				
	c Rental income or (loss) 5,600.				
	d Net rental income or (loss)	5,600.			5,600.
	7a Gross amount from sales of (i) Securities (ii) Other				3,000.
	assets other than inventory				
	<b>b</b> Less: cost or other basis and sales expenses				
	c Gain or (loss)				
ĺ	d Net gain or (loss)	-			
4UE	8a Gross income from fundraising events (not including, \$				
EVE	of contributions reported on line 1c).				
OTHER REVENU	See Part IV, line 18 a				
THE	<b>b</b> Less: direct expenses <b>b</b>				
0	c Net income or (loss) from fundraising events▶				
	9a Gross income from gaming activities. See Part IV, line 19a				
	<b>b</b> Less; direct expenses				
	c Net income or (loss) from gaming activities ▶				
	10a Gross sales of inventory, less returns and allowances				
	<b>b</b> Less: cost of goods sold				
ļ	c Net income or (loss) from sales of inventory	•			
}	Miscellaneous Revenue Business Code	]			
	11a OTHER REVENUE 900099	493.	493.		
	b				
	c				
	d All other revenue				
	e Total. Add lines 11a-11d	455.			
	12 Total revenue. See instructions	2,628,907.	667,277.	0.	6,418.

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must com	plete column (A) but a	e not required to comple	ete columns (B), (C), ar	d (D).
				1

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		57,557,550	general expenses	скропаса
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22		· · · · · · · · · · · · · · · · · · ·		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	trustees, and key employees	90,664.	87,037.	3,627.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	1,223,760.	1,057,645.	166,115.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)		\$		
9	Other employee benefits	416,514.	369,106.	47,408.	
10 11	Payroll taxes  Fees for services (non-employees)		V-1A		
	Management.				
k	Legal				
	Accounting				
	Lobbying	13,008.		13,008.	
	Prof fundraising svcs. See Part IV, In 17				
	Investment management fees	100,182.	68,331.	21 016	
	g Other	100,162.	00,331.	31,816.	35.
13	Office expenses.	33,961.	23,582.	10,099.	280.
14	Information technology	,		20,000.	
15	Royalties				7
16	Occupancy	61,754.	33,155.	28,599.	
17 18	Travel	279,690.	275,625.	4,065.	
	Conferences, conventions, and meetings				
20	Interest	2,297.		2,297.	
21	Payments to affiliates	8,173.		0 170	
22 23	Insurance	5,026.		8,173. 5,026.	
24		3,020.		3,020.	
а	INDIVIDUAL ASSISTANCE	89,473.	89,473.		
k	PA DIRECT SERVICES	82,342.	82,342.		
	COMMUNICATIONS	54,928.	42,917.	12,011.	
	EQUIPMENT RENTAL	29,188.	21,179.	6,775.	1,234.
	POSTAGE AND SHIPPING	15,761.	12,328.	2,879.	554.
	All other expenses.	12,088.	5,383.	6,705.	0 100
25 26	Total functional expenses. Add lines 1 through 24f  Joint costs. Check here ► if following	2,518,809.	2,168,103.	348,603.	2,103.
BAA	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				Form <b>990</b> (2009)

P	art X	Balance Sheet					
	<del></del>				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash — non-interest-bearing			293,199.	1	401,812.
	2	Savings and temporary cash investments		*: * * * * * * * * * * * * * * * * * *	115,582.	2	60,355.
	3	Pledges and grants receivable, net			168,024.	3	347,825.
	4	Accounts receivable, net			117,604.	4	83,320.
	5	Receivables from current and former officers, director and highest compensated employees. Complete Part				5	
	6	Receivables from other disqualified persons (as define					
٨		and persons described in section 4958(c)(3)(B). Comp			6		
A S S E T S	7	Notes and loans receivable, net				7	
Ĕ	8	Inventories for sale or use				8	
s		Prepaid expenses and deferred charges			11,569.	9	23,372.
	10 a	Land, buildings, and equipment: cost or other basis	10 a	151,446.			
		Complete Part VI of Schedule D					
	b	Less: accumulated depreciation		128,872.	20,847.	10 c	22,574.
	11	Investments - publicly-traded securities		11			
	12	Investments - other securities. See Part IV, line 11		12			
	13	Investments - program-related. See Part IV, line 11.		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			15	5,394.	
	16	Total assets. Add lines 1 through 15 (must equal line 3			726,825.	16	944,652.
	17	Accounts payable and accrued expenses			296,390.	17	167,115.
	18	Grants payable		18			
	19	Deferred revenue		19			
ļ	20	Tax-exempt bond liabilities				20	
Ą	21	Escrow or custodial account liability. Complete Part IV			21		
L I T	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per	stees, key e sons. Com	employees, plete Part II			
- 1		of Schedule L				22	
E S	23	Secured mortgages and notes payable to unrelated th				23	
	24	Unsecured notes and loans payable to unrelated third				24	
	25	Other liabilities, Complete Part X of Schedule D			16,619.	25	242,258.
	26	Total liabilities. Add lines 17 through 25			313,009.	26	409,373.
N E T		Organizations that follow SFAS 117, check here ► 27 through 29 and lines 33 and 34.	X and co	omplete lines			
A S	27	Unrestricted net assets			376,014.	27	501,166.
Š	28	Temporarily restricted net assets			37,802.	28	34,113.
Ĕ T S	29	Permanently restricted net assets			37,002.	29	34,113.
O R		Organizations that do not follow SFAS 117, check here		and complete		23	
		lines 30 through 34.		p.c.c			
F UND D	30	Capital stock or trust principal, or current funds		**		30	
	31	Paid-in or capital surplus, or land, building, and equipr				31	
A L A	32	Retained earnings, endowment, accumulated income,				32	
BALANCES	33	Total net assets or fund balances			413,816.	33	535,279.
Š	34	Total liabilities and net assets/fund balances			726,825.	34	944,652.
RΔ	Λ				0, 020.	- 1	3 1 1 , 0 3 2 .

