

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

A For the **2019** calendar year, or tax year beginning **07-01-2018**, and ending **06-30-2019**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: NASHVILLE PREDATORS FOUNDATION
 Doing business as:
 Number and street (or P O box if mail is not delivered to street address) Room/suite: 501 BROADWAY
 City or town, state or province, country, and ZIP or foreign postal code: NASHVILLE, TN 37203

D Employer identification number: 62-1751832
E Telephone number: (615) 770-2303
G Gross receipts \$ 3,284,071

F Name and address of principal officer: REBECCA KING, 501 BROADWAY, NASHVILLE, TN 37203

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () (insert no) 4947(a)(1) or 527

J Website: WWW.NASHVILLEPREDATORS.COM/OFFTHEICE/FOUNDATION

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1998 **M** State of legal domicile: TN

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities FOUNDATION IS A PUBLIC NON-PROFIT ORGANIZATION ESTABLISHED TO CONDUCT CHARITABLE ACTIVITIES AND RAISE FUNDS FOR CONTRIBUTIONS TO VARIOUS CHARITIES			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3	Number of voting members of the governing body (Part VI, line 1a)	25	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	19	
	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	0	
	6	Total number of volunteers (estimate if necessary)	250	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0	
7b	Net unrelated business taxable income from Form 990-T, line 34	0		
Revenue	8	Contributions and grants (Part VIII, line 1h)	1,806,818	2,001,223
	9	Program service revenue (Part VIII, line 2g)	0	0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,432	1,957
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	798,598	820,389
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,606,848	2,823,569
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,060,181
14		Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0	0
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 48,000		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	246,390	243,260
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,306,571	2,533,933	
19	Revenue less expenses Subtract line 18 from line 12	300,277	289,636	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	2,325,684	2,565,189
	21	Total liabilities (Part X, line 26)	818,737	768,607
	22	Net assets or fund balances Subtract line 21 from line 20	1,506,947	1,796,582

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer: [Signature] Date: 2020-04-27

REBECCA KING EXECUTIVE DIRECTOR/VICE PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: [Preparer Name] Preparer's signature: [Signature] Date: 2020-04-27

Check if self-employed PTIN: P00061190

Firm's name ▶ LBMC PC Firm's EIN ▶ 62-1199757

Firm's address ▶ PO BOX 1869 BRENTWOOD, TN 370241869 Phone no (615) 377-4600

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission

FOUNDATION IS A PUBLIC NON-PROFIT ORGANIZATION ESTABLISHED TO CONDUCT CHARITABLE ACTIVITIES AND RAISE FUNDS FOR CONTRIBUTIONS TO VARIOUS CHARITIES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 2,280,673 including grants of \$ 2,280,673) (Revenue \$)
See Additional Data

4b (Code) (Expenses \$ 10,000 including grants of \$ 10,000) (Revenue \$)
See Additional Data

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 2,290,673

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements, such as political campaign activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

		Yes	No
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? <i>If "Yes," complete Schedule J</i>	23	No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	No
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	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b	No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
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	No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	12
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes

2a 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		2a	0		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2b			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a			No
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>		3b			
4a 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			No
b If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a			No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b			No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c			
6a 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 as charitable contributions?		6a			No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b			
7 Organizations that may receive deductible contributions under section 170(c).					
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	Yes		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Yes		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c			No
d If "Yes," indicate the number of Forms 8282 filed during the year		7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e			No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f			No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g			
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h			
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8			
9a Did the sponsoring organization make any taxable distributions under section 4966?		9a			
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b			
10 Section 501(c)(7) organizations. Enter					
a Initiation fees and capital contributions included on Part VIII, line 12		10a			
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 members or shareholders		11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O		13a			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		13b			
c Enter the amount of reserves on hand		13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a			No
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>		14b			
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N		15			No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O		16			No

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions
 Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?		No
14	Did the organization have a written document retention and destruction policy?		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official		No
15b	Other officers or key employees of the organization		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed: TN

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records
 ▶ BETH SNIDER 501 BROADWAY NASHVILLE, TN 37203 (615) 770-2025

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

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or 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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DERYL BAUMAN DIRECTOR	1 00	X					0	0	0	
(2) MARK BLAZE DIRECTOR	1 00	X					0	0	0	
(3) JACK BURK DIRECTOR	1 00	X					0	0	0	
(4) LAURA CURRIE DIRECTOR	1 00	X					0	0	0	
(5) ELLIE WESTMAN CHIN DIRECTOR	1 00	X					0	0	0	
(6) ANDREA CONTE DIRECTOR	1 00	X					0	0	0	
(7) MARIA DEVARENNE DIRECTOR	1 00	X					0	0	0	
(8) PHILIP DOBBS DIRECTOR	1 00	X					0	0	0	
(9) SCOTT HAMILTON DIRECTOR	1 00	X					0	0	0	
(10) KRISTEN LAVIOLETTE DIRECTOR	1 00	X					0	0	0	
(11) JEFF LIPSCOMB DIRECTOR	1 00	X					0	0	0	
(12) ANDY MARSHALL DIRECTOR	1 00	X					0	0	0	
(13) CHRIS MASON DIRECTOR	1 00	X					0	0	0	
(14) RALPH PERREY DIRECTOR	1 00	X					0	0	0	
(15) RON SAMUELS DIRECTOR	1 00	X					0	0	0	
(16) RONALD ROBERTS DIRECTOR	1 00	X					0	0	0	
(17) RALPH SCHULZ DIRECTOR	1 00	X					0	0	0	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MIKE SMARDAK DIRECTOR	1 00	X						0	0	0
(19) MICHAEL SONTAG DIRECTOR	1 00	X						0	0	0
(20) GERRY HELPER CHAIRMAN	2 00			X				0	0	0
(21) SEAN HENRY PRESIDENT	2 00			X				0	0	0
(22) REBECCA KING EXECUTIVE DIRECTOR/VICE PRESIDENT	1 00			X				0	0	0
(23) BETH SNIDER TREASURER	1 00			X				0	0	0
(24) SCOTT HICKMAN SECRETARY	1 00			X				0	0	0
(25) JACK DILLER CHAIRMAN AMERITUS	1 00			X				0	0	0
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								0	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 0

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		No
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

Table with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a-1f (Contributions, Gifts, Grants, and Other Similar Amounts) and 1g-1h (Total).

