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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 black lung benefit trust or private foundation)

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

OMB No 1545-0047

2010Open to Public
Inspection

A For the 2010 calendar year, or tax year beginning , and ending	
B Check if applicable: Address change Name change Initial return Terminated Amended return Application pending	C Name of organization INDEPENDENT INSURANCE AGENTS OF TENNESSEE, INC. D Employer identification number 62-0379523 E Telephone number 615-385-1898 G Gross receipts \$ 3,771,019 H(a) Is this a group return for affiliates? Yes ☐ No ☒ H(b) Are all affiliates included? Yes ☐ No ☐ If "No," attach a list (see instructions) H(c) Group exemption number ▶
F Name and address of principal officer CHARLES BIDEK 2500 HILLSBORO ROAD NASHVILLE TN 37212	
I Tax-exempt status ☐ 501(c)(3) ☒ 501(c) (6) ◀ (insert no) 4947(a)(1) or 527	
J Website: ▶ WWW.INSURORS.ORG	
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶	
L Year of formation 1930 M State of legal domicile TN	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities TRADE ASSOCIATION																																																										
	2 Check this box ☐ 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)	18																																																									
	4 Number of independent voting members of the governing body (Part VI, line 1b)	18																																																									
	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	9																																																									
	6 Total number of volunteers (estimate if necessary)	53																																																									
	7a Total unrelated business revenue from Part VIII, column (C), line 12	713,918																																																									
	7b Net unrelated business taxable income from Form 990-T, line 34	44,713																																																									
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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 CHARLES BIDEK	Date 08/01/2011
	Type or print name and title CEO	
Paid Preparer Use Only	Print/Type preparer's name MARSHA A. WALL, CPA	Preparer's signature Marsha A. Wall, CPA
	Firm's name ▶ BLANKENSHIP CPA GROUP, PLLC	Date 7/25/11
	Firm's address ▶ 109 WESTPARK DRIVE, SUITE 430 BRENTWOOD, TN 37027-5032	Check if self-employed ☐ PTIN P00043543
	Firm's EIN ▶ 45-0491842	Phone no 615-373-3771

May the IRS discuss this return with the preparer shown above? (see instructions)

Yes ☐ No ☐

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2010)

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission**TRADE ASSOCIATION****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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ including grants of \$) (Revenue \$)
CONFERENCES, CONVENTIONS, MEETINGS, SCHOOLS AND SEMINARS (SERVES APPROXIMATELY 475 AGENCY MEMBERS)

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

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 ►

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		X
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	X	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

Part IV Checklist of Required Schedules (continued)

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

Yes **X** No

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	18
1b	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	X
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	9
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	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X
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	X
b	If "Yes," enter the name of the foreign country. See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
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?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
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	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
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	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
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 and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the 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	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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

Check if Schedule O contains a response to any question in this Part VI

X

Section A. Governing Body and Management

- 1a** Enter the number of voting members of the governing body at the end of the tax year
- b** 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?
- 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?
- 4** Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?
- 5** Did the organization become aware during the year of a significant diversion of the organization's assets?
- 6** Does the organization have members or stockholders?
- 7a** Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?
- b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons?
- 8** Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following
- a** The governing body?
- b** Each committee with authority to act on behalf of the governing body?
- 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

	Yes	No
1a 18		
1b 18		
2		X
3		X
4		X
5		X
6		X
7a	X	
7b	X	
8a	X	
8b	X	
9	X	

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

- 10a** Does the organization have local chapters, branches, or affiliates?
- b** If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?
- 11a** Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?
- b** Describe in Schedule O the process, if any, used by the organization to review this Form 990
- 12a** Does the organization have a written conflict of interest policy? If "No," go to line 13
- b** Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
- c** Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done
- 13** Does the organization have a written whistleblower policy?
- 14** Does the organization have a written document retention and destruction policy?
- 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?
- a** The organization's CEO, Executive Director, or top management official
- b** Other officers or key employees of the organization
- 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?
- b** If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

	Yes	No
10a		X
10b		
11a		X
12a	X	
12b	X	
12c	X	
13		X
14		X
15a	X	
15b		X
16a		X
16b		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
- Own website Another's website **X** Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► **CHARLES BIDEK**