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Form **990** (2009)

#### Part XI Financial Statements and Reporting Yes No X Accrual 1 Accounting method used to prepare the Form 990: Cash Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant?.... 2a **b** Were the organization's financial statements audited by an independent accountant?..... 2b c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? Χ 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single За Χ **b** If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits..... 3b

BAA

Form 990 (2009)

### SCHEDULE A (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

		e organization							Employe	er identifica	tion number		
		RC OF TENNES								63915			
Par	t I	Reason for Pu	ublic Charity Stat	<b>us</b> (All organizations	s must	comp	lete th	is par	t.) See	instru	ctions		
The o	orga	nization is not a pri	vate foundation becau	ıse it is: (For lines 1 throu	ugh 11, a	check or	nly one b	oox.)					
1		A church, convent	ion of churches or ass	ociation of churches desc	cribed in	section	170(b)(	(1) <b>(</b> A)(i).					
2		A school described	d in <b>section 170(b)(1)(</b>	<b>AXii).</b> (Attach Schedule E	Ξ.)								
3		A hospital or coop	erative hospital servic	e organization described	in section	on 170(b	χ1χΑχί	ii).					
4	4 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 st	ate:								·		
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(bX1XAXiv). (Complete Part II.)												
6 7		An organization th	r local government or at normally receives a <b>(XAXvi).</b> (Complete Pa	governmental unit descril substantial part of its su art II.)	bed in <b>s</b> e pport fro	ection 1: om a gov	<b>70(b)(1)</b> /ernmer	( <b>A)(v).</b> ntal unit	or from	the gene	eral public o	describ	ed
8	<u>[</u> ]	A community trust	described in section	1 <b>70(b)(1)(A)(vi).</b> (Complet	e Part II	.)							
9	X	from activities rela investment income June 30, 1975. Se	ited to its exempt func e and unrelated busine e <b>section 509(a)(2).</b> (C		excepti section 5	ons, and 511 tax)	i (2) no from bu	more th sinesse	an 33-1, s acquir	13 % of it	's sunnart f	rom ar	rice
10		An organization or	ganized and operated	exclusively to test for pu	blic safe	ty. See	section	509(a)(4	4).				
11		more publicly supp	oorted organizations c	exclusively for the benef lescribed in section 509(a zation and complete lines	a)(1) or $s$	ection 5	i09(a)(2)	ctions of ). See <b>s</b>	f, or carr <b>ection 5</b>	y out th∈ <b>09(a)(3).</b>	purposes Check the	of one box th	or nat
		a Type I	<b>b</b> Type II	c Type II	II – Fun	ctionally	integrat	ted		d 🗍	Type III-	Other	
е		By checking this b than foundation m: 509(a)(2).	ox, I certify that the or anagers and other tha	ganization is not controlle n one or more publicly su	ed direct upported	dy or inc organiz	lirectly bations o	y one c lescribe	r more o d in sec	disqualifi tion 509(	ed nerson	s other	
f		If the organization check this box	received a written det	ermination from the IRS	that is a	Type I,	Type II	or Type	III supp	orting or	ganization,		
g		Since August 17, 2	2006, has the organiza	tion accepted any gift or	contribu	ution fro	m any o	of the fo	lowing p	ersons?		Vaa	NI -
		(i) a person who below, the go	o directly or indirectly overning body of the s	controls, either alone or tupported organization?	ogether	with per	sons de	scribed	in (ii) a	nd (iii)	11 g (i)	Yes	No
		(ii) a family men	nber of a person desc	ribed in (i) above?							. 11 g (ii)		
		(iii) a 35% contro	olled entity of a person	described in (i) or (ii) ab	ove?						. 11g (iii)		
h		Provide the followi	ng information about t	he supported organizatio	ns.								
	(i)	Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiza (i) liste gove	Is the tion in col. d in your erning ment?	the organ	ou notify nization in (i) of upport?	organizat (i) organi	s the ion in col. zed in the S.?	(vii) Amour	t of Sup	port
					Yes	No	Yes	No	Yes	No			
									1				
						-		ļ					
						77							
Total													

THE ARC OF TENNESSEE, INC. Schedule A (Form 990 or 990-EZ) 2009 62-0639154 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total beginning in) Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.').... Tax revenues levied for the 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 . . . . . Total. Add lines 1-through 3.... The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) ... Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total beginning in) È **7** Amounts from line 4. Gross income from interest. dividends, payments received on securities loans, rents, royalties and income form similar sources. Net income from unrelated business activities, whether or not the business is regularly carried on..... 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ..... Total support. Add lines 7 through 10 . . . . . . . . . . . . Gross receipts from related activities, etc. (see instructions)..... 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here...... Section C. Computation of Public Support Percentage % 15 Public support percentage from 2008 Schedule A, Part II, line 14...... % 16a 33-1/3 support test - 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33-1/3 support test - 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17a 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 10%-facts-and-circumstances test** — **2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization......

Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions

## Schedule A (Form 990 or 990-EZ) 2009 THE ARC OF TENNESSEE, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

	tion A. Public Support						
	ndar year (or fiscal yr beginning in)	<b>(a)</b> 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	(d) 2008	<b>(e)</b> 2009	<b>(f)</b> Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.').	1,767,793.	2,277,345.	1,864,652.	2,250,318.	1,936,282.	10,096,390.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the			·			, , , , , , , , , , , , , , , , , , , ,
	organization's tax-exempt purpose						0.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6	Total. Add lines 1 through 5	1,767,793.	2,277,345.	1,864,652.	2,250,318.	1,936,282.	10,096,390.
7 a	Amounts included on lines 1, 2, 3 received from disqualified						
k	persons	0.	0.	0.	0.	0.	0.
	the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
c	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
	Public support (Subtract line			•	0.	0.	<u> </u>
	7c from line 6.)						10,096,390.
	tion B. Total Support		-				
Cale	ndar year (or fiscal yr beginning in)	<b>(a)</b> 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
				1 06/ 650	12 25N 318 I	1 936 202	10,096,390.
	Amounts from line 6	1,767,793.	2,277,345.				
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	1,238.	1,865.	1,215.	915.	818.	6,051.
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						6,051. 0. 6,051.
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) SEE PART IV.	1,238.	1,865.	1,215.	915.	818.	0. 6,051. 0. 0. 29,300.
10 a b c 11 12	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) SEE PART. IV.	1,238. 1,238. 3,944.	1,865. 1,865. 4,044.	1,215. 1,215. 8,012.	915. 915. 7,700.	818. 818. 5,600.	0. 6,051. 0. 6,051. 0. 29,300. 10,131,741.
10 a b c 11 12	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). SEE. PART. IV.  Total support. (add lins 9, 10c, 11, and 12.)  First five years. If the Form 990 i organization, check this box and	1,238. 1,238. 3,944.	1,865.  1,865.  4,044.	1,215.  1,215.  8,012.	915. 915. 7,700.	818. 818. 5,600.	0. 6,051. 0. 6,051. 0. 29,300. 10,131,741.
10 a b c 11 12	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). SEE. PART. IV.  Total support. (add lins 9, 10c, 11, and 12.)  First five years. If the Form 990 i	1,238. 1,238. 3,944.	1,865.  1,865.  4,044.	1,215.  1,215.  8,012.	915. 915. 7,700.	818. 818. 5,600.	0. 6,051. 0. 6,051. 0. 29,300. 10,131,741.
10 a b c 11 12	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . SEE . PART . IV.  Total support. (add Ins 9, 10c, 11, and 12.)  First five years. If the Form 990 i organization, check this box and tion C. Computation of Pu	1,238.  1,238.  3,944.  s for the organiza stop here.  blic Support F	1,865.  1,865.  4,044.  tion's first, second	1,215. 1,215. 8,012.	915. 915. 7,700.	818. 818. 5,600.	0. 6,051. 0. 6,051. 0. 29,300. 10,131,741.
10 a b c 11 12 13 14 Sec 15	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). SEE. PART. IV.  Total support. (add Ins 9, 10c, 11, and 12.)  First five years. If the Form 990 i organization, check this box and tion C. Computation of Puting in the service of the se	1,238.  1,238.  3,944.  s for the organizar stop here.  blic Support F	1,865.  1,865.  4,044.  tion's first, second	1,215. 1,215. 8,012. 4, third, fourth, or	915. 915. 7,700.	818. 818. 5,600. a section 501(c)(3)	0. 6,051. 0. 6,051. 0. 29,300. 10,131,741.
10 a b c 11 12 13 14 Sec 15 16	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) SEE PART IV.  Total support. (add Ins 9, 10c, 11, and 12.)  First five years. If the Form 990 i organization, check this box and tion C. Computation of Pu	1,238.  1,238.  3,944.  s for the organizar stop here.  blic Support Formula S	1,865.  1,865.  4,044.  tion's first, second  Percentage (f) divided by line Part III, line 15	1,215.  1,215.  8,012.  4, third, fourth, or a 13, column (f)).	915. 915. 7,700.	818. 818. 5,600. a section 501(c)(3)	0. 6,051. 0. 6,051. 0. 29,300. 10,131,741. ► □
10 a  b  c 11  12  13 14  Sec 15 16  Sec 17	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). SEE PART. IV.  Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and tion C. Computation of Pupublic support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage for	1,238.  1,238.  1,238.  3,944.  s for the organizar stop here	1,865.  1,865.  1,865.  4,044.  tion's first, second  Percentage (f) divided by line Part III, line 15 me Percentage	1,215.  1,215.  8,012.  4, third, fourth, or  13, column (f))  e  by line 13, column	915. 915. 7,700. fifth tax year as a	818.  818.  5,600.  a section 501(c)(3)  15 16	0. 6,051. 0. 6,051. 0. 29,300. 10,131,741. ►□ 99.7% 0.0%
10 a b c 11 12 13 14 Sec 15 16 Sec 17 18	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) SEE PART. IV.  Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and tion C. Computation of Pupublic support percentage from 20 public support percentage from 21 investment income percentage from 33-1/3 support tests — 2009. If the	1,238.  1,238.  1,238.  3,944.  s for the organizar stop here	1,865.  1,865.  1,865.  4,044.  tion's first, second  Percentage (f) divided by line Part III, line 15  me Percentage column (f) divided e A, Part III, line I not check the bo	1,215.  1,215.  8,012.  4, third, fourth, or  13, column (f))  e by line 13, column x on line 14, and	915. 915. 7,700. fifth tax year as a	818.  818.  5,600.  a section 501(c)(3)  15 16  17 18 an 33.1/3% and if	0. 6,051.  0. 6,051.  0. 29,300. 10,131,741.  ▶ □  99.7% 0.0%  0.1% 0.0%
10 a b c 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). SEE PART. IV.  Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and tion C. Computation of Pupublic support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage for	1,238.  1,238.  1,238.  3,944.  s for the organizaristop here.  blic Support Fig. 109 (line 8, column 2008 Schedule A, restment Incorpor 2009 (line 10c, com 2008 Schedule e organization did ox and stop here.	1,865.  1,865.  1,865.  4,044.  tion's first, second  Percentage  (f) divided by line Part III, line 15.  me Percentage  column (f) divided e A, Part III, line i not check the bo The organization	1,215.  1,215.  1,215.  8,012.  4, third, fourth, or  13, column (f))  e by line 13, column 7  x on line 14, and qualifies as a pub on line 14 or 19a	915. 915. 7,700. fifth tax year as a	5,600.  3 section 501(c)(3)  15 16  17 18 an 33-1/3%, and liganization 2 than 33.1/3% a	0. 6,051.  0. 6,051.  0. 29,300. 10,131,741.  ▶ □  99.7% 0.0%  0.1% 0.0%  ine 17 is not

Schedule A	(Form 990	or 990-EZ)	2009	THE A	RC OF	TENNE	ESSEE,	INC.			62-063	9154	Page <b>4</b>
Part IV	Supplen	nental Int	formati	ion. Co	mplete	this pa	rt to pr	ovide th	ne explar	nations re	62-063 equired by ermation.	Part II, lir	ne 10;
	Part II, II	ne i/a c	or 170;	and Pa	irt III, III	ne 12.	Provide	any ot	ner addit	ional info	rmation.	see instru	ctions.
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## SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

THE ARC OF TENNESSEE, INC.