Table for Program Service Revenue with 5 columns: Business Code, (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 2a-2f and 9 Total.

Main revenue table with 5 columns: Business Code, (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 3-12 (Other Revenue) and 11a-11e (Miscellaneous Revenue).

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,280,673	2,280,673		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	10,000	10,000		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal	3,000		3,000	
c Accounting	12,300		12,300	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	150,911		102,911	48,000
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	2,875		2,875	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CREDIT CARD FEES	70,674		70,674	
b BANK CHARGES	2,991		2,991	
c LICENSES AND PERMITS	490		490	
d MISCELLANEOUS	19		19	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	2,533,933	2,290,673	195,260	48,000
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	1,924,919	1	2,138,779
	2 Savings and temporary cash investments	75,000	2	0
	3 Pledges and grants receivable, net	175,080	3	134,841
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	142,040	7	256,158
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a		
	b Less accumulated depreciation	10b		10c
	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	8,645	15	35,411
16 Total assets. Add lines 1 through 15 (must equal line 34)	2,325,684	16	2,565,189	
Liabilities	17 Accounts payable and accrued expenses	640,514	17	727,772
	18 Grants payable		18	
	19 Deferred revenue	178,223	19	40,835
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	818,737	26	768,607
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,296,750	27	1,555,922
	28 Temporarily restricted net assets	210,197	28	240,660
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	1,506,947	33	1,796,582	
34 Total liabilities and net assets/fund balances	2,325,684	34	2,565,189	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,823,569
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,533,933
3	Revenue less expenses Subtract line 2 from line 1	3	289,636
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,506,947
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,796,582

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990 Cash Accrual 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?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- 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?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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

	Yes	No
2a		No
2b	Yes	
2c		No
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 62-1751832

Name: NASHVILLE PREDATORS FOUNDATION

Form 990 (2018)

Form 990, Part III, Line 4a:

PREDATORS FOUNDATION GRANTS - EACH YEAR THE PREDATORS FOUNDATION HAS AN ANNUAL GRANT CYCLE WHERE NASHVILLE AND MIDDLE TENNESSEE NON-PROFITS APPLY FOR GRANTS THE FOUNDATION WILL AWARD GRANTS FOR SPECIFIC PROJECTS AND ONE-TIME PROGRAMS, BUT NOT FOR GENERAL OPERATING COSTS, STAFF SALARIES, SPONSORSHIP OR FUNDRAISERS OF ANY KIND, CAPITAL CAMPAIGNS OR BUILDING IMPROVEMENT PROJECTS, ENDOWMENTS OR RESERVE FUNDS OR GRANTS TO INDIVIDUALS, PTA'S OR BOOSTER CLUBS THE GRANTS APPLICATIONS ARE DUE AT THE END OF JANUARY/EARLY FEBURARY, SELECTED AND VOTED ON BY PREDATORS FOUNDATION BOARD MEMBERS IN MARCH AND MONEY IS DISTRIBUTED IN MARCH/APRIL THE NASHVILLE PREDATORS FOUNDATION STRIVES TO MEET THE EDUCATIONAL, SOCIAL, HEALTH AND CULTURAL NEEDS OF OUR COMMUNITY BY OFFERING UNIQUE RESOURCES AND FINANCIAL SUPPORT TO LOCAL YOUTH-ORIENTED ORGANIZATIONS

Form 990, Part III, Line 4b:

JACK DILLER EDUCATION AWARD - EACH YEAR THE PREDATORS FOUNDATION AWARDS FOUR HIGH SCHOOL SENIORS THE JACK DILLER EDUCATION AWARD IN THE AMOUNT OF \$2,500 EACH ALL APPLICANTS MUST RESIDE WITHIN MIDDLE TENNESSEE, EXCEL IN ACADEMICS, ATHLETICS AND VOLUNTEERISM THE FOUR WINNING STUDENTS ARE RECOGNIZED DURING A PREDATORS HOME GAME FOR MORE INFORMATION, PLEASE CONTACT THE NASHVILLE PREDATORS FOUNDATION AT (615) 770-2321 OR VISIT THE NASHVILLE PREDATORS WEBSITE AT NASHVILLEPREDATORS.COM/COMMUNITY

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for the latest information.

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
NASHVILLE PREDATORS FOUNDATION

Employer identification number
62-1751832

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 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 state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 11 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc (see instructions)					12	

13 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

14	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	
15	Public support percentage for 2017 Schedule A, Part II, line 14	15	

- 16a 33 1/3% support test—2018.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶
- b 33 1/3% support test—2017.** 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—2018.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶
- b 10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	860,890	1,580,410	1,862,425	1,806,818	2,001,221	8,111,764
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513	530,571	57,161	366,156	798,598	820,389	2,572,875
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	1,391,461	1,637,571	2,228,581	2,605,416	2,821,610	10,684,639
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	229,175	253,124	477,291	404,756	479,649	1,843,995
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	109,781	93,146	218,062	315,639	234,617	971,245
c Add lines 7a and 7b	338,956	346,270	695,353	720,395	714,266	2,815,240
8 Public support. (Subtract line 7c from line 6)						7,869,399

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6	1,391,461	1,637,571	2,228,581	2,605,416	2,821,610	10,684,639
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		85	608	1,432	1,956	4,081
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b		85	608	1,432	1,956	4,081
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 Total support. (Add lines 9, 10c, 11, and 12)	1,391,461	1,637,656	2,229,189	2,606,848	2,823,566	10,688,720
14 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 ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	15	73 620 %
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	76 240 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	0 040 %
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

Additional Data

Software ID:

Software Version:

EIN: 62-1751832

Name: NASHVILLE PREDATORS FOUNDATION

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
NASHVILLE PREDATORS FOUNDATION