2500 HILLSBORO ROAD

NASHVILLE

TN 37212

615-385-1898

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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) CHRIS ALLISON BOARD MEMBER	0.00							0	0	0
(2) JIMMY D. ALSUP BOARD MEMBER	0.00							0	0	0
(3) WALT BRADSHAW BOARD MEMBER	0.00							0	0	0
(4) STEVE O. BRYANT BOARD MEMBER	0.00							0	0	0
(5) CYNTHIA GRESHAM BOARD MEMBER	0.00							0	0	0
(6) ED GIBBONS BOARD MEMBER	0.00							0	0	0
(7) JOE A. HUNT, JR. BOARD MEMBER	0.00							0	0	0
(8) KEVIN S. HALE BOARD MEMBER	0.00							0	0	0
(9) COOPER JONES BOARD MEMBER	0.00							0	0	0
(10) BOB MCINTIRE BOARD MEMBER	0.00							0	0	0
(11) JOHN W. MCINTURFF, III BOARD MEMBER	0.00							0	0	0
(12) EDDIE MILLER, III BOARD MEMBER	0.00							0	0	0
(13) BRAD V. SMITH BOARD MEMBER	0.00							0	0	0
(14) BOBBY L. SAIN BOARD MEMBER	0.00							0	0	0
(15) ANDY C. SHAFER BOARD MEMBER	0.00							0	0	0
(16) ROGER H. SMITH BOARD MEMBER	0.00							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 (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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			
(17) DOLLY A. TATE BOARD MEMBER	0.00							0	0	0
(18) TEE B. ZERFOSS, III BOARD MEMBER	0.00							0	0	0
(19) CHARLES BIDEK EXEC. DIR.	40.00			X	X	X		209,937	0	0
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
(26)										
(27)										
(28)										
1b Sub-total								209,937		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								209,937		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **1**

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 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? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

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

(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 in compensation from the organization **0**

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f				
	g Noncash contributions included in lines 1a-1f	\$				
	h Total. Add lines 1a-1f					
Program Service Revenue		Busn. Code				
	2a MEMBERSHIP DUES		420,154	420,154		
	b CONVENTIONS/CONFERENCES		284,848			284,848
	c SCHOOLS & SEMINARS		190,525			190,525
	d MAGAZINE	524298	105,595		105,595	
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		1,001,122			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		281,184	203,083		78,101
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real	(ii) Personal			
	6a Gross Rents	136,688				
	b Less rental exps	198,942				
	c Rental inc or (loss)	-62,254				
	d Net rental income or (loss)		-62,254	-60,955	-1,299	
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		1,737,215				
	b Less cost or other basis & sales exps		1,606,976			
	c Gain or (loss)		130,239			
	d Net gain or (loss)		130,239	130,239		
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a				
	b Less direct expenses	b				
	c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Busn. Code				
11a COMMISSIONS	524298	531,483		531,483		
b COMMISSIONS-ACTUARIAL	524298	78,139		78,139		
c MISCELLANEOUS		5,188	5,188			
d All other revenue						
e Total. Add lines 11a-11d		614,810				
12 Total revenue. See instructions		1,965,101	697,709	713,918	553,474	

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) but are not required to complete columns (B), (C), and (D)

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2 Grants and other assistance to individuals in the U S See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members	209,937			
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	398,123			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	139,978			
10 Payroll taxes	42,576			
11 Fees for services (non-employees)				
a Management				
b Legal	28,953			
c Accounting	18,529			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	13,129			
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	4,148			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	266,479			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	33,698			
23 Insurance				
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a SCHOOLS & SEMINARS	142,146			
b DUES	135,458			
c PUBLIC RELATIONS	54,180			
d EQUIPMENT EXPENSE	39,971			
e PRINTING AND PUBLICATIONS	33,072			
f All other expenses	146,681			
25 Total functional expenses. Add lines 1 through 24f	1,707,058	0	0	0
26 Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	85,018	1	71,877
	2 Savings and temporary cash investments	1,408,711	2	1,644,214
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 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)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	6,000	9	6,000
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,952,382		
	b Less: accumulated depreciation	10b 1,060,913	957,018	10c 891,469
	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	1,785,219	15	1,777,604
16 Total assets. Add lines 1 through 15 (must equal line 34)	4,241,966	16	4,391,164	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 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. Complete Part X of Schedule D	449,506	25	500,190
	26 Total liabilities. Add lines 17 through 25	449,506	26	500,190
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	3,792,460	27	3,890,974
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ☐ 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	3,792,460	33	3,890,974
	34 Total liabilities and net assets/fund balances	4,241,966	34	4,391,164

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,965,101
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,707,058
3	Revenue less expenses Subtract line 2 from line 1	3	258,043
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,792,460
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-159,529
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	3,890,974

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990 Cash Accrual X Other MODIFIED CASH 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?		X
b Were the organization's financial statements audited by an independent accountant?	X	
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	X	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
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		

Form **990** (2010)

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010Open to Public
Inspection

Name of the organization

**INDEPENDENT INSURANCE AGENTS
OF TENNESSEE, INC.**

Employer identification number

62-0379523**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate 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?		Yes 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?		Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" to 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 Tax 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 8/17/06, 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, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, 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 XIV, 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" to 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 XIV, 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) Revenues included in Form 990, Part VIII, line 1	► \$
(ii) Assets included in Form 990, Part X	► \$

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

a Revenues included in 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 XIV.

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" to 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 XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?

Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if organization answered "Yes" to 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 year end balance held as

- a Board designated or quasi-endowment ► %
 b Permanent endowment ► %
 c Term endowment ► %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
 (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		100,000		100,000
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		1,852,382	1,060,913	791,469
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				891,469

Part VII Investments—Other Securities. 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)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) DIVERSIFIED TRUST COMPANY	1,647,111
(2) INVESTMENT IN BRIC	80,000
(3) INVESTMENT IN BANK	25,000
(4) INVESTMENT-INSUROR SERVICES, LLC	21,650
(5) FEDERAL INCOME TAX OVERPAYMENT	3,593
(6) F&E TAX OVERPAYMENT	250
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	1,777,604

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) GROUP INS. COLLECTION/PAY.	291,901
(3) ADVANCE COLLECTION - DUES	208,289
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	500,190

2. **FIN 48 (ASC 740) Footnote** In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,965,101
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,707,058
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	258,043
4	Net unrealized gains (losses) on investments	4	-160,232
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	704
9	Total adjustments (net) Add lines 4 through 8	9	-159,528
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	98,515

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

1	Total revenue, gains, and other support per audited financial statements	1	1,992,449
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-160,232
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	-160,232
3	Subtract line 2e from line 1	3	2,152,681
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 XIV)	4b	-187,580
c	Add lines 4a and 4b	4c	-187,580
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,965,101

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	1,893,934
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,893,934
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 XIV)	4b	-186,876
c	Add lines 4a and 4b	4c	-186,876
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,707,058

Part XIV Supplemental Information

Complete this part to 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, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 8 - RECONCILIATION OF CHANGES - OTHER

RENTAL EXPENSES	\$	198,942
INVESTMENT EXPENSES	\$	-11,362
RENTAL EXPENSES	\$	-198,942
INVESTMENT EXPENSES	\$	11,362
BOOK / TAX DEPRECIATION DIFFERENCE	\$	704

Part XIV Supplemental Information (continued)**PART XII, LINE 4B - REVENUE AMOUNTS INCLUDED ON RETURN - OTHER**

RENTAL EXPENSES	\$	-198,942
INVESTMENT EXPENSES	\$	11,362

PART XIII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER

RENTAL EXPENSES	\$	-198,942
INVESTMENT EXPENSES	\$	11,362
BOOK / TAX DEPRECIATION DIFFERENCE	\$	704

SCHEDULE J
(Form 990)Department of the Treasury
Internal Revenue Service**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010**Open To Public
Inspection**

Name of the organization

**INDEPENDENT INSURANCE AGENTS
OF TENNESSEE, INC.**Employer identification number
62-0379523**Part I Questions Regarding Compensation****1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☒ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☒ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|--|---|
| ☒ Compensation committee | ☒ Written employment contract |
| ☐ Independent compensation consultant | ☐ Compensation survey or study |
| ☐ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b X

2 X

4a X

4b X

4c X

5a

5b

6a

6b

7

8

9

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
CHARLES BIDEK							
1	(i) 209,937	(ii) 0	(iii) 0	0	0	209,937	212,633
2	(i)	(ii)	(iii)	0	0	0	0
3	(i)	(ii)	(iii)				
4	(i)	(ii)	(iii)				
5	(i)	(ii)	(iii)				
6	(i)	(ii)	(iii)				
7	(i)	(ii)	(iii)				
8	(i)	(ii)	(iii)				
9	(i)	(ii)	(iii)				
10	(i)	(ii)	(iii)				
11	(i)	(ii)	(iii)				
12	(i)	(ii)	(iii)				
13	(i)	(ii)	(iii)				
14	(i)	(ii)	(iii)				
15	(i)	(ii)	(iii)				
16	(i)	(ii)	(iii)				

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**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.

OMB No 1545-0047

2010Open to Public
Inspection

Name of the organization

**INDEPENDENT INSURANCE AGENTS
OF TENNESSEE, INC.**

Employer identification number

62-0379523**FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS****MEMBERS OF THE GOVERNING BODY****FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS****MEMBERS APPROVE DECISIONS****FORM 990, PART VI, LINE 9 - OFFICERS WHO CANNOT BE REACHED****CHRIS ALLISON****JIMMY D. ALSUP****WALT BRADSHAW****STEVE O. BRYANT****CYNTHIA GRESHAM****ED GIBBONS****JOE A. HUNT, JR.****KEVIN S. HALE****COOPER JONES**

Name of the organization

INDEPENDENT INSURANCE AGENTS

Employer identification number

62-0379523

BOB MCINTIRE

JOHN W. MCINTURFF, III

EDDIE MILLER, III

BRAD V. SMITH

BOBBY L. SAIN

ANDY C. SHAFER

ROGER H. SMITH

DOLLY A. TATE

TEE B. ZERFOSS, III

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
TAX RETURN REVIEWED BY EXECUTIVE DIRECTOR BEFORE SUBMISSION TO TAXING
AUTHORITY.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
ANNUAL REVIEW