62-0639154

PART III, LINE 12 - OTHER INCOM	Р	ART	III. L	INE	12 -	<b>OTHER</b>	INCOM
---------------------------------	---	-----	--------	-----	------	--------------	-------

NATURE AND SOURCE		2009	2008	2007	2006	2005
RENTAL INCOME	FAL \$	5,600. 5,600. \$	7,700. 7,700.	8,012.         \$ 8,012.	\$ 4,044. \$ 4,044. \$	3,944. 3,944.

### SCHEDULE C (Form 990 or 990-EZ)

### Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations: complete Parts I-A and B. Do not complete Part I-C.

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c) (other than section 501(c)(3)) organizations: complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

• \$	Section 501(c)(4), (5), or (6) o	rganizations: Complete Part III.							
Name	of organization			Employer identific	ation number				
THE	ARC OF TENNESSEE,	INC.		62-063915	54				
Par	t I-A Complete if the o	rganization is exempt under sect	ion 501(c) or is a	section 527 organ	nization.				
1	Provide a description of the	organization's direct and indirect political ca	ampaign activities in f	Part IV.					
2	Political expenditures				5				
3	Volunteer hours								
Par	t I-B ∣Complete if the o	rganization is exempt under sect	ion 501(c)(3).		- At				
1	Enter the amount of any exc	ise tax incurred by the organization under s	section 4955	<b>&gt;</b> \$	}	0.			
2	Enter the amount of any exc	the amount of any excise tax incurred by organization managers under section 4955							
		a section 4955 tax, did it file Form 4720 for				No			
			********		Yes	No			
	If 'Yes,' describe in Part IV.					J			
Par	t I-C Complete if the o	rganization is exempt under sect	ion 501(c), exce	pt section 501(c)(3	).				
1	Enter the amount directly ex	pended by the filing organization for section	1 527 exempt function	activities ▶\$					
2	Enter the amount of the filing	g organization's funds contributed to other o	organizations for sect	ion 527 exempt					
					71.				
3	Total of exempt function exp line 17b	enditures. Add lines 1 and 2. Enter here ar	d on Form 1120-POL	, ►\$					
4	Did the filing organization file	Form 1120-POL for this year?			Yes	No			
5	Enter the names, addresses made. For each organization	and employer identification number (EIN) on the filing is listed, enter the amount paid from the filing ere promptly and directly delivered to a sepending (PAC). If additional space is needed, pro	of all section 527 polit	ical organizations to whi	ich payments were	1			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing	(e) Amount of politic				
	,	(4)	(3) = 1/14	organization's funds.	contributions received	and			
				If Hotie, effect-o	contributions received promptly and directl delivered to a separa political organization	ite			
					if none, enter -0	I.			
-									
		<u> </u>							

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-F7) 20	nna THF	ARC	OF	TENNESSEE	TNC.
SCHEUGIE G (FUIII 330 OL 330-EZ.) ZU	NO TILL	$\Delta i / C$	OT.	TEMMEDOPEE	11V -

62-0639154

Page 2

Part II-A Complete if t section 501(	the organization h)).	n is exempt under se	ection 501(c)(3) a	nd filed Form 5768	(election under	
A Check ► if the filin	g organization belor	ngs to an affiliated group.			At a second seco	
B Check ► if the filin	g organization chec	ked box A and 'limited con	itrol' provisions apply.			
(The term	Limits on Lobbyir 'expenditures' mea	ig Expenditures — ns amounts paid or incurre	ed.)	<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals	
1a Total lobbying expenditu	res to influence pub	lic opinion (grass roots lob	bying)			
<b>b</b> Total lobbying expenditu						
c Total lobbying expenditu						
d Other exempt purpose e						
e Total exempt purpose ex	penditures (add line	es ic and id)				
f Lobbying nontaxable am both columns.	ount. Enter the amo	ount from the following table	le in			
If the amount on line 1e, colu	nn (a) or (b) is:	he lobbying nontaxable ar	mount is:			
Not over \$500,000	20% of the amount on line 1e.					
Over \$500,000 but not over \$1,0		\$100,000 plus 15% of the excess				
	,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.					
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.					
g Grassroots nontaxable a		\$1,000,000.				
h Subtract line 1g from line					***************************************	
i Subtract line 1f from line						
j If there is an amount oth						
section 4911 tax for this	year?	·····	c organization me r or		Yes No	
(Som	e organizations tha	4-Year Averaging Period L it made a section 501(h) ele s below. See the instruction	ection do not have to	complete all of the five h 2f.)		
	Lobb	ying Expenditures During	4-Year Averaging Per	iod		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	<b>(d)</b> 2009	<b>(e)</b> Total	
2a Lobbying non-taxable amount						
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))						
<b>c</b> Total lobbying expenditures						
d Grassroots nontaxable amount						
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots lobbying expenditures			B 44 40			
BAA				Schedule <b>C</b> (For	m 990 or 990-EZ) 2009	