Employer identification number
62-1751832

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year	
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | | |
|--|-----|----|
| (i) unrelated organizations | Yes | No |
| (ii) related organizations | | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				0

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶	

Part VIII Investments—Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	▶	

Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

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

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

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

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	3,239,070
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	30,000	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	385,502	
e	Add lines 2a through 2d		2e	415,502
3	Subtract line 2e from line 1		3	2,823,568
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b	1	
c	Add lines 4a and 4b		4c	1
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	2,823,569

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	2,949,435
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a	30,000	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d	385,502	
e	Add lines 2a through 2d		2e	415,502
3	Subtract line 2e from line 1		3	2,533,933
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	0
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	2,533,933

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 62-1751832

Name: NASHVILLE PREDATORS FOUNDATION

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF INTERNAL REVENUE CODE SECTION 501(C)(3), AND ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS INCLUDED IN THE FINANCIAL STATEMENTS. UNDER GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, A TAX POSITION IS RECOGNIZED AS A BENEFIT ONLY IF IT IS "MORE LIKELY THAN NOT" THAT THE TAX POSITION WOULD BE SUSTAINED IN A TAX EXAMINATION, WITH A TAX EXAMINATION BEING PRESUMED TO OCCUR. THE AMOUNT RECOGNIZED IS THE LARGEST AMOUNT OF TAX BENEFIT THAT IS GREATER THAN 50% LIKELY OF BEING REALIZED ON EXAMINATION. FOR TAX POSITIONS NOT MEETING THE "MORE LIKELY THAN NOT" TEST, NO TAX BENEFIT IS RECORDED. THE FOUNDATION HAD NO MATERIAL UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENT AS OF JUNE 30, 2019. THE FOUNDATION FILES A U.S. FEDERAL INFORMATION TAX RETURN. AS OF JUNE 30, 2019, THE FOUNDATION HAS ACCRUED NO INTEREST AND NO PENALTIES RELATED TO UNCERTAIN TAX POSITIONS. IT IS THE FOUNDATION'S POLICY TO RECOGNIZE INTEREST AND/OR PENALTIES RELATED TO INCOME TAX MATTERS IN INCOME TAX EXPENSE.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	FUNDRAISING EXPENSES INCLUDED ON PAGE 1 385,502 ROUNDING

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	ROUNDING 1

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	FUNDRAISING EXPENSES INCLUDED ON PAGE 1 385,502

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2018

Open to Public Inspection

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

Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury Internal Revenue Service

Name of the organization NASHVILLE PREDATORS FOUNDATION

Employer identification number 62-1751832

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations, b Internet and email solicitations, c Phone solicitations, d In-person solicitations, e Solicitation of non-government grants, f Solicitation of government grants, g Special fundraising events. 2a Did the organization have a written or oral agreement with any individual... 2b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col (i), (vi) Amount paid to (or retained by) organization. Includes a Total row at the bottom.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d)
		GOLF TOURNAMENT (event type)	GALA (event type)	4 (total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts	316,115	280,372	1,016,009	1,612,496
	2 Less Contributions	149,659	133,432	123,514	406,605
	3 Gross income (line 1 minus line 2)	166,456	146,940	892,495	1,205,891
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	1,569	58	18,950	20,577
	6 Rent/facility costs				
	7 Food and beverages	27,034	2,240	29,715	58,989
	8 Entertainment	48,133	10,926	800	59,859
	9 Other direct expenses	62,345	45,235	138,497	246,077
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				385,502
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				820,389

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶					

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in
- | | | | |
|----------|-----------------------------|------------|---|
| a | The organization's facility | 13a | % |
| b | An outside facility | 13b | % |

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
------------------	-------------

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

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

Attach to Form 990.

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

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization NASHVILLE PREDATORS FOUNDATION

Employer identification number

62-1751832

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of non-cash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 89
3 Enter total number of other organizations listed in the line 1 table 89

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) COLLEGE SCHOLARSHIPS	4	10,000			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference

Explanation

Additional Data

Software ID:
Software Version:
EIN: 62-1751832
Name: NASHVILLE PREDATORS FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A SOLDIER'S CHILD FOUNDATION 1197 HAZELWOOD DRIVE SUITE 104 SMYRNA, TN 37167	26-3032468	501(C)(3)	5,000				JOURNEY CAMP IS WHERE CHILDREN OF OUR FALLEN U S MILITARY PERSONNEL COME AND BUILD MEANINGFUL LIFE-LONG RELATIONSHIPS, RESULTING IN STEPS TOWARDS INNER HEALING AND RESTORATION THROUGH ADVENTURE AND MENTORSHIP
AFTER THE IMPACT FUND 350 S NORTHWEST HIGHWAY SUITE 300 PARK RIDGE, IL 60068	81-0871670	501(C)(3)	25,000				GENERAL PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY FOUNDATION - HOPE LODGE 2008 CHARLOTTE AVENUE NASHVILLE, TN 37203	13-1788491	501(C)(3)	9,345				FURNITURE AND ACCESSORIES FOR HOPE LODGE ROOM MAKEOVER
AMERICAN SPECIAL HOCKEY ASSOCIATION 37 KENILWORTH ROAD BINGHAMTON, NY 13903	33-1111482	501(C)(3)	5,000				NASHVILLE SPECIAL HOCKEY FUNDING WILL SUPPORT THE ESTABLISHMENT OF A SPECIAL HOCKEY PROGRAM FOR INDIVIDUALS WITH SPECIAL NEEDS IN THE NASHVILLE AREA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ASSISTANCE LEAGUE OF NASHVILLE PO BOX 653 BRENTWOOD, TN 370240653	95-1945908	501(C)(3)	5,000				OPERATION SCHOOL BELL WILL PURCHASE TWO COMPLETE SETS OF NEW STANDARD SCHOOL ATTIRE FOR 3200 ECONOMICALLY DISADVANTAGED ELEMENTARY STUDENTS ATTENDING METRO NASHVILLE PUBLIC SCHOOLS (MNPS)
BAREFOOT REPUBLIC 1226 LAKEVIEW DRIVE SUITE G FRANKLIN, TN 37067	62-1841336	501(C)(3)	10,000				BAREFOOT REPUBLIC WOULD LIKE TO CONSTRUCT TWO HIGH ROPE ELEMENTS AT OUR CAMP ENTRANCE TO FURTHER ENHANCE TRANSFORMATIONAL CAMPING EXPERIENCES FOR SOCIO-ECONOMICALLY AND ETHNICALLY DIVERSE YOUTH