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
COMPENSATION COMMITTEE

Name of the organization	INDEPENDENT INSURANCE AGENTS	Employer identification number	62-0379523
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FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
UPON WRITTEN REQUEST TO EXECUTIVE DIRECTOR

Year Ended: December 31, 2010

62-0379523

INDEPENDENT INSURANCE AGENTS
OF TENNESSEE, INC.
2500 HILLSBORO ROAD
NASHVILLE, TN 37212

**Electing out of Bonus Depreciation Allowance for
All Eligible Depreciable Property**

The taxpayer elects out of first-year bonus depreciation allowance under IRC Section 168(k) for all eligible asset classes of depreciable property acquired after December 31, 2007. This election applies to all eligible depreciable property placed in service during the tax year.

INDEINS INDEPENDENT INSURANCE AGENTS

62-0379523

Federal Asset Report

FYE: 12/31/2010

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
5-year GDS Property:									
273	LAPTOP	9/07/10	1,918			1,918	5 MQ200DB	0	288
274	HP LASERJET PRO	10/08/10	186			186	5 MQ200DB	0	9
275	COMPUTER SWITCH - HARDWARE	12/08/10	682			682	5 MQ200DB	0	34
276	SHARP COLOR COPIER	12/23/10	9,673			9,673	5 MQ200DB	0	484
			<u>12,459</u>			<u>12,459</u>		<u>0</u>	<u>815</u>
7-year GDS Property:									
269	4 MELAMINE TOP FOLDING TABLES	2/08/10	496			496	7 MQ200DB	0	124
270	DISHWASHER	4/08/10	469			469	7 MQ200DB	0	84
271	ALARM SYSTEM	5/24/10	2,394			2,394	7 MQ200DB	0	427
272	CAMERA & SD CARD	7/19/10	693			693	7 MQ200DB	0	74
			<u>4,052</u>			<u>4,052</u>		<u>0</u>	<u>709</u>
Prior MACRS:									
7	Typing Table	10/16/87	87			87	5 HY 200DB	87	0
18	Wall Partition	5/31/89	659			659	7 HY 200DB	659	0
30	Two Drawer Filing Cabinet	7/13/92	204			204	7 HY 200DB	204	0
36	Two Burgundy/Black Chairs	2/15/93	303			303	7 HY 200DB	303	0
37	Two Vir Tables	2/15/93	487			487	7 HY 200DB	487	0
38	Eight Chairs	3/02/93	2,252			2,252	7 HY 200DB	2,252	0
39	Black Chair	4/30/93	170			170	7 HY 200DB	170	0
41	110 Royal Stacker Chairs	5/13/94	3,703			3,703	7 HY 200DB	3,703	0
42	Brown Oak Table - 24x72	5/23/94	1,398			1,398	7 HY 200DB	1,398	0
43	Brown Oak Table- 60 Round	5/23/94	864			864	7 HY 200DB	864	0
44	Security System	5/25/94	6,652			6,652	7 HY 200DB	6,652	0
45	Phone System	5/30/94	20,189			20,189	7 HY 200DB	20,189	0
46	Furniture	6/17/94	25,000			25,000	7 HY 200DB	25,000	0
47	Office Furniture & Fixtur es	1/31/95	8,175			8,175	7 HY 200DB	8,175	0
48	Cherry Glass Curio Cabine t	8/31/95	1,285			1,285	7 HY 200DB	1,285	0
49	4 Executive Chairs - Pacific Wood Finish	8/31/95	1,338			1,338	7 HY 200DB	1,338	0
50	Haw Executive U Station Desk & Cabinet	9/29/95	6,262			6,262	7 HY 200DB	6,262	0
52	Office Furniture & Fixtur es	12/07/95	3,220			3,220	7 HY 200DB	3,220	0
73	Laserjet	2/12/93	1,551			1,551	5 HY 200DB	1,551	0
76	HP \$1 Laser Printer	4/22/94	795			795	5 HY 200DB	795	0
136	HAW Double Pedestal Desk	2/27/97	1,788			1,788	7 HY 200DB	1,788	0
137	Regent Vertical Storage Doors	2/27/97	1,332			1,332	7 HY 200DB	1,332	0
138	Walnut Vinyl Plaque	3/14/97	78			78	7 HY 200DB	78	0
139	Picture Frame Warehouse	3/14/97	2,003			2,003	7 HY 200DB	2,003	0
140	Regent Keyboard Pullout Tray	5/30/97	166			166	7 HY 200DB	166	0
141	Picture Frames	6/05/97	60			60	7 HY 200DB	60	0
142	Past President Photos	7/02/97	276			276	7 HY 200DB	276	0
143	Credenza	7/24/97	2,099			2,099	7 HY 200DB	2,099	0
144	HAW Task Light	7/24/97	218			218	7 HY 200DB	218	0
145	42 Round Table & Base-Q Anne	7/24/97	440			440	7 HY 200DB	440	0
146	Past President Photos	9/04/97	60			60	7 HY 200DB	60	0
149	Picture Frame Warehouse	12/04/97	333			333	7 HY 200DB	333	0
150	Burgandy Chair	12/11/97	130			130	7 HY 200DB	130	0
151	MINI BLINDS	12/31/98	978			978	7 HY 200DB	978	0
152	3 EXECUTIVE CHAIRS	1/22/98	1,991			1,991	7 HY 200DB	1,991	0
154	POSTAGE METER & SCALE	4/23/98	5,739			5,739	5 HY 200DB	5,739	0
156	3 WINDOWS 95 UPGRADES	4/16/98	1,409			1,409	5 HY 200DB	1,409	0
162	PICTURES FRAMES	7/09/98	253			253	7 HY 200DB	253	0
166	Quickbooks 1999 Software	2/05/99	325			325	5 HY 200DB	325	0
167	Internet Web Site Hosting	5/12/99	1,356			1,356	5 HY 200DB	1,356	0
168	Compaq Deskpro Computer	6/11/99	1,528			1,528	5 HY 200DB	1,528	0
170	New server Outlook 200	10/20/99	3,780			3,780	5 HY 200DB	3,780	0
171	Upgrade Back Office	10/20/99	1,150			1,150	5 HY 200DB	1,150	0
173	Desks.cradenzas.keybd try	6/11/99	7,391			7,391	7 HY 200DB	7,391	0
174	Chairs (2)	7/02/99	1,379			1,379	7 HY 200DB	1,379	0
180	DELL DIRECT SALES-KH	11/22/00	1,136			1,136	5 HY 200DB	1,136	0
181	DELL DIRECT SALES-KH	11/22/00	248			248	5 HY 200DB	248	0
188	HP LASER JET PRINTER	2/13/01	2,159			2,159	5 HY 200DB	2,159	0
189	OFFICE COMPUTER	3/16/01	1,647			1,647	5 HY 200DB	1,647	0
190	OFFICE COMPUTER	4/16/01	2,008			2,008	5 HY 200DB	2,008	0
191	COMPUTER PRODUCTS	4/16/01	1,904			1,904	5 HY 200DB	1,904	0