# Schedule C (Form 990 or 990-EZ) 2009 THE ARC OF TENNESSEE, INC. | Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

(election under section 501(n)).	_		
	(a	9)	(b)
	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	v		
a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?	77	X	
d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?	X		
f Grants to other organizations for lobbying purposes?		Х	144
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X	-22	23,000.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		23,000.
i Other activities? If 'Yes,' describe in Part IVSEE PART IV.		X	
j Total. Add lines 1c through 1i			23,000.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х	25,000:
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			700
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Х	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5	), or s	section 501(c)(6).
		177.0	Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?			3
Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line	3 is a	), or s answ	ered 'Yes.'
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a Current year		2a	
<b>b</b> Carryover from last year		2b	70-7
c Total		2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic expenditure next year?	cal	4	
5 Taxable amount of lobbying and political expenditures (see instructions).		5	
Part IV Supplemental Information			
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Also, complete this part for any additional information.		,	
PART_II-B, LINE_1L-OTHER ACTIVITIES DESCRIPTION			
THE ARC TN 990 SCHEDULE C PART II-B EXPLANATIONS			
1A. THE ARC OF TENNESSEE REACHES OUT TO ITS VOLUNTEER MEMBERSHIP	<u>BASE</u>	<u>TO</u> _	ASSIST WITH
INFLUENCING_PUBLIC_POLICY_ON_KEY_ISSUES_THAT_AFFECT_PEOPLE_WITH_I	NTEL	LECT	UAL AND
DEVELOPMENTAL DISABILITIES. WHEN THERE IS A PIECE OF LEGISLATION	THA:	r th	E ARC

Part IV   Supplemental Information (continued)
PART II-B, LINE 1I - OTHER ACTIVITIES DESCRIPTION (CONTINUED)
SUPPORTS OR OPPOSES, AN "ACTION ALERT" IS SENT OUT TO MEMBERS OF THE ORGANIZATION
WITH A LIST OF TALKING POINTS AND A REQUEST TO CONTACT THEIR LEGISLATORS. IT IS UP
TO THE INDIVIDUAL MEMBER TO TAKE ACTION OR NOT, AND WHAT TO SAY TO THEIR
LEGISLATORS. MANY FAMILIES USE THE TALKING POINTS PROVIDED AND THEN SHARE A
PERSONAL STORY OF HOW THE LEGISLATION IMPACTS THEM OR A LOVED ONE.
THE ARC OF TENNESSEE ALSO HAS VOLUNTEERS THAT PARTICIPATE ON ITS GOVERNMENTAL
AFFAIRS COMMITTEE THAT HELPS SHAPE THE LEGISLATIVE AGENDA FOR THE ORGANIZATION EACH
YEAR.
1B. THE EXECUTIVE DIRECTOR IS A REGISTERED LOBBYIST FOR THE ARC OF TENNESSEE. THE
ORGANIZATION ALSO CONTRACTS WITH A LOBBYIST TO HELP SUPPORT ITS ACTIVITIES. BOTH
ARE PAID. THE ED IS A STAFF, THE OTHER IS A CONTRACTOR.
1DTHE_ARC_OF_TENNESSEE_SENDS_COPIES_OF_ITS_QUARTERLY_NEWSLETTER_TO_MEMBERS_OF_THE
TENNESSEE_LEGISLATURETHIS_NEWSLETTER_IS_NOT_POLITICAL_IN_NATURE_BUT_DOES_SERVE_TO
EDUCATE THEM ON ISSUES RELATED PEOPLE WITH INTELLECTUAL AND DEVELOPMENTAL
DISABILITIES. DURING LEGISLATIVE SESSIONS, THE ARC OF TENNESSEE MAY SEND OUT
LETTERS TO LEGISLATORS ASKING FOR THEIR SUPPORT OR OPPOSITION TO VARIOUS PIECES OF
LEGISLATION AND REASON(S) FOR THE REQUEST. THE ARC OF TENNESSEE MAY ALSO SEND
LEGISLATIVE_ALERTS_TO_MEMBERS_(SEE_1A_ABOVE)_THAT_INCLUDES_TALKING_POINTS_RELATED_TO_
THE SUPPORT OR OPPOSITION OF VARIOUS PIECES OF LEGISLATION AND A REQUEST TO CONTACT
THEIR LEGISLATOR AND SHARE THEIR STORY. THE ARC OF TENNESSEE DOES NOT SEND MAILING
OUT TO THE GENERAL PUBLIC.
1E. THE ARC OF TENNESSEE PUTS OUT A QUARTERLY NEWSLETTER THAT IS NOT POLITICAL IN
NATURE. IT IS STORIES AND OTHER INFORMATION RELATED TO INDIVIDUALS WITH

Part IV   Supplemental Information (continued)
PART II-B, LINE 11 - OTHER ACTIVITIES DESCRIPTION (CONTINUED)
INTELLECTUAL AND DEVELOPMENTAL DISABILITIES. THIS NEWSLETTER GOES TO MEMBERS OF THE
ORGANIZATION AND TO LEGISLATORS. THE ARC OF TENNESSEE MAY SEND LETTERS TO
LEGISLATORS (SEE 1D ) OR LEGISLATIVE ALERTS TO MEMBERS (SEE 1D). THE ED MAY
OCCASIONALLY WRITE AN OP-ED FOR THE NEWSPAPER. THE ARC DOES NOT BROADCAST
STATEMENTS VIA TV OR RADIO BUT MAY POST INFORMATION RELATED TO LEGISLATION ON ITS
WEBSITE.
1G. THE ARC OF TN ED AND ITS LOBBYIST MEET REGULARLY WITH LEGISLATORS AND THEIR
STAFF DURING LEGISLATIVE SESSION AND SOMETIMES OUTSIDE OF SESSION. THE ARC OF TN
KEY STAFF MEETS REGULARLY WITH STATE STAFF IN VARIOUS DEPARTMENTS SUCH AS THE
DIVISION OF INTELLECTUAL DISABILITIES SERVICES AND TENNCARE TO DISCUSS TOPICS OF
CONCERN RELATED TO INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES.
THIS CONTACT IS OFTEN IN PERSON AND ALSO VIA THE PHONE AND EMAIL.
1H. THE ARC OF TENNESSEE PARTICIPATES IN DISABILITY DAYS ON THE HILL AT LEGISLATIVE
PLAZA. THREE DAYS ARE SET ASIDE EACH LEGISLATIVE SESSION (FOR MIDDLE, WEST, EAST
REGIONS) FOR DISABILITY ORGANIZATIONS TO HAVE TABLES THAT DISPLAY INFORMATIONAL
MATERIALS AND TO HAVE CONVERSATIONS WITH PASSERSBY. INDIVIDUALS ARE ENCOURAGED TO
MAKE APPOINTMENTS WITH THEIR LEGISLATORS TO GET TO KNOW THEM AND TO SHARE THEIR
PERSONAL STORIES. AT TIMES THERE ARE SPECIFIC ISSUES WE ASK INDIVIDUALS TO DISCUSS
WITH LEGISLATORS AND OTHER TIMES THERE ARE NOT. INDIVIDUALS CHOOSE THEIR TOPICS.
THESE DAYS ARE EDUCATIONAL IN NATURE AND DO NOT INCLUDE RALLIES OR DEMONSTRATIONS OF
ANY SORT.