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BEADS OF COURAGE INC 3230 N DODGE BLVD TUCSON, AZ 857161883	20-2721500	501(C)(3)	7,500				BEADS OF COURAGE PROGRAMS AT MONROE CARELL JR CHILDRENS HOSPITAL AT VANDERBILT
BEST BUDDIES 1585 MALLORY LANE SUITE 208 BRENTWOOD, TN 37027	52-1614576	501(C)(3)	9,450				BEST BUDDIES PROM

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BEST BUDDIES TENNESSEE 1585 MALLORY LANE SUITE 208 BRENTWOOD, TN 37027	52-1614576	501(C)(3)	59,000	4,806	FMV	SEASON TICKETS	TICKETS TO PREDATORS GAMES (PAID TO NASHVILLE PREDATORS)/GENERAL PURPOSES
BIG BROTHERS BIG SISTERS OF MIDDLE TENNESSEE 1704 CHARLOTTE AVE 130 NASHVILLE, TN 37203	23-7056024	501(C)(3)	5,950				IGNITING SPARKS! WILL PROVIDE HIGH-QUALITY ARTISTIC AND ATHLETIC ACTIVITIES AND MATERIALS TO ENCOURAGE YOUTH DEVELOPMENT BY IGNITING THEIR SPARKS-- WHAT THAT LIGHTS THEM UP AND GIVES THEM PURPOSE AND DRIVE

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BOYS & GIRLS CLUBS OF MAURY COUNTY 210 W 8TH STREET COLUMBIA, TN 38401	62-1611131	501(C)(3)	10,000				NASHVILLE PREDATORS PLAYGROUNDS / NATURE PLAYSCAPES
BRENTWOOD HIGH SCHOOL 5304 MURRAY LANE BRENTWOOD, TN 37027	62-6000915	501(C)(3)	12,000				BHS SOFTBALL TEAM, GENERAL PURPOSE

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BRIDGES OF WILLIAMSON COUNTY DBA BRIDGES DOMESTIC VIOLENCE CENTER P O BOX 1592 FRANKLIN, TN 37065	62-1753127	501(C)(3)	8,896				THE SMASH YOUTH SPORTS COURT PROJECT
BRIGHT HEART FOUNDATION PO BOX 3463 BRENTWOOD, TN 37024	83-0986892	501(C)(3)	5,000				"KARDIAC KIDS OR "PEKKA'S PACIS OR SOMETHING LIKE THAT EXAMPLE THE PREDs PROVIDE A WUBBANUB PACIFIER FOR EVERY BABY AT VANDY IN THE PCICU WE HAVE AMAZON WISHLISTS

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CANDLE WISHES 1831 MARIAN LANE MURFREESBORO, TN 37130	86-1123637	501(C)(3)	5,000				BIRTHDAY GIFT GIVING AND PARTY HOSTING- THIS PROJECT SERVES UNDERPRIVILEGED AND HOMELESS CHILDREN IN RUTHERFORD COUNTY FOR THEIR BIRTHDAYS WITH PRESENTS, NECESSITIES, ESSENTIAL NEEDS AND A BIRTHDAY PARTY
CATHEDRAL OF THE INCARNATION 2015 WEST END AVENUE NASHVILLE, TN 37203		501(C)(3)	10,000				HAITI MISSIONS

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CATHOLIC CHARITIES OF TENNESSEE 2806 MCGAVOCK PIKE NASHVILLE, TN 37214	62-0679520	501(C)(3)	8,108				BRINGING FAMILIES TOGETHER UNDER THE OUTDOOR SHELTER
CENTER FOR THE ARTS INC 110 W COLLEGE STREET MURFREESBORO, TN 37130	26-1438816	501(C)(3)	5,500				CENTER STAGE ACADEMY SCHOLARSHIP PROGRAM

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CHEEKWOOD BOTANICAL GARDEN & MUSEUM OF ART 1200 FORREST PARK DRIVE NASHVILLE, TN 37205	62-0627921	501(C)(3)	5,000				DESTINATION CHEEKWOOD OUTREACH PROGRAM, PROVIDING EDUCATIONAL OUTINGS WITH ALL EXPENSES COVERED FOR LOW-INCOME TENNESSEE STUDENTS AND THEIR FAMILY MEMBERS AND TEACHERS
CHILDREN'S MUSEUM CORPORATION OF RUTHERFORD COUNTY DBA DISCOVERY CENTER 502 SE BROAD ST MURFREESBORO, TN 37130	62-1273308	501(C)(3)	9,000				DISCOVERY CENTER PROPOSES THE INSTALLATION OF THE CHILL ZONE, A SENSORY ROOM THAT PROVIDES PERMANENT, DAILY ACCOMMODATIONS FOR THOSE WITH SENSORY NEEDS AND ENHANCES THE MUSEUM EXPERIENCE FOR ALL VISITORS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CREATIVE PARKS NASHVILLE 526 HICKORY TRAIL DRIVE NASHVILLE, TN 37209	82-3153279	501(C)(3)	6,500				THE GNASHVILLE SPLASHVILLE MURAL WILL BE A PUBLIC ARTWORK AT METRO PARKS KIRKPATRICK COMMUNITY CENTER GNASH AND COMMUNITY FAMILIES WILL BE THE FOCAL POINT OF THIS LANDMARK MURAL
CROSSBRIDGE INC 335 MURFREESBORO ROAD NASHVILLE, TN 372102824	16-1755991	501(C)(3)	6,000				THE REQUESTED FUNDS ARE FOR OUR KIDPOWER YOUTH PROGRAM THE PROGRAM SEEKS TO HELP DISADVANTAGED CHILDREN MAKE LIFE-EMPOWERING DECISIONS TO HELP THEM BREAK FREE OF THE EFFECTS OF GENERATIONAL POVERTY