INDEINS INDEPENDENT INSURANCE AGENTS

62-0379523

Federal Asset Report

FYE: 12/31/2010

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
192	HP SCANJET SCANNER	5/16/01	560				560	5 HY 200DB	560	0
193	LASER JET 1200/COLOR LASER 4550	5/16/01	3,174				3,174	5 HY 200DB	3,174	0
194	SHARP AR-407 COPIER	5/17/01	13,334				13,334	5 HY 200DB	13,334	0
195	COMPUTER PRODUCTS	7/19/01	2,117				2,117	5 HY 200DB	2,117	0
197	NIKON COOLPIX 995/APS 35MM CAME	11/02/01	1,120				1,120	5 HY 200DB	1,120	0
200	COMPUTER, PRINTER, MONITOR-DEL	1/03/02	2,002		X		1,402	5 HY 200DB	2,002	0
201	DELL 19 IN MONITOR	2/06/02	405		X		284	5 HY 200DB	405	0
203	COMPUTER-DELL	3/08/02	842		X		589	5 HY 200DB	842	0
204	WALL CABINET-CONFERENCE ROOM	3/11/02	1,175		X		823	7 HY 200DB	1,175	0
211	PICTURE FRAMES FOR WALL COLLEC	12/31/02	345		X		242	7 HY 200DB	345	0
216	COMPUTERS-3 DESKTOPS/EQUIPMEN	1/15/03	4,169		X		2,918	5 MQ200DB	4,169	0
219	OFFICE DEPOT-PRINTER	5/12/03	719		X		360	7 MQ200DB	707	12
220	HP SHOPPING COM-SCANNER	5/12/03	328		X		164	5 MQ200DB	328	0
221	COMP USA-PRINT SERVER	5/12/03	257		X		129	5 MQ200DB	257	0
222	DELL MARKETING-DESKTOP/EQUIPM	5/12/03	1,286		X		643	5 MQ200DB	1,286	0
223	DELL MARKETING-PROJECTOR	8/18/03	1,327		X		664	5 MQ200DB	1,327	0
224	DELL MARKETING-LAPTOP	8/18/03	1,609		X		805	5 MQ200DB	1,609	0
225	OFFICE DEPOT-ADOBE PAGE MAKER	9/05/03	546		X		273	5 MQ200DB	546	0
226	TELEPHONE EQUIPMENT	12/31/03	24,432		X		12,216	7 MQ200DB	23,499	933
228	ATHLON XP2100 MINI TOWER SERVEI	2/23/04	1,684		X		842	5 MQ200DB	1,684	0
229	POLYCON CONF PHONE (KH)	10/26/04	1,537		X		768	7 MQ200DB	1,411	67
230	SONY COMPUTER	9/07/05	2,736				2,736	5 MQ200DB	2,543	193
232	DELL MARKETING (KH)	12/12/05	3,603				3,603	5 MQ200DB	3,258	345
233	3 PAOLI BOOKCASES	2/27/06	2,122				2,122	7 HY 200DB	1,459	190
234	COLOR DIGITAL COPIER, CABINET, FI	8/07/06	14,442				14,442	5 HY 200DB	11,947	1,664
235	DELL COMPUTER	9/07/06	1,275				1,275	5 HY 200DB	1,055	147
238	OFFICE FURNITURE	12/07/06	8,705				8,705	7 HY 200DB	5,986	777
239	OPTIPLEX 745 DESKTOP	2/13/07	2,482				2,482	5 HY 200DB	1,767	286
240	VARIOUS FURNITURE & STORAGE FII	2/21/07	9,622				9,622	7 HY 200DB	5,414	1,203
241	GOOGLE MINI 50K	4/20/07	1,995				1,995	5 HY 200DB	1,420	230
242	COMPUTERS-DELL	9/07/07	2,421				2,421	5 HY 200DB	1,724	279
243	VARIOUS OFFICE FURNITURE	9/19/07	5,488				5,488	7 HY 200DB	3,088	686