Schedule C (Form 990 or 990-EZ) 2009 THE ARC OF TENNESSEE, INC.  Part IV Supplemental Information (continued)	62-0639154	Page 4
Part IV Supplemental Information (continued)		-1
	···	

### SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions

OMB No. 1545-0047

Open to Public Inspection
Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

THE ARC OF TENNESSEE INC

T111	ARC OF TENNESSEE, INC.		62-0639154	
Par	t I Organizations Maintaining Donor Advised Funds or Other Similar Fur	ids or Ac		ete if
	the organization answered 'Yes' to Form 990, Part IV, line 6.			
	(a) Donor advised funds	(b) F	unds and other ac	counts
1	Total number at end of year		***	
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)		94	
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor funds are the organization's property, subject to the organization's exclusive legal control?	or advised	Yes	No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds used only for charitable purposes and not for the benefit of the donor or donor advisor or for an purpose conferring impermissible private benefit??	may be	Yes	□No
Par	t II Conservation Easements Complete if the organization answered 'Yes'			L
1	Purpose(s) of conservation easements held by the organization (check all that apply).		-5-, · α. ε. τ · , · · · ·	<u> </u>
		f an historica	ally important land	area
	Protection of natural habitat Preservation of			
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the last day of the tax year.	e form of a	conservation easer	ment on the
			Held at the End o	f the Year
	Total number of conservation easements	<del></del>	70	
	Total acreage restricted by conservation easements			
c	Number of conservation easements on a certified historic structure included in (a)	2c		
d	Number of conservation easements included in (c) acquired after 8/17/06	2 d		
3	Number of conservation easements modified, transferred, released, extinguished, or terminated	d by the org	anization during th	e tax
	year ►			
4	Number of states where property subject to conservation easement is located ▶			
5	Does the organization have a written policy regarding the periodic monitoring, inspection, hand and enforcement of the conservation easement it holds?	ling of violat	ions,	<u></u>
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easem during the year		····· Yes	No
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year $\blacktriangleright$	\$ _		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of secti	ion		
	170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?			No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and a include, if applicable, the text of the footnote to the organization's financial statements that desconservation easements.	expense sta cribes the o	tement, and baland rganization's accou	ce sheet, and unting for
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Complete if the organization answered 'Yes' to Form 990, Part IV, line	Other Si 8.	milar Assets	· · · · · · · · · · · · · · · · · · ·
1 a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statemen treasures, or other similar assets held for public exhibition, education, or research in furtherance the text of the footnote to its financial statements that describes these items.	t and baland ce of public	ce sheet works of a service, provide, in	rt, historical Part XIV,
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement an treasures, or other similar assets held for public exhibition, education, or research in furtherand amounts relating to these items:	e of public :	service, provide the	nistorical e following
	(i) Revenues included in Form 990, Part VIII, line 1		▶\$	
	(ii) Assets included in Form 990, Part X		▶\$	
2	If the organization received or held works of art, historical treasures, or other similar assets for amounts required to be reported under SFAS 116 relating to these items:			owing
а	Revenues included in Form 990, Part VIII, line 1		, ▶\$	
	Assets included in Form 990 Part X		<b>▶</b> \$	