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DANITA'S CHILDREN - HOPE FOR HAITI CHILDREN'S CENTER POBOX280750 NASHVILLE, TN 37228	59-3735653	501(C)(3)	10,000				GENERAL PURPOSES
DREAMS AND WISHES OF TENNESSEE PO BOX 8383 HERMITAGE, TN 370768383	78-0363788	501(C)(3)	5,000				FUNDS WOULD FULFILL THREE (3) WISHES FOR CHILDREN WITH RELAPSED OR END-STAGE CANCER WHO WOULD NOT BE SERVED BY OTHER WISH GRANTING ORGANIZATIONS, DUE TO AGE OR OTHER ELIGIBILITY RESTRICTIONS

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END SLAVERY TENNESSEE PO BOX 160069 NASHVILLE, TN 37216	45-4955577	501(C)(3)	7,755				GENERAL PURPOSES
FOLDS OF HONOR FOUNDATION 8551 N 125TH E AVE SUITE 100 OWASSO, OK 74055	75-3240683	501(C)(3)	12,100				GENERAL PURPOSES

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FOOD BANK OF CENTRAL AND EASTERN NORTH CAROLINA ATTENTION DONATIONS 1924 CAPITAL BOULEVARD RALEIGH, NC 27604	56-1283426	501(C)(3)	10,867				HURRICANE FLORENCE RELIEF FUND
HARRIS-HILLMAN SPECIAL EDUCATION SCHOOL 1706 26TH AVENUE SOUTH NASHVILLE, TN 37212	62-0717138	501(C)(3)	7,000				HARRIS-HILLMAN IS SEEKING INSTALLATION OF AN INTERACTIVE LIGHT WALL- LITEZILLA WWW LITEZILLA COM TO BE USED BY YOUTH WITH DISABILITIES TO FURTHER THEIR EDUCATIONAL AND DEVELOPMENTAL GOALS

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HENDERSONVILLE INLINE HOCKEY ASSOCIATION INC (HIHA) 170 D EAST MAIN ST 222 HENDERSONVILLE, TN 37075	62-1611929	501(C)(3)	13,046				REPAIR OF THE FLOOD DAMAGED RINKS
HIGH HOPES INC 301 HIGH HOPES COURT FRANKLIN, TN 37064	62-1210720	501(C)(3)	7,352				WE ARE REQUESTING FUNDING FOR OUR PUCK (PROVIDING UNRIVALED CARE FOR KIDS) PROJECT THIS INITIATIVE WILL HELP CONTINUE TO ADVANCE EXCELLENCE IN OUR CLINICAL SERVICE DELIVERY

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HOPE FOR JUSTICE PO BOX 280365 NASHVILLE, TN 37228	75-3179471	501(C)(3)	6,500				HUMAN TRAFFICKING AWARENESS TRAINING NASHVILLE
HOSPICE OF THE HIGHLAND RIM FOUNDATION INC 110 E LAUDERDALE STREET TULLAHOMA, TN 37388	62-1874162	501(C)(3)	5,000				EMERGENCY GRANT PROGRAM FOR FAMILIES WHO HAVE CHILDREN ON HOSPICE GRANTS FOR FOOD , UTILITIES AND SPECIAL NEEDS TO LESSEN THE FINANCIAL STRESS WHILE A CHILD IS ON HOSPICE SERVICE

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INSPIRITUS - MYCANVAS PROGRAM PO BOX 60597 NASHVILLE, TN 37206	58-1535692	501(C)(3)	5,401				GENERAL PURPOSES
JUST KEEP LIVIN FOUNDATION 1107 GLENDON AVENUE LOS ANGELES, CA 90024	20-3921057	501(C)(3)	10,000				WE ARE REQUESTING FUNDING TO SPONSOR THE JUST KEEP LIVIN AFTERSCHOOL FITNESS AND WELLNESS PROGRAM AT MAPLEWOOD HIGH SCHOOL IN NASHVILLE, TN

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KABOOM 4301 CONNECTIVUT AVE NW WASHINGTON, DC 20089	52-1970904	501(C)(3)	48,085				PLAYGROUND BUILD
KING'S DAUGHTERS DAY HOME DBA KING'S DAUGHTERS CHILD DEVELOPMENT CENTER 590 NORTH DUPONT AVE MADISON, TN 37115	62-0729602	501(C)(3)	5,000				CURIOSITY COVE

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MAKE A WISH FOUNDATION OF MIDDLE TN 8119 ISABELLA LANE STE 105A BRENTWOOD, TN 37027	62-1833327	501(C)(3)	27,621				GENERAL PURPOSES
MAKE-A-WISH MIDDLE TENNESSEE 8119 ISABELLA LANE SUITE 105A BRENTWOOD, TN 37027	62-1833327	501(C)(3)	5,000				FINANCIAL SUPPORT FOR CREATING LIFE-CHANGING WISHES

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MCNEILLY CENTER FOR CHILDREN 100 MERIDIAN ST NASHVILLE, TN 37207	62-0479366	501(C)(3)	7,500				GNASH'S GREENHOUSE AND THE PREDS PUMPKIN PATCH AT MCNEILLY CENTER FOR CHILDREN
METRO NASHVILLE ANIMAL CARE AND CONTROL 5125 HARDING PLACE NASHVILLE, TN 37211	62-0694743	501(C)(3)	7,510				GENERAL PURPOSES

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MONROE CARELL JR CHILDREN'S HOSPITAL AT VANDERBILT 3322 WEST END AVENUE SUITE 900 NASHVILLE, TN 37203	35-2528741	501(C)(3)	291,115				GENERAL PURPOSES - GOLF TOURNEY SPONSORSHIP
MONROE HARDING 1120 GLENDALE LANE NASHVILLE, TN 37204	62-0476670	501(C)(3)	5,800				HELPING FOSTER PARENTS AFFORD THE COSTS OF RECREATION ACTIVITIES AND EXPERIENCES FOR THEIR FAMILY