244	ST TIMOTHY WING CHAIR	9/19/07	3,009				3,009	7 HY 200DB	1,693	376
245	OTIPLEX 745 SMALL FORM FACTOR	10/19/07	1,527				1,527	5 HY 200DB	1,087	176
246	2 OPTIPLEX 745 SMALL FORM FACTO	11/06/07	3,077				3,077	5 HY 200DB	2,190	355
248	AVANE-GARDE COMPUTER UPGRADI	2/11/08	47,039				47,039	5 HY 200DB	24,460	9,032
249	DELL PRECISION M6300 INTEL CORE	2/12/08	2,930				2,930	7 HY 200DB	1,136	513
250	OPTIPLEX 755 MINITOWER, PENTIUM	2/25/08	1,211				1,211	5 HY 200DB	629	233
251	GLOBAL VPN CLIENT SOFTWARE	2/26/08	663				663	5 HY 200DB	345	127
252	ONLINE JOB POSTING	3/20/08	2,599				2,599	5 HY 200DB	1,351	499
253	SOFA TABLE	4/23/08	707				707	7 HY 200DB	274	124
254	WEB HOSTING SET-UP	6/05/08	1,100				1,100	5 HY 200DB	572	211
255	CREDENZA AND ACCESSORIES	6/26/08	4,088				4,088	7 HY 200DB	1,585	715
256	OPTIPLEX 755 MINITOWER, CORE 2 D	9/08/08	2,515				2,515	5 HY 200DB	1,308	483
257	ARI WORK, LAMPS, AND ACCESSORII	9/18/08	1,551				1,551	7 HY 200DB	602	271
258	DELL MARKETING	1/09/09	949				949	5 HY 200DB	190	303
259	APPLIED SYSTEMS SOFTWARE	4/09/09	1,946				1,946	5 HY 200DB	389	623
260	SECRETARY CHAIRS, T/V STAND	1/09/09	1,216				1,216	7 HY 200DB	174	298
261	WALLPAPER-ELEVATOR LOBBY	4/21/09	1,256				1,256	7 HY 200DB	179	308
262	ELECTRONIC SCREEN	5/09/09	348				348	7 HY 200DB	50	85
263	FURNITURE & ACCESSORIES-LOWER	5/22/09	1,715				1,715	7 HY 200DB	245	420
264	PORCELAIN STEEL MARKERBOARDS	6/25/09	381				381	7 HY 200DB	54	94
265	LECTERN	6/25/09	5,288				5,288	7 HY 200DB	755	1,295
266	AUDIO VISUAL EQUIPMENT	8/21/09	2,039				2,039	5 HY 200DB	408	652
267	FRAMING	9/08/09	808				808	7 HY 200DB	115	198
268	MELAMINE TOP FOLDING TABLE & TI	9/08/09	1,192				1,192	7 HY 200DB	170	292
			<u>336,971</u>				<u>317,430</u>			
									<u>271,477</u>	<u>24,695</u>

Other Depreciation:

202	HR SOFTWARE-KNOWLEDGE POINT	2/06/02	204				204	3 HY S/L	204	0
207	NETWORK SOFTWARE-TABIN CORP	5/08/02	557				557	3 HY S/L	557	0
209	OFFICE SOFTWARE-OFFICE XP	8/05/02	3,434				3,434	3 HY S/L	3,434	0
227	INTUIT ENTERPRISE SOLUTIONS SOF	2/18/04	2,711		X		1,355	3 HY S/L	2,711	0
247	DATABASE SOFTWARE SYSTEM	12/03/07	24,476				24,476	3 MOAmort	16,997	7,479
Total Other Depreciation			<u>31,382</u>				<u>30,026</u>			
Total ACRS and Other Depreciation			<u>31,382</u>				<u>30,026</u>			
									<u>23,903</u>	<u>7,479</u>