1 arcini Organizations maintair	ing conc	CHOILS OF F	ut, mst	Offical freasures, C	of Other Similar A	issels (CO	munuea)
3 Using the organization's acquisition items (check all that apply):	accession a	and other reco	ords, chec	ck any of the following th	nat are a significant us	e of its colle	ection
a Public exhibition		d	Loan	or exchange programs			
<b>b</b> Scholarly research		е	Other				
c Preservation for future generati	ions					717.4	
4 Provide a description of the organiz Part XIV.		ections and ex	plain how	they further the organiz	zation's exempt purpos	se in	
5 During the year, did the organization assets to be sold to raise funds rath	n solicit or r ner than to b	eceive donationed	ons of art as part o	, historical treasures, or f the organization's colle	other similar	Yes	No
Part IV Escrow and Custodial 9, or reported an amou	Arrangen	nents Comp	olete if	organization answe	ered 'Yes' to Form	990, Par	t IV, line
1a Is the organization an agent, truste	e, custodian	, or other inte	rmediary	for contributions or othe	er assets not		
included on Form 990, Part X? <b>b</b> If 'Yes,' explain the arrangement in						Yes	No
bit ies, explain the attaingement in	raitAivai	id complete in	ie ioliowii	ig table:	ſ <u></u>		
• Deginning helenge						Amount	
c Beginning balance							
<b>d</b> Additions during the year							
<ul><li>e Distributions during the year</li><li>f Ending balance</li></ul>					777		
2a Did the organization include an amo							
		n 990, Part <b>X</b> ,	iine ZI?.			Yes	∐ No
b If 'Yes,' explain the arrangement in Part V Endowment Funds Com		ranization	oncuro.	rod Waat ta Farma O	00 D-+ IV I' 1		
rait v Liidowillelit rulius Coll							
1 a Beginning of year balance	(a) Current	rear (1	) Prior year	(c) Two years back	(d) Three years back	(e) Four	r years back
J J J							
<b>b</b> Contributions							
c Net Investment earnings, gains, and losses							
<b>d</b> Grants or scholarships		386					
Other expenditures for facilities and programs							
f Administrative expenses							
<b>g</b> End of year balance							
2 Provide the estimated percentage of	of the year e	nd balance he	ld as:				
<b>a</b> Board designated or quasi-endowm	ent ►	9	5				
<b>b</b> Permanent endowment ▶	%						
c Term endowment ►	%						
3a Are there endowment funds not in to organization by:	he possessi	on of the orga	nization t	hat are held and admini	stered for the	T <b>y</b>	es No
(i) unrelated organizations						3a(i)	110
(ii) related organizations							
<b>b</b> If 'Yes' to 3a(ii), are the related organization							
4 Describe in Part XIV the intended u						30	
Part VI Investments—Land, Bui					line 10		
Description of investment	1	(a) Cost or oth	er basis	(b) Cost or other basis (other)	(c) Accumulated Depreciation	<b>(d)</b> Boo	k Value
1 a Land		•	·		1		
<b>b</b> Buildings	F					<del>                                     </del>	
c Leasehold improvements	F						
<b>d</b> Equipment	<u>}</u>				. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
<b>e</b> Other	j-			151,446.	128,872.		22,574.
Total. Add lines 1a through 1e (Column (c		al Form 990 F	Part X co				22,574.
BAA	,		, 00	(=),		edule <b>D</b> (Forr	
					SCITE	Taute <b>D</b> (FOIT	11 220) 2009

Part VII Investments—Other Securities See Fo	orm 990, Part X. I	line 12. N/A
(a) Description of security or category (including name of security)	<b>(b)</b> Book value	(c) Method of valuation
(including name of security)  Financial derivatives		Cost or end-of-year market value
Closely-held equity interests.		
Officers		
Other		
	10.00	
Total. (Column (b) must equal Form 990 Part X, col. (B) line 12.)	V-100-1	
Part VIII Investments-Program Related (See	orm 990, Part X,	, line 13) N/A
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
The second secon		
	***************************************	
70 70 70 70 70 70 70 70 70 70 70 70 70 7		
***************************************		
		11/41/4
MARON NA CONTRACTOR NA CONTRAC		
Total. (Column (b) must equal Form 990, Part X, Col. (B) line 13.) Part IX Other Assets (See Form 990, Part X,	lino 15) N/2	7.
The state of the s		
(a) Des	scription	(b) Book value
T. T. T. T. T. T. T. T. T. T. T. T. T. T		
Total. (Column (b) must equal Form 990, Part X, col.(B), line	e 15)	<b>&gt;</b>
Part X Other Liabilities (See Form 990, Part		
(a) Description of Liability	(b) Amount	
Federal Income Taxes		
CAPITALIZED LEASE OBLIGATIONS	12,6	83.
DEFERRED REVENUES	229,5	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)	242,2	58.

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Schedule D (Form 990) 2009 THE ARC OF TENNESSEE, INC.	62-0639154	Page <b>5</b>
Part XIV Supplemental Information (continued)		
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2009	SCHEDULE D, PART XIV - SUPPLEMENTAL INFORI	MATION PAGE 6
	THE ARC OF TENNESSEE, INC.	62-0639154
SCHEDUL OTHER CH	E D, PART XI, LINE 8 HANGES IN NET ASSETS OR FUND BALANCES	
UNALLOCA:	TED PAYMENTS TO AFFILIATESTOTA	\$ -8,535. \$ -8,535.
	E D, PART XIII, LINE 2D (PENSES AND LOSSES PER AUDITED F/S	
UNALLOCA:	TED PAYMENTS TO AFFILIATES TOTAL	\$ 8,535. \$ 8,535.

#### SCHEDULE O (Form 990)

### Supplemental Information to Form 990

OMB No. 1545-0047

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

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number THE ARC OF TENNESSEE, INC. 62-0639154 FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION PEOPLE\_TALKING\_TO\_PEOPLE\_(PTP) - ASSISTS THE DIVISION OF INTELLECTUAL DISABILITIES SERVICES (DIDS) WITH QUALITY ASSURANCE AND QUALITY IMPROVEMENT BY EMPOWERING SERVICE RECIPIENTS TO GIVE HONEST FEEDBACK REGARDING THE SERVICES THEY RECEIVE THROUGH PARTICIPATION IN A SURVEY THAT COVERS FOUR KEY AREAS: CHOICE AND CONTROL; RESPECT AND DIGNITY; ACCESS TO CARE; COMMUNITY INCLUSION. DIRECT SUPPORT PROFESSIONALS OF TENNESSEE - THE ARC OF TENNESSEE PROVIDES SUPPORT AND DIRECTION TO THE DIRECT SUPPORT PROFESSIONALS OF TENNESSEE PROJECT THAT IS FUNDED THROUGH THE DIVISION OF INTELLECTUAL DISABILITIES SERVICES (DIDS). THE GOAL OF THIS PROJECT IS TO CREATE A STAND-ALONE 501(C)3 ORGANIZATION THAT BECOMES "THE VOICE" OF ALL DSPS IN TENNESSEE. ACTIVITIES OF THIS PROJECT INCLUDE DSP RECOGNITION, GRASS ROOTS MOBILIZATION, AND DEVELOPMENT OF TRAINING OPPORTUNITIES. PARTNERS IN POLICY MAKING - THE ARC OF TENNESSEE PROVIDES ADMINISTRATIVE SUPPORT TO THE TENNESSEE COUNCIL ON DEVELOPMENTAL DISABILITIES' PARTNERS IN POLICY MAKING PROJECT SO THAT PROJECT EXPENSES ARE REIMBURSED IN A TIMELY FASHION. PASS PROJECT (PERSONAL ASSISTANCE SUPPORTS AND SERVICES) - ENHANCES COMMUNITY SUPPORTS BY DEMONSTRATING A MODEL OF SELF-DIRECTED PERSONAL ASSISTANCE THROUGH THE PROVISION OF TOOLS, MENTORING AND TRAININGS TO ALLOW INDIVIDUALS WITH DISABILITIES TO MANAGE AND CONTROL THEIR OWN CARE. SECONDARY TRANSITION PROJECT - HELPS FAMILIES AND STUDENTS PREPARE FOR THE SIGNIFICANT CHALLENGES OF SECONDARY TRANSITION. THE ARC TN STAFF ASSISTS FAMILIES, STUDENTS AND EDUCATORS TO GAIN KNOWLEDGE OF THE PROCESS. RESOURCES AND OPPORTUNITIES

	52–0639154
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION (CONTIL	NUED)
IN LOCAL COMMUNITIES ACROSS THE STATE AND ON THE INTERNET THROUGH	GH WORKSHOPS AND
DEVELOPMENT OF EDUCATIONAL MATERIALS.	
LEGISLATIVE MONITOR - THE ARC TN PUBLISHES A MONTHLY NEWSLETTER	FOCUSING ON STATE
AND FEDERAL LEGISLATION PERTINENT TO PEOPLE WITH DISABILITIES.	DURING LEGISLATIVE
SESSION THERE ARE WEEKLY UPDATES AND PHONE CALLS TO HELP KEEP PE	OPLE CURRENT WITH
RECENT DEVELOPMENTS.	
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SUPPORT BROKERAGE FOR CHOICES WAIVER - THE ARC OF TENNESSEE CONT	RACTED WITH PPL TO
PROVIDE SUPPORT BROKERAGE SERVICES TO INDIVIDUALS WHO CHOOSE TO	SELF-DIRECT THEIR
SERVICES ON THE NEW CHOICES WAIVER ADMINISTERED THROUGH TENNCARE	. THE PROJECT BEGAN
APRIL 1, 2010 AND ALREADY HAS OVER 100 REFERRALS BEING PROCESSED	. THE ARC OF
TENNESSEE WILL PROVIDE SUPPORT BROKERAGE IN MIDDLE AND WEST TENN	ESSEE.
MEGA CONFERENCE IS AN ANNUAL CONFERENCE FOR WHICH WE RECEIVE SPO	NSORSHIP SUPPORT
FROM THE TN COUNCIL ON DEVELOPMENTAL DISABILITIES.	
GNRC - GNRC IS A STATE-FUNDED PILOT PROJECT THROUGH THE COMMISSI	ON ON AGING AND
DISABILITY_AND_THE_GREATER_NASHVILLE_REGIONAL_COUNCIL_ON_AGING_T	O ALLOW INDIVIDUALS
WITH DISABILITIES TO SELF-DIRECT THEIR LONG-TERM SUPPORTS AND SE	RVICES IN THEIR
HOME. THE ARC PROVIDES SUPPORT BROKERAGE SERVICES FOR THE TEN I	NDIVIDUALS IN THIS
PROGRAM AND PPL PROVIDES FISCAL ADMINISTRATOR SERVICES. THOUGH	EACH INDIVIDUAL IN
THE PROGRAM HAS A FAIRLY SMALL BUDGET, THERE IS SIGNIFICANT FLEX	IBILITY IN THE WAY
THE FUNDS CAN BE UTILIZED FOR THE INDIVIDUAL.	·
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Name of the organization THE ARC OF TENNESSEE, INC.	Employer identification number 62–0639154			
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION (CONTINUED)				
WALMART/THE ARC US SCHOOL TO COMMUNITY TRANSITION GRANT - THE A	RC TN WILL PROVIDE			
SELF-DIRECTED IEP TRAINING TO STUDENTS, PARENTS AND EDUCATORS I	N 3 SCHOOLS OVER THE			
COURSE OF THE NEXT 3 YEARS AND COLLECT DATA TO DETERMINE IF THI	S TRAINING RESULTS IN			
IMPROVED_OUTCOMES_IN_THE AREAS_OF_SELF-DETERMINATION, EMPLOYMEN	T, POST-SECONDARY AND			
INDEPENDENT LIVING.				
YOUTH LEADERSHIP FORUM - THE ARC OF TENNESSEE PROVIDES ADMINIST	RATIVE SUPPORT TO THE			
TENNESSEE COUNCIL ON DEVELOPMENTAL DISABILITIES' YOUTH LEADERSH	IP FORUM PROJECT SO			
THAT PROJECT EXPENSES ARE REIMBURSED IN A TIMELY FASHION.				
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FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHARI	EHOLDE			
THE ARC IS A MEMBERSHIP ORGANIZATION.				
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVE	RNING BODY			
THE NOMINATING COMMITTEE PRESENTS THE SLATE OF NOMINEES FOR OFF	ICE POSITIONS ON THE			
BOD AND THE MEMBERSHIP VOTES ON IT.				
FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS				
THE BUDGET FINANCE COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS	THE 990 BEFORE			
FILING.				
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS	FOR CEO, EXEC. DIR., OR TOP MG			
ALL MANAGEMENT SALARIES ARE PUT THROUGH THE BUDGET FINANCE COMM	ITTEE FOR APPROVAL.			
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	AILABLE			
DOCUMENTS ARE MADE AVAILABLE ON THE COMPANY'S WEBSITE AND UPON 1	REQUEST.			

Schedule <b>O</b> (Form 990) 2009		Page <b>2</b>
Name of the organization		Employer identification number
THE ARC OF TENNESSEE,	INC.	62-0639154
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