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MONTHAVEN ARTS AND CULTURAL CENTER 1017 ANTEBELLUM CIRCLE HENDERSONVILLE, TN 370757096	47-3592341	501(C)(3)	10,000				FUNDING IS REQUESTED FOR PREDATORS-BRANDED MACC YOUTH SUMMER ARTS CAMP T-SHIRTS, (10) IPAD TABLETS/ CASES/ DIGITAL PENCILS, (1) PROJECTOR AND DOCUMENT CAMERA, PROVIDING STUDENTS WITH YEAR-ROUND TECHNOLOGY-BASED ARTS EDUCATIONAL CAPABILITIES
MOTHER TO MOTHER INC 5133 HARDING PIKE B10 C313 NASHVILLE, TN 37205	20-1028812	501(C)(3)	7,000				PROJECT SAFE AND HEALTHY SLEEP

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MURFREESBORO CITY SCHOOLS (JOHN PITTARD ELEMENTARY) 745 DEJARNETTE LANE MURFREESBORO, TN 37129	62-1823874	501(C)(3)	9,350				THE PREDATORS "JUMBOTRON" AN 86 IN ACTIVETOUCH SMART BOARD
MUSCULAR DYSTROPHY ASSOCIATION 783 OLD HICKORY BLVD SUITE 300W BRENTWOOD, TN 37027	13-1665552	501(C)(3)	10,000				NASHVILLE PREDATORS HOCKEY NIGHT AT MDA SUMMER CAMP

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NASHVILLE BALLET 3630 REDMON STREET NASHVILLE, TN 37209	10-0118043	501(C)(3)	9,000				FUND SCHOLARSHIPS FOR NASHVILLE BALLET'S ADAPTIVE DANCE NEW PERSPECTIVES PROGRAM, WHICH INVITES DIFFERENTLY-ABLED YOUTH TO EMBARK ON AN INCLUSIVE DANCE JOURNEY
NASHVILLE CHILDREN'S THEATRE 25 MIDDLETON STREET NASHVILLE, TN 37210	62-0637709	501(C)(3)	5,000				LITERATURE TO LIFE - RETURN TO SENDER & AUNTIE CLAUSE

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NASHVILLE ELITE HOCKEY CLUB DBA NASHVILLE JR PREDATORS HOCKEY CLUB 625 BAKERS BRIDGE AVE SUITE 105 BOX 11 FRANKLIN, TN 37067	81-2779781	501(C)(3)	10,000				NASHVILLE JR PREDATORS SCHOLARSHIP FUND
NASHVILLE LGBT CHAMBER FOUNDATION 401 PEABODY STREET NASHVILLE, TN 37210	30-0856323	501(C)(3)	8,000				GENERAL PURPOSES

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NASHVILLE TOOLS FOR SCHOOLS PO BOX 158480 NASVILLE, TN 37215	27-4092042	501(C)(3)	5,000				THIS REQUEST PROVIDES FURNITURE AND CLASSROOM ITEMS TO SUPPORT THE LEARNING ENVIRONMENT OF THE TEACHERS AND STUDENTS IN METRO NASHVILLE PUBLIC SCHOOLS
NASHVILLE YOUTH HOCKEY LEAGUE INC PMB 286 2817 WEST END AVE SUITE 126 126 NASHVILLE, TN 37203	23-1347596	501(C)(3)	7,500				GENERAL PURPOSES

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NASHVILLE ZOO INC 3777 NOLENSVILLE PIKE NASHVILLE, TN 37211	62-1411210	501(C)(3)	45,083				GENERAL PURPOSES
NATIONAL WHEELCATS INC (NASHVILLE SLED PREDS) 7087 RUSSELLVILLE RD GUTHRIE, KY 42234	52-1634159	501(C)(3)	23,804				GENERAL PURPOSES

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NATIONAL WHEELCATS INC (NASHVILLE SLED PREDS) 7087 RUSSELLVILLE RD GUTHRIE, KY 42234	52-1634159	501(C)(3)	6,500				WE ARE REQUESTING FUNDING FOR ICE TIME FOR THE 3RD ANNUAL SMASHVILLE JR SLED HOCKEY TOURNAMENT AT FORD ICE CENTER APRIL 2020
NATIONS MINISTRY CENTER 406 WELSHWOOD DRIVE NASHVILLE, TN 37211	55-0898912	501(C)(3)	6,870				BACK-TO-SCHOOL SUCCESS

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NORTH CAROLINA DISASTER RELIEF FUND 20312 MAIL SERVICE CENTER RALEIGH, NC 27699	56-0564547	501(C)(3)	10,867				HURRICANE FLORENCE RELIEF FUND, UNITED WAY ASSISTED WITH COLLECTING AND DEPOSITING ACCOUNTS IN SPECIFIC FUND
OASIS CENTER INC 1704 CHARLOTTE AVE SUITE 200 NASHVILLE, TN 37203	62-0968273	501(C)(3)	8,000				GENERAL PURPOSES

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PENCIL 7199 COCKRILL BEND BLVD NASHVILLE, TN 37209	58-1475675	501(C)(3)	5,500				GNASH SHARES HIS STASH ¹
PETERSON FOUNDATION FOR PARKINSON'S 4205 HILLSBORO PIKE SUITE 310 NASHVILLE, TN 37215	26-4144151	501(C)(3)	114,907				GENERAL PURPOSES