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
Listed Property:									
199	VAN	12/21/01	24,969			24,969	5 HY 200DB	24,969	0
			<u>24,969</u>			<u>24,969</u>		<u>24,969</u>	<u>0</u>
Grand Totals			409,833			388,936		320,349	33,698
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>409,833</u>			<u>388,936</u>		<u>320,349</u>	<u>33,698</u>

INDEINS INDEPENDENT INSURANCE AGENTS

62-0379523

Federal Asset Report

FYE: 12/31/2010

OFFICE BUILDING-UNRELATED

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Prior MACRS:									
82	Insurors Building	8/04/92	567,153			567,153	31 MMS/L	312,839	18,005
83	Landscaping	10/09/92	1,252			1,252	15 HY S/L	1,252	0
84	IOT/ISI Sign	11/13/92	1,500			1,500	7 HY 200DB	1,500	0
85	Sign Lighting	3/02/93	256			256	7 HY 200DB	256	0
86	Covered Parking Lighting	2/18/93	1,760			1,760	7 HY 200DB	1,760	0
87	Building Improvements	8/01/93	34,497			34,497	39 MMS/L	14,117	884
88	Engineering Fee	2/17/93	200			200	31 MMS/L	93	6
89	Architect Fees	8/01/93	28,243			28,243	39 MMS/L	11,558	724
90	Architect Fees	5/31/94	17,945			17,945	39 MMS/L	7,190	460
91	Building Improvements	5/31/94	439,968			439,968	39 MMS/L	176,279	11,282
92	Landscaping	6/22/94	2,650			2,650	15 HY S/L	2,650	0
93	Stained Glass IOT Sign	7/12/94	3,243			3,243	7 HY 200DB	3,243	0
94	Interior Decorating Fees	9/01/94	16,553			16,553	39 MMS/L	6,490	425
95	Building Improvements	8/31/95	36,967			36,967	39 MMS/L	14,218	948
112	BUILDING IMPROVEMENTS	12/12/96	1,566			1,566	7 HY S/L	1,566	0
129	Wall Covering	3/05/97	1,461			1,461	39 MMS/L	468	38
164	Wall Covering	5/24/99	2,530			2,530	39 MMS/L	681	65
183	INSTALLATION OF NEW ROOF	5/30/00	22,255			22,255	20 HY 150DB	11,965	980
184	INSTALLATION OF NEW ROOF	6/21/00	23,207			23,207	20 HY 150DB	12,476	1,022
185	VISITATION HOSPITAL-PAINT WALLP	9/15/00	5,100			5,100	7 HY 200DB	5,100	0
186	INSURORS BANK-PAINT, WALLPAPER	9/15/00	7,053			7,053	7 HY 200DB	7,053	0
187	MANSARD METAL ROOF	9/15/00	27,025			27,025	20 HY 150DB	14,529	1,190
198	IMPROVEMENTS-TPA ASSOCIATES	12/31/01	7,550			7,550	39 MMS/L	1,557	193
236	FIRST FLOOR IMPROVEMENTS	11/28/06	168,431			168,431	15 HY S/L	39,300	11,229
237	IMPROVEMENTS-CHUCK'S OFFICE	11/30/06	5,191			5,191	15 HY S/L	1,211	346
			<u>1,423,556</u>			<u>1,423,556</u>		<u>649,351</u>	<u>47,797</u>
Other Depreciation:									
81	Land	8/04/92	100,000			100,000	0 -- Land	0	0
213	IRRIGATION SYSTEM	6/11/02	7,258			7,258	15 HY S/L	3,629	484
214	WOOD FENCE	6/11/02	1,335			1,335	15 HY S/L	668	89
215	LANDSCAPING	6/11/02	5,203			5,203	15 HY S/L	2,602	347
217	IMPROVEMENTS-DOOR INSTALLATIC	3/18/03	1,204			1,204	15 HY S/L	522	80
218	BUILDING IMPROVEMENTS-BREAK A	3/31/03	3,997			3,997	15 HY S/L	1,732	266
	Total Other Depreciation		<u>118,997</u>			<u>118,997</u>		<u>9,153</u>	<u>1,266</u>
	Total ACRS and Other Depreciation		<u>118,997</u>			<u>118,997</u>		<u>9,153</u>	<u>1,266</u>
	Grand Totals		<u>1,542,553</u>			<u>1,542,553</u>		<u>658,504</u>	<u>49,063</u>
	Less: Dispositions and Transfers		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	Less: Start-up/Org Expense		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	Net Grand Totals		<u>1,542,553</u>			<u>1,542,553</u>		<u>658,504</u>	<u>49,063</u>