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PLANT THE SEED 710 PORTER RD NASHVILLE, TN 37206	45-3599292	501(C)(3)	5,445				GENERAL PURPOSES
PLAY LIKE A GIRL 4117 HILLSBORO PIKE SUITE 103-129 NASHVILLE, TN 37215	33-1149207	501(C)(3)	10,000				PLAY LIKE A GIRL REQUESTS \$10,000 TO SUPPORT CURRICULUM DEVELOPMENT AND EDUCATIONAL MATERIALS FOR OUR RIGOROUS, YEAR-ROUND SCIENCE, TECHNOLOGY, ENGINEERING AND MATHEMATICS (STEM) AND SPORTS PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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RONALD MCDONALD HOUSE CHARITIES OF NASHVILLE 2144 FAIRFAX AVENUE NASHVILLE, TN 37212	62-1310717	501(C)(3)	8,565				NASHVILLE RONALD MCDONALD HOUSE, FAMILY LOCKER ROOM
ROOM IN THE INN 705 DREXEL ST 2 NASHVILLE, TN 37203	10-0126329	501(C)(3)	8,000				GENERAL PURPOSES

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SADDLE UP 1549 OLD HILLSBORO RD FRANKLIN, TN 37069	58-1930303	501(C)(3)	6,900				CREATE "GNASH'S NOOK" BY UPGRADING OUR CLASSROOM TO A MORE INTERACTIVE LEARNING AREA FOR OUT PARTICIPANTS, STAFF, VOLUNTEERS AND COMMUNITY
SALVATION ARMY (NASHVILLE) 631 DICKERSON PIKE NASHVILLE, TN 37207	36-3805307	501(C)(3)	7,746				GENERAL PURPOSES

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SCOTT HAMILTON SKATING CLUB 1108 PRINCETON HILLS DR NOLENSVILLE, TN 37135	43-2075698	501(C)(3)	9,500				BRINGING CLASSES TO THE RINK! AND SCOTT HAMILTON ALL-STAR SCHOLARSHIP PROGRAM
SECOND HARVEST FOOD BANK OF MIDDLE TN INC 331 GREAT CIRCLE ROAD NASHVILLE, TN 37228	62-1049447	501(C)(3)	7,174				GENERAL PURPOSES

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SEXUAL ASSAULT CENTER 101 FRENCH LANDING DRIVE NASHVILLE, TN 37228	62-1043294	501(C)(3)	5,119				THE SEXUAL ASSAULT CENTER IS REQUESTING FUNDS TO ENHANCE ITS PLAYGROUND TO BETTER SUPPORT SENSORY MOTOR INTERVENTIONS, WHICH ARE VITAL IN HIGH-QUALITY TREATMENT OF CHILDREN WHO HAVE EXPERIENCED SEXUAL TRAUMA
SOLES4SOULSORG 319 MARTINGALE DRIVE OLD HICKORY, TN 37138	20-4023482	501(C)(3)	24,630				GENERAL PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SOLES4SOULSORG 319 MARTINGALE DRIVE OLD HICKORY, TN 37138	20-4023482	501(C)(3)	5,000				"SOLES4SUMMER" - A MAY 2020, ONE DAY DISTRIBUTION EVENT WITH MNPS, THAT PROVIDES THOUSANDS OF ECONOMICALLY DISADVANTAGED CHILDREN ACCESS TO NEW SHOES FOR THE SUMMER AND THROUGHOUT THE YEAR
SOLO PARENT SOCIETY PO BOX 994 FRANKLIN, TN 37065	82-1112575	501(C)(3)	10,000				THE SOLO PARENT LIFE APP WILL BE A WAY SINGLE PARENTS CAN ACCESS OUR SUPPORT NETWORK DAILY TO ASSIST THEM WITH PRACTICAL RESOURCES TO HELP THEM NAVIGATE PARENTING ALONE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SPECIAL OLYMPICS TENNESSEE 461 CRAIGHEAD STREET NASHVILLE, TN 37204	23-7348136	501(C)(3)	13,600				UNIFIED CHAMPION SCHOOLS PROGRAM WHICH INCLUDES THREE COMPONENTS 1 WHOLE SCHOOL ENGAGEMENT PROMOTING INCLUSION 2 CREATING A UNIFIED (INCLUSIVE) SPORTS CLUB/PROGRAM 3 YOUTH LEADERSHIP OPPORTUNITIES
STARS 1704 CHARLOTTE AVENUE SUITE 200 NASHVILLE, TN 37203	62-1285699	501(C)(3)	8,000				KIDS ON THE BLOCK LITERACY PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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STEPPING STONES SAFE HAVEN INC 720 OLD SALEM ROAD MURFREESBORO, TN 37129	27-1233881	501(C)(3)	8,000				PROJECT 1 COMPLETE PRIVACY FENCE IN SIDE YARD TO ENSURE OUR WOMEN AND CHILDREN FEEL SAFE AS CARS PASS PROJECT 2 TWO FAMILY STYLE TABLE FOR MEALS TOGETHER
TALK WITH ME TENNESSEE TALK WITH ME TENNESSEE PO BOX 121113 NASHVILLE, TN 37212	81-2216356	501(C)(3)	8,754				COMMUNICATION DEVICE LENDING LIBRARY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TENNESSEE BAPTIST CHILDREN'S HOMES 1310 FRANKLIN RD PO BOX 2206 BRENTWOOD, TN 370242206	62-0488043	501(C)(3)	7,900				TBCH MIDDLE TENNESSEE CAMPUS CENTER AND ACTIVITIES BUILDING SOUND SYSTEM PROJECT BENEFITING CHILDREN'S ACTIVITIES
TENNESSEE GOLF FOUNDATION 400 FRANKLIN ROAD FRANKLIN, TN 37069	58-1893478	501(C)(3)	10,000				TO CONTINUE THE FUNDING OF THE MICHEL KAPLAN SCHOLARSHIPS GIVEN TO OUR GRADUATING HIGH SCHOOL SENIORS WHO COMPLETE THE FIRST TEE'S LIFE SKILLS EXPERIENCE CURRICULUM IN EAST NASHVILLE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TENNESSEE TRUCKING FOUNDATION 4531 TROUSDALE DRIVE NASHVILLE, TN 37204	62-1504853	501(C)(3)	7,200				THE FOUNDATION IS REQUESTING \$7,200 TO CREATE AND INSTALL A CUSTOM TRAILER WRAP THAT INCLUDES GNASH IN THE DESIGN WITH THE STAY OUT OF THE NO-ZONE GRAPHICS
THE ARC TENNESSEE 545 MAINSTREAM DRIVE SUITE 100 NASHVILLE, TN 37228	62-0639154	501(C)(3)	6,000				PATHWAYS TO THE FUTURE NAVIGATING KEY TRANSITIONS FOR YOUTH WITH DISABILITIES AND THE FAMILIES THAT SUPPORT THEM - AN INTERACTIVE WORKSHOP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE FAMILY CENTER 139 THOMPSON LANE NASHVILLE, TN 37211	62-1237360	501(C)(3)	6,000				FAMILY BONDING BOOKS & SUPPLIES, A COMPONENT OF OUR POSITIVE PARENTING/NURTURING FAMILY PROGRAMS
TUCKER'S HOUSE PO BOX 968 SPRING HILL, TN 37174	27-0896877	501(C)(3)	5,000				FUNDING IS FOR OUR ASSESS AND RETROFIT PROGRAM THAT PARTNERS WITH FAMILIES OF CHILDREN WITH DISABILITIES MAKING THEIR HOMES SAFE, ACCESSIBLE, AND CONDUCTIVE TO THE MOST INDEPENDENCE FOR THE CHILD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
URBAN GREEN LAB PO BOX 68348 / 1310 CLINTON ST SUITE 205 NASHVILLE, TN 37206	27-1011744	501(C)(3)	7,457				GENERAL PURPOSES
WEST NASHVILLE DREAM CENTER PO BOX 92456 NASHVILLE, TN 37209	81-4064177	501(C)(3)	10,000				"NEXT GEN" STUDENT PROGRAM VAN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WHITE FAWN FARM 3743 BEAR CREEK ROAD THOMPSONS STATION, TN 37179	17-0530000	501(C)(3)	5,000				WE REQUEST FUNDS TO COMPLETE AN ARENA IMPROVEMENT PROJECT WHERE FUNDS HAVE RUN OUT THIS WILL ALLOW LESSONS TO BE GIVEN TO CHILDREN IN THE EVENINGS AFTER SCHOOL
YOUTH INCORPORATED IN-LINE HOCKEY 4117 HILLSBORO PIKE SUITE 103-256 NASHVILLE, TN 37215	10-0247092	501(C)(3)	9,962				BLAST YOUTH ROLLER HOCKEY YOUTH INCORPORATED IS THE PARENT NON-PROFIT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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YWCA OF NASHVILLE & MIDDLE TN 1608 WOODMONT BLVD NASHVILLE, TN 37215	62-0475702	501(C)(3)	150,000				SUPPORT FOR AMEND INITIATIVE
FLASHES OF HOPE - NASHVILLE CHAPTER 36 SOUTH FRANKLIN STREET CHAGRIN FALLS, OH 44022	04-3648694	501(C)(3)	5,000				FLASHES OF HOPE NASHVILLE CHAPTER, PHOTOGRAPHY PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PRESTON TAYLOR MINISTRIES 4014 INDIANA AVE NASHVILLE, TN 37209	62-1757018	501(C)(3)	6,753				FUNDING FOR LIFE AND SPORTS PROGRAM - STUDENT ACTIVITIES OF RUNNING/EXERCISE AND LESSONS ON NUTRITION AND CHARACTER EDUCATION
BOYS AND GIRLS CLUB OF MIDDLE TENNESSEE 1704 CHARLOTTE AVENUE SUITE 200 NASHVILLE, TN 37203	62-0540402	501(C)(3)	7,950				EQUIPMENT TO SUPPORT TRIPLE PLAY A GAME PLAN FOR THE MIND, BODY & SOUL PROGRAM AND GENERAL PURPOSES