INDEINS INDEPENDENT INSURANCE AGENTS

62-0379523

Bonus Depreciation Report

FYE: 12/31/2010

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
Activity: Form 990, Page 1								
227	INTUIT ENTERPRISE SOLUTIONS SOFT'	2/18/04	2,711		0	0	1,356	1,355
200	COMPUTER, PRINTER, MONITOR-DELL	1/03/02	2,002		0	0	600	1,402
201	DELL 19 IN. MONITOR	2/06/02	405		0	0	121	284
203	COMPUTER-DELL	3/08/02	842		0	0	253	589
204	WALL CABINET-CONFERENCE ROOM	3/11/02	1,175		0	0	352	823
211	PICTURE FRAMES FOR WALL COLLECT	12/31/02	345		0	0	103	242
216	COMPUTERS-3 DESKTOPS/EQUIPMENT	1/15/03	4,169		0	0	1,251	2,918
219	OFFICE DEPOT-PRINTER	5/12/03	719		0	0	359	360
220	HP SHOPPING COM-SCANNER	5/12/03	328		0	0	164	164
221	COMP USA-PRINT SERVER	5/12/03	257		0	0	128	129
222	DELL MARKETING-DESKTOP/EQUIPME	5/12/03	1,286		0	0	643	643
223	DELL MARKETING-PROJECTOR	8/18/03	1,327		0	0	663	664
224	DELL MARKETING-LAPTOP	8/18/03	1,609		0	0	804	805
225	OFFICE DEPOT-ADOBE PAGE MAKER	9/05/03	546		0	0	273	273
226	TELEPHONE EQUIPMENT	12/31/03	24,432		0	0	12,216	12,216
228	ATHLON XP2100 MINI TOWER SERVER	2/23/04	1,684		0	0	842	842
229	POLYCON CONF PHONE (KH)	10/26/04	1,537		0	0	769	768
Form 990, Page 1			45,374		0	0	20,897	24,477
Grand Total			45,374		0	0	20,897	24,477

Taxable Interest on Investments

<u>Description</u>		<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST INCOME		\$ 64,032		14			
TOTAL		<u>\$ 64,032</u>					

Taxable Dividends from Securities

<u>Description</u>		<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
DIVERSIFIED TRUST COMPANY		\$ 14,069		14			
TOTAL		<u>\$ 14,069</u>					

INDEINS INDEPENDENT INSURANCE AGENTS

62-0379523

FYE: 12/31/2010

Federal Statements

Form 990, Part IX, Line 24f - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
INSURANCE	\$ 32,502	\$ 32,502		
POSTAGE	19,473	19,473		
INVESTMENT & MANAGEMENT F	17,499	17,499		
AUTOMOBILE EXPENSE	13,884	13,884		
TELEPHONE	12,741	12,741		
DUES & MEMBERSHIPS	12,070	12,070		
PUBLICATIONS EXPENSE	9,528	9,528		
INCOME TAX EXPENSE	6,707	6,707		
STAFF TRAINING & EDUCATIO	5,984	5,984		
BANK & CREDIT CARD FEES	4,869	4,869		
EXCISE TAX	3,025	3,025		
LICENSING & TAXES	2,795	2,795		
INSURANCE ADMINISTRATION	2,684	2,684		
FRANCHISE TAX	1,025	1,025		
MISCELLANEOUS EXPENSE	918	918		
YAC EVENT	670	670		
PENALTY	307	307		
TOTAL	\$ 146,681	\$ 146,681	\$ 0	\$ 0

Form

4562Department of the Treasury
Internal Revenue Service

(99)

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2010Attachment
Sequence No **67**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return **INDEPENDENT INSURANCE AGENTS
OF TENNESSEE, INC.**Identifying number
62-0379523

Business or activity to which this form relates

INDIRECT DEPRECIATION**Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	7,479

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	24,695
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ☐		

Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		12,459	5.0	MQ	200DB	815
c 7-year property		4,052	7.0	MQ	200DB	709
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

20a Class life				S/L	
b 12-year			12 yrs.	S/L	
c 40-year			40 yrs	MM	S/L

Part IV Summary (See instructions.)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	33,698
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2010)

DAA

THERE ARE NO AMOUNTS FOR PAGE 2

Form **4562**Department of the Treasury
Internal Revenue Service

(99)

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2010Attachment
Sequence No **67**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return **INDEPENDENT INSURANCE AGENTS
OF TENNESSEE, INC.**Identifying number
62-0379523

Business or activity to which this form relates

OFFICE BUILDING-UNRELATED**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	1,266

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	47,797
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ☐		

Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

20a Class life				S/L	
b 12-year			12 yrs	S/L	
c 40-year			40 yrs	MM	S/L

Part IV Summary (See instructions.)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	49,063
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2010)