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2018**Open to Public Inspection**

Department of the Treasury

Name of the organization

NASHVILLE PREDATORS FOUNDATION

Employer identification number

62-1751832

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 8B	THE ORGANIZATION HAS ONE COMMITTEE WHICH IS THE GRANT COMMITTEE THAT COMMITTEE ONLY MAKES RECOMMENDATIONS TO THE FULL BOARD AS TO WHICH GRANTS TO APPROVE THEY DO NOT MAKE DECISIONS ON BEHALF OF THE BOARD THE DECISION OF THE BOARD CONCERNING THE MAKING OF GRANTS ARE DOCUMENTED IN THE BOARD MINUTES

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE TREASURER AND EXECUTIVE DIRECTOR REVIEWS THE FORM 990 BEFORE FILING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	EACH YEAR, AS PART OF THEIR ANNUAL AUDIT, ALL BOARD MEMBERS ARE REQUIRED TO COMPLETE A RELATED PARTY QUESTIONNAIRE ALL RESPONSES ARE REVIEWED BY MANAGEMENT AND THE AUDITORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	FOUNDATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2018

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
NASHVILLE PREDATORS FOUNDATION

Employer identification number

62-1751832

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NASHVILLE HOLCEY CLUB LIMITED PARTNERSHIP 501 BROADWAY NASHVILLE, TN 37203 62-1696563	NATIONAL HOCKEY LEAGUE TEAM	TN	N/A									

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b	No
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d	No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes
o Sharing of paid employees with related organization(s)	1o	Yes
p Reimbursement paid to related organization(s) for expenses	1p	Yes
q Reimbursement paid by related organization(s) for expenses	1q	No
r Other transfer of cash or property to related organization(s)	1r	No
s Other transfer of cash or property from related organization(s)	1s	No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NASHVILLE HOCKEY CLUB LIMITED PARTNERSHIP	M		FMV
(2) NASHVILLE HOCKEY CLUB LIMITED PARTNERSHIP	N		FMV
(3) NASHVILLE HOCKEY CLUB LIMITED PARTNERSHIP	O		FMV
(4) NASHVILLE HOCKEY CLUB LIMITED PARTNERSHIP	P	120,000	FMV
(5) NASHVILLE HOCKEY CLUB LIMITED PARTNERSHIP	C	173,831	FMV

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation