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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2011

For calendar year 2011, or tax year beginning 01-01-2011 , and ending 12-31-2011

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

Name of foundation
BAPTIST HEALING HOSPITAL TRUST

A Employer identification number
52-2362225

Number and street (or P O box number if mail is not delivered to street address)
1919 CHARLOTTE AVENUE NO 320

Room/suite

B Telephone number (see page 10 of the instructions)
(615) 284-2653

City or town, state, and ZIP code
NASHVILLE, TN 37203

C If exemption application is pending, check here ▶ ☐

D 1. Foreign organizations, check here ▶ ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year *(from Part II, col. (c), line 16)* ▶$ 108,875,266

J Accounting method ☐ Cash ☑ Accrual ☐ Other (specify) _
(Part I, column (d) must be on cash basis.)

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))*

			(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)				
	2	Check ▶ ☑ if the foundation is **not** required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	1,691,379	1,691,379		
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10	1,498,288			
	b	Gross sales price for all assets on line 6a 36,058,475				
	7	Capital gain net income (from Part IV, line 2)		1,498,288		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	4,285	0		
	12	**Total.** Add lines 1 through 11	3,193,952	3,189,667		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	322,482	0		322,482
	14	Other employee salaries and wages	95,651	0		95,651
	15	Pension plans, employee benefits	61,724	0		57,574
	16a	Legal fees (attach schedule)	92,942	0		92,942
	b	Accounting fees (attach schedule)	14,605	7,302		7,303
	c	Other professional fees (attach schedule)	159,975	151,585		8,390
	17	Interest	55,254	0		9,585
	18	Taxes (attach schedule) (see page 14 of the instructions)	68,617	0		23,362
	19	Depreciation (attach schedule) and depletion	4,424	0		
	20	Occupancy	99,669	0		99,669
	21	Travel, conferences, and meetings	15,853	0		15,853
	22	Printing and publications	964	0		964
	23	Other expenses (attach schedule)	154,991	389		157,819
	24	**Total operating and administrative expenses.** Add lines 13 through 23	1,147,151	159,276		891,594
	25	Contributions, gifts, grants paid	3,870,474			3,737,587
	26	**Total expenses and disbursements.** Add lines 24 and 25	5,017,625	159,276		4,629,181
	27	Subtract line 26 from line 12				
	a	**Excess of revenue over expenses and disbursements**	-1,823,673			
	b	**Net investment income** (if negative, enter -0-)		3,030,391		
	c	**Adjusted net income** (if negative, enter -0-)				

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	9,544,189	4,569,924	4,569,924
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ 50,584			
	Less allowance for doubtful accounts ▶	7,739	50,584	50,584
	4 Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	13,010	13,618	13,618
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	116,385,005	104,234,739	104,234,739
	14 Land, buildings, and equipment basis ▶ 166,951			
	Less accumulated depreciation (attach schedule) ▶ 160,550	7,544	6,401	6,401
	15 Other assets (describe ▶)			
	16 **Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	125,957,487	108,875,266	108,875,266
Liabilities	17 Accounts payable and accrued expenses	106,236	54,805	
	18 Grants payable	2,491,192	2,669,270	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)	4,262,998	0	
	23 **Total liabilities** (add lines 17 through 22)	6,860,426	2,724,075	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☑ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted	119,097,061	106,151,191	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 **Total net assets or fund balances** (see page 17 of the instructions)	119,097,061	106,151,191	
	31 **Total liabilities and net assets/fund balances** (see page 17 of the instructions)	125,957,487	108,875,266	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	119,097,061
2	Enter amount from Part I, line 27a	2	-1,823,673
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1, 2, and 3	4	117,273,388
5	Decreases not included in line 2 (itemize) ▶	5	11,122,197
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	106,151,191

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	SALE OF PUBLICLY TRADED SECURITIES	P		
b				
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	36,058,475		34,560,187	1,498,288
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) **or** Losses (from col (h))
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a				1,498,288
b				
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	1,498,288
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☑ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2010	4,482,196	116,657,733	0 038422
2009	3,970,482	106,957,418	0 037122
2008			
2007			
2006			

2	**Total** of line 1, column (d)	2	0 075544
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 037772
4	Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	4	116,979,961
5	Multiply line 4 by line 3	5	4,418,567
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	30,304
7	Add lines 5 and 6	7	4,448,871
8	Enter qualifying distributions from Part XII, line 4	8	4,629,181

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions on page 18

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter _____ (attach copy of letter if necessary–see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☑ and enter 1% of Part I, line 27b	1	30,304
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	0
3	Add lines 1 and 2	3	30,304
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-	5	30,304
6	Credits/Payments		
a	2011 estimated tax payments and 2010 overpayment credited to 2011 — 6a: 45,000		
b	Exempt foreign organizations—tax withheld at source — 6b:		
c	Tax paid with application for extension of time to file (Form 8868) — 6c: 12,750		
d	Backup withholding erroneously withheld — 6d:		
7	Total credits and payments Add lines 6a through 6d	7	57,750
8	Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached	8	
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	27,446
11	Enter the amount of line 10 to be **Credited to 2012 estimated tax** ▶ 27,446 **Refunded** ▶	11	0

Part VII-A Statements Regarding Activities

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?	1b		No
	*If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ 0 **(2)** On foundation managers ▶ $ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.*	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a	Yes	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b	Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col (c), and Part XV*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ▶ TN			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation .*	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV on page 27)? *If "Yes," complete Part XIV*	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		No

Part VII-A Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions).	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ WWW HEALINGHOSPITAL ORG

14 The books are in care of ▶ MATT DEEB Telephone no ▶ (615) 284-2653

Located at ▶ 1919 CHARLOTTE AVE SUITE 320 NASHVILLE TN ZIP+4 ▶ 37203

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —Check here . . . . . ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶ 15

16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?		Yes	No
		16		No

See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country ▶

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☑ No			
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ☐ Yes ☑ No			
b	If any answer is "Yes" to 1a(1)–(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here . . . . . ▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____ , 20____ , 20____ , 20____			
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement—see page 20 of the instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____ , 20____ , 20____ , 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☑ No			
b	If "Yes," did it have excess business holdings in 2011 as a result of **(1)** any purchase by the foundation or disqualified persons after May 26, 1969, **(2)** the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or **(3)** the lapse of the 10-, 15-, or 20-year first phase holding period? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.)*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☑ No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☑ No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☑ No			
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) ☐ Yes ☑ No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☑ No			
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	**5b**		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No			
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☑ No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	**6b**		**No**
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☑ No			
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	**7b**		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).

(a) Name and address	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
JENNIFER OLDHAM 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	PROGRAM OFFICER 40 00	55,814	16,117	0
DAWN THRASHER 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	EXECUTIVE ASSISTANT 40 00	46,848	11,748	0
Total number of other employees paid over $50,000 ▶				0

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE".

(a) Name and address of each person paid more than $50,000	**(b)** Type of service	**(c)** Compensation
NONE		

Total number of others receiving over $50,000 for professional services. . . . . ▶ 0

Part IX-A **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
2	
3	
4	

Part IX-B **Summary of Program-Related Investments** (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See page 24 of the instructions **3**	

Total. Add lines 1 through 3. . . . . ▶ 0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes			
a	Average monthly fair market value of securities		1a	114,155,786
b	Average of monthly cash balances		1b	4,534,993
c	Fair market value of all other assets (see page 24 of the instructions)		1c	70,603
d	**Total** (add lines 1a, b, and c)		1d	118,761,382
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e 0		
2	Acquisition indebtedness applicable to line 1 assets		2	0
3	Subtract line 2 from line 1d		3	118,761,382
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions)		4	1,781,421
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4		5	116,979,961
6	**Minimum investment return.** Enter 5% of line 5		6	5,848,998

Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6			1	5,848,998
2a	Tax on investment income for 2011 from Part VI, line 5	2a	30,304		
b	Income tax for 2011 (This does not include the tax from Part VI)	2b	4,715		
c	Add lines 2a and 2b			2c	35,019
3	Distributable amount before adjustments Subtract line 2c from line 1			3	5,813,979
4	Recoveries of amounts treated as qualifying distributions			4	0
5	Add lines 3 and 4			5	5,813,979
6	Deduction from distributable amount (see page 25 of the instructions)			6	0
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	5,813,979

Part XII Qualifying Distributions (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	4,629,181
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	4,629,181
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	30,304
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	4,598,877

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				2,325,592
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2011				
a From 2006				
b From 2007				
c From 2008				
d From 2009 3,970,482				
e From 2010 3,352,139				
f **Total** of lines 3a through e	7,322,621			
4 Qualifying distributions for 2011 from Part XII, line 4 ▶ $ 4,629,181				
a Applied to 2010, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)		0		
c Treated as distributions out of corpus (Election required—see page 26 of the instructions)	0			
d Applied to 2011 distributable amount				2,325,592
e Remaining amount distributed out of corpus	2,303,589			
5 Excess distributions carryover applied to 2011	0			0
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	9,626,210			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0		
d Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions		0		
e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions			0	
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)	0			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see page 27 of the instructions)	0			
9 **Excess distributions carryover to 2012.** Subtract lines 7 and 8 from line 6a	9,626,210			
10 Analysis of line 9				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009 3,970,482				
d Excess from 2010 3,352,139				
e Excess from 2011 2,303,589				

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling. . . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2011	(b) 2010	(c) 2009	(d) 2008	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had $5,000 or more in assets at any time during the year—see page 27 of the instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed

MS KRISTEN KEELY-DINGER
1919 CHARLOTTE AVE SUITE 320
NASHVILLE,TN 37203
(615) 284-8271

b The form in which applications should be submitted and information and materials they should include

APPLICANTS ARE REQUIRED TO SUBMIT GRANT APPLICATIONS THROUGH THE TRUST'S ONLINE APPLICATION PROCESS WHICH IS ONLY AVAILABLE THROUGH THE TRUST'S WEBSITE WWW BAPTISTHEALINGTRUST ORG THEREFORE, THERE IS NO PAPER APPLICATION FORM THE REQUIRED GRANT APPLICATION COMPONENTS FOR EACH GRANT TYPE ARE LISTED ON THE TRUST'S WEBSITE

c Any submission deadlines

THE TRUST HAS TWO GRANT CYCLES EACH YEAR SPRING AND FALL SEE FOOTNOTES FOR ADDITIONAL INFO

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

APPLICANTS MUST MEET THE FOLLOWING CRIETERIA *ORGANIZATION WITH A 501(C)(3) STATUS *ORGANIZATION IN OPERATION AS A 501(C)(3) AT LEAST ONE YEAR BY THE TIME OF THE FULL PROPOSAL DEADLINE *ORGANIZATION SERVES AT LEAST ONE OF THE FORTY COUNTIES IN MIDDLE TENNESSEE (SEE OUR WEBSITE FOR COUNTY LIST) *ORGANIZATION INCREASES ACCESS TO COMPASSIONATE HEALTH SERVICES FOR THE VULNERABLE

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				3,737,587
b *Approved for future payment*				
Total . . . . . ▶ **3b**				0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	1,691,379	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	1,498,288	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a MISCELLANEOUS REVENUE			01	4,285	
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0		3,193,952	0
13 **Total.** Add line 12, columns (b), (d), and (e)					13 3,193,952

(See worksheet in line 13 instructions on page 28 to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes) (See page 28 of the instructions)

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of			
	(1) Cash	1a(1)		No
	(2) Other assets	1a(2)		No
b	Other transactions			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
	(3) Rental of facilities, equipment, or other assets	1b(3)		No
	(4) Reimbursement arrangements	1b(4)		No
	(5) Loans or loan guarantees	1b(5)		No
	(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here

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 taxpayer or fiduciary) is based on all information of which preparer has any knowledge

****** | 2012-11-15 | ******

Signature of officer or trustee | Date | Title

Paid Preparer's Use Only

Preparer's Signature ▶ BRIANA J MULLENAX	Date	Check if self-employed ▶ ☐	PTIN P00897592
Firm's name ▶ LATTIMORE BLACK MORGAN & CAIN PC			Firm's EIN ▶ 62-1199757
Firm's address ▶ PO BOX 1869 BRENTWOOD, TN 370241869			Phone no (615) 377-4600

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes ☐ No

Additional Data

Software ID:
Software Version:
EIN: 52-2362225
Name: BAPTIST HEALING HOSPITAL TRUST

Form 990PF - Special Condition Description:

Special Condition Description

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
DR H EUGENE COTEY 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	BOARD MEMBER 1 00	0	0	0
LARRY DAVIS 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	BOARD MEMBER 1 00	0	0	0
H DEAN DICKEY 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	BOARD MEMBER 1 00	0	0	0
CHRIS FERRELL 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	VICE CHAIRPERSON 1 00	0	0	0
REV MARY K FRISKICS-WARREN 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	BOARD MEMBER 1 00	0	0	0
ADDIE HAMILTON RN 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	BOARD MEMBER 1 00	0	0	0
JAMES G HOLLEMAN 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	CHAIRPERSON 1 00	0	0	0
SCOTT JENKINS 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	BOARD MEMBER 1 00	0	0	0
RUTH E JOHNSON 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	BOARD MEMBER 1 00	0	0	0
CRAIG REED 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	BOARD MEMBER 1 00	0	0	0
EUGENE REGEN MD 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	BOARD MEMBER 1 00	0	0	0
REV BRETT ROBBE 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	BOARD MEMBER 1 00	0	0	0
JASON ROGERS 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	TREASURER 1 00	0	0	0
MS BILLYE SANDERS 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	BOARD MEMBER 1 00	0	0	0
CATHERINE STALLWORTH MD 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	BOARD MEMBER 1 00	0	0	0
JOHN G THOMPSON JR MD 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	SECRETARY 1 00	0	0	0
CATHY SELF 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	CEO 40 00	128,154	12,935	0
KRISTEN KEELY-DINGER 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	VP OF PROGRAMS & GRANTS 40 00	97,112	13,313	0
MATTHEW DEEB 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	CFO 40 00	97,216	10,472	0
DOROTHY BERRY 1919 CHARLOTTE AVENUE SUITE 320 NASHVILLE,TN 37203	BOARD MEMBER 1 00	0	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ALCOHOL & DRUG COUNCIL OF MIDDLE TENNESSEE1704 CHARLOTTE AVE NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	15,750
AMERICAN DIABETES ASSOCIATION INC220 GREAT CIRCLE ROAD SUITE 134 NASHVILLE,TN 37228	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	300
AMERICAN RED CROSS - NASHVILLE CHAPTER2201 CHARLOTTE AVENUE NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	6,855
APHESIS HOUSE INC1522 COMPTON AVENUE NASHVILLE,TN 372124506	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	7,500
AUTISM SOCIETY OF AMERICA 955 WOODLAND STREET NASHVILLE,TN 37206	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	15,000
BACKFIELD IN MOTION INC920 WOODLAND STREET NASHVILLE,TN 37206	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	35,000
BAPTIST HEALTH CARE FOUNDATION955 WOODLAND STREET NASHVILLE,TN 37206	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	37,500
BELMONT UNIVERSITY1900 BELMONT BOULEVARD NASHVILLE,TN 37212	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	8,300
BETHANY CHRISTIAN SERVICES 220 ATHENS WAY NASHVILLE,TN 37228	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	12,000
BETHLEHEM CENTERS OF NASHVILLE1417 CHARLOTTE AVE NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	34,563
BIG BROTHERS & BIG SISTERS OF MIDDLE TENNESSEE1704 CHARLOTTE AVENUE SUITE 130 NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	45,000
BOY SCOUTS OF AMERICA (MID-TN COUNCIL)3414 HILLSBORO PIKE NASHVILLE,TN 37215	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	100
BOYS AND GIRLS CLUB OF MAURY COUNTY210 WEST 8TH STREET COLUMBIA,TN 38401	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	2,000
BRIDGES OF WILLIAMSON COUNTYPO BOX 1592 FRANKLIN,TN 37065	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	5,000
BRIGHTSTONE INC140 SOUTHEAST PARKWAY COURT FRANKLIN,TN 37064	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	21,466
BROWN CENTER FOR AUTISM 2702 GREYSTONE RD NASHVILLE,TN 37204	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	36,200
BUILDING LIVES FOUNDATION INCPO BOX 210184 NASHVILLE,TN 37221	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	12,000
CAREGIVER RELIEF PROGRAM OF BEDFORD COUNTYPO BOX 584 SHELBYVILLE,TN 37162	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	4,500
CASA OF MAURY COUNTY INC22 PUBLIC SQUARE SUITE 2 COLUMBIA,TN 38401	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	16,700
CASA WORKS INC224 WEST FORT STREET MANCHESTER,TN 37355	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	15,174
CATHOLIC CHARITIES OF TENNESSEE INC10 S 6TH ST NASHVILLE,TN 37206	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	38,142
CENTER FOR NONPROFIT MANAGEMENT37 PEABODY STREET SUITE 201 NASHVILLE,TN 37210	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	59,900
CENTERSTONE COMMUNITY MENTAL HEALTH CENTERS INC 1101 6TH AVENUE NORTH NASHVILLE,TN 37211	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	13,500
CHARIS HEALTH CENTER9695 LEBANON RD SUITE 320 MT JULIET,TN 371225540	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	15,000
CHILD ADVOCACY CENTER FOR THE TWENTYTHIRD JUDICAL DISTRICT INC6 COURT SQUARE PO BOX 468 CHARLOTTE,TN 37036	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	21,250
CHRISTIAN WOMENS JOB CORPS OF MIDDLE TENNESSEEPO BOX 22388 NASHVILLE,TN 37202	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	26,000
CI SERVICESPO BOX 281858 NASHVILLE,TN 372281301	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	55,643
CLARKSVILLE ACADEMY710 NORTH SECOND STREET CLARKSVILLE,TN 37040	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	2,000
COFFEE COUNTY CHILDRENS ADVOCACY CENTER104 N SPRING STREET MANCHESTER,TN 37355	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	5,000
COLUMBIA CARES INC1202 SOUTH JAMES CAMPBELL BLVD SUITE 8-B COLUMBIA,TN 38401	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	8,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
COMMUNITY CLINIC OF SHELBYVILLE AND BEDFORD COUNTY INC200 DOVER ST SUITE 203 SHELBYVILLE,TN 37160	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	10,300
COMMUNITY FOUNDATION OF MIDDLE TENNESSEE3833 CLEGHORN AVE NASHVILLE,TN 372152519	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	5,000
CONEXIAN AMERICAS800 18TH AVENUE SOUTH SUITE A NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	2,000
COURT APPOINTED SPECIAL ADVOCATES601 WOODLAND STREET NASHVILLE,TN 37206	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	31,250
CUMBERLAND CRISIS PREGNANCY SUPPORT CENTERPO BOX 1037 HENDERSONVILLE,TN 37077	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	41,309
CUMBERLAND HEIGHTS FOUNDATION INCPO BOX 90727 NASHVILLE,TN 37209	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	30,000
DISCIPLES FOUNDAITON INC 1917 ADELICIA AVENUE NASHVILLE,TN 37212	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	3,000
DISCOVERY PLACE INC1635 SPENCER MILL ROAD BURNS,TN 37029	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	26,342
DISMAS INC1513 16TH AVE S NASHVILLE,TN 37212	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	250
DOMESTIC VIOLENCE PROGRAM PO BOX 2652 826 MEMORIAL BLVD SUITE 205 MURFREESBORO,TN 37133	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	25,000
ELDERS FIRST ADULT DAY SERVICES ASSOCIATIONPO BOX 332966 MURFREESBORO,TN 37133	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	6,000
EVERGREEN PRESBYTERIAN MINISTRIES INC6050 DANA WAY SUITE 200 ANTIOCH,TN 37013	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	17,500
EXCHANGE CLUB FAMILY CENTER INC139 THOMPSON LANE NASHVILLE,TN 37211	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	30,000
EXCHANGE CLUB HOLLAND J STEPHENS CTR PREVENTION OF CHILD ABUSE616 B N CHURCH ST LIVINGSTON,TN 38570	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	31,208
FAITH FAMILY MEDICAL CLINIC 326 21ST AVENUE NORTH NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	80,717
FAMILY AND CHILDRENS SERVICE 201 23RD AVENUE NORTH NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	27,852
FENTRESS COUNTY CHILDRENS CENTER INC340 WEST CENTRAL AVENUE JAMESTOWN,TN 38556	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	20,814
FIRST STEPS INC1900 GRAYBAR LANE NASHVILLE,TN 37215	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	20,000
FISK UNIVERSITY1000 17TH AVENUE NORTH NASHVILLE,TN 372083051	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	1,000
FRIENDS IN GENERAL INC1818 ALBION STREET NASHVILLE,TN 37208	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	18,000
FRIENDS LIFE4414 GRANNY WHITE PIKE NASHVILLE,TN 37204	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	450
GALLATIN CARES330 NORTH DURHAM AVE GALLATIN,TN 37066	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	6,500
HANDS ON NASHVILLE209 10TH AVENUE SOUTH NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	3,500
HAVEN OF HOPE INCORPORATED PO BOX 1271 MANCHESTER,TN 37349	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	10,973
HEARING BRIDGES415 4TH AVENUE SOUTH SUITE A NASHVILLE,TN 37201	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	30,153
HOPE CLINIC FOR WOMEN1810 HAYES STREET NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	32,200
HOPE FAMILY HEALTH SERVICES 12124 NEW HIGHWAY 52 WEST SUITE 5 WESTMORELAND,TN 37186	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	49,100
INTERFAITH DENTAL CLINIC OF NASHVILLE1721 PATTERSON STREET NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	65,000
JUSTICE FOR OUR NEIGHBORS 2007 ACKLEN AVENUE NASHVILLE,TN 37212	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	1,000
KIPP EAST NASHVILLE PREPARATORY123 DOUGLAS AVENUE NASHVILLE,TN 37207	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	50,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
LEAD PUBLIC SCHOOLS INC1814 HAYES STREET NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	25,000
LEGAL AID SOCIETY OF MIDDLE TENNESSEE AND THE CUMBERLANDS300 DEADERICK STREET NASHVILLE,TN 37201	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	40,200
LIPSCOMB UNIVERSITYONE UNIVERSITY PARK DRIVE NASHVILLE,TN 37204	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	39,333
MACON HELPS111 MAIN STREET LAFAYETTE,TN 370831225	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	1,000
MAGDALENE INCBOX 6330 B NASHVILLE,TN 37212	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	35,000
MANNA INC415 4TH AVENUE SOUTH UNIT B NASHVILLE,TN 37201	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	61,586
MARTHA OBRYAN CENTER INC711 SOUTH SEVENTH STREET NASHVILLE,TN 372063895	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	82,540
MARY PARRISH CENTER FOR VICTIMS OF DOMESTIC AND SEXUAL VIOLENCEPO BOX 60009 NASHVILLE,TN 37206	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	31,000
MATTHEW WALKER COMPREHENSIVE HEALTH CENTER INC1035 14TH AVENUE NORTH NASHVILLE,TN 37208	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	18,750
MAURY COUNTY CENTER AGAINST DOMESTIC VIOLENCEPO BOX 1961 COLUMBIA,TN 38402	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	30,136
MCMINNVILLE - WARREN COUNTY SENIOR CENTER809 MORRISON STREET MCMINNVILLE,TN 37110	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	4,850
MDHA HOUSING TRUST CORPORATION701 SOUTH SIXTH STREET NASHVILLE,TN 37206	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	24,270
MEHARRY MEDICAL COLLEGE1005 DR DB TODD JR BLVD NASHVILLE,TN 37027	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	19,912
MEN OF VALOR1420 DONELSON PIKE SUITE B-6 NASHVILLE,TN 37217	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	50,000
MENDING HEARTS INCPO BOX 280236 NASHVILLE,TN 37228	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	15,000
MENTAL HEALTH CENTERS & CLINICS OF TENNESSEE801 12TH AVENUE SOUTH NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	38,647
MENTAL HEALTH COOPERATIVE INC275 CUMBERLAND BEND NASHVILLE,TN 37228	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	53,500
MERCY HEALTH SERVICES INC 1113 MURFREESBORO ROAD SUITE 319 FRANKLIN,TN 37064	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	55,000
METROPOLITAN INTERDENOMINATIONAL CHURCH PO BOX 280779 NASHVILLE,TN 37228	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	3,000
MONROE HARDING INC1120 GLENDALE LANE NASHVILLE,TN 37204	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	26,000
NAMI TENNESSEE1101 KERMIT DRIVE SUITE 605 NASHVILLE,TN 37217	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	2,500
NASHVILLE C A R E S INC633 THOMPSON LANE NASHVILLE,TN 37204	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	18,910
NASHVILLE CHILDRENS ALLIANCE INC1264 FOSTER AVENUE NASHVILLE,TN 37210	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	31,750
NASHVILLE DRUG COURT FOUNDATION INC1300 DIVISION STREET SUITE 107 NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	37,575
NASHVILLE PUBLIC TELEVISION INC161 RAINS AVENUE NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	45,000
NASHVILLE RESCUE MISSION639 LAFAYETTE STREET NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	3,000
NASHVILLE SAFE HAVEN FAMILY SHELTER1234 3RD AVENUE SOUTH NASHVILLE,TN 37210	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	40,000
NASHVILLE YOUNG WOMENS CHRISTIAN ASSOCIATION1608 WOODMONT BOULEVARD NASHVILLE,TN 372151524	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	40,000
NATIONAL SOCIETY TO PREVENT BLINDNESS95 WHITE BRIDGE ROAD SUITE 312 NASHVILLE,TN 37205	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	15,989
NURSES FOR NEWBORNS FOUNDATION50 VANTAGE WAY SUITE 101 NASHVILLE,TN 37228	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	16,380

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
OASIS CENTER INC1704 CHARLOTTE AVE SUITE 200 NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	35,000
OPERATION STAND DOWN NASHVILLE INC1125 12TH AVENUE SOUTH NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	100
OUR KIDS INC1804 HAYES STREET NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	40,700
PARTNERS FOR HEALING109 WEST BLACKWELL ST TULLAHOMA,TN 37388	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	19,826
PASTORAL COUNSELING AND CONSULTATION CENTERS OF TENNESSEE100 VINE COURT NASHVILLE,TN 37205	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	22,485
PEACE UNLIMITED IN RECOVERY INCPO BOX 17976 NASHVILLE,TN 37217	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	2,655
PENCIL FOUNDATION421 GREAT CIRCLE RD SUITE 100 NASHVILLE,TN 37228	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	3,500
PRESTON TAYLOR MINISTRIESPO BOX 90442 NASHVILLE,TN 37209	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	2,560
PREVENT CHILD ABUSE TENNESSEE4721 TROUSDALE DRIVE SUITE 121 NASHVILLE,TN 37220	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	41,400
PROHEALTH RURAL HEALTH SERVICES INCPO BOX 682589 FRANKLIN,TN 370682589	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	25,000
PROJECT RETURN INC1200 DIVISION STREET SUITE 200 NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	21,963
REFUGE CENTER FOR COUNSELING INC103 FORREST CROSSINGS BLVD SUITE 102 FRANKLIN,TN 37064	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	27,111
RENEWAL HOUSE INC3410 CLARKSVILLE PIKE NASHVILLE,TN 37218	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	37,000
ROCKETOWN OF MIDDLE TENNESSEE601 FOURTH AVENUE SOUTH NASHVILLE,TN 37210	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	21,520
RONALD MCDONALD HOUSE NASHVILLE2144 FAIRFAX AVENUE NASHVILLE,TN 37212	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	5,821
ROXY PRODUCTIONS INC100 FRANKLIN STREET CLARKSVILLE,TN 37040	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	1,000
RUTHERFORD COUNTY PRIMARY CARE1453 A HOPE WAY MURFREESBORO,TN 37129	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	43,003
SAINT THOMAS HEALTH SERVICES FUND4220 HARDING ROAD NASHVILLE,TN 37205	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	113,250
SALVUS CLINIC INC556 HARTSVILLE PIKE SUITE 200 GALLATIN,TN 37066	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	40,188
SECOND HARVEST FOOD BANK OF MIDDLE TENNESSEE INC331 GREAT CIRCLE ROAD NASHVILLE,TN 37228	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	4,600
SENIOR CITIZENS INC174 RAINS AVENUE NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	42,500
SETON CORPORATION2000 CHURCH STREET NASHVILLE,TN 37236	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	34,000
SEXUAL ASSAULT CENTER101 FRENCH LANDING DRIVE NASHVILLE,TN 37228	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	41,500
SILOAM FAMILY HEALTH CENTER 820 GALE LANE NASHVILLE,TN 37204	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	61,000
SOUTHEASTERN COUNCIL OF FOUNDATIONS50 HURT PLAZA SUITE 350 ATLANTA,GA 30303	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	6,000
SPECIAL KIDS INC202 ARNETTE STREET MURFREESBORO,TN 37130	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	27,250
SPORTS4ALL FOUNDATION5827 CHARLOTTE PIKE NASHVILLE,TN 37209	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	30,000
STARS NASHVILLE1704 CHARLOTTE AVENUE NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	48,185
TABERNACLE CHRISTIAN SCHOOL301 MARKET STREET CLARKSVILLE,TN 37042	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	2,000
TENNESSEE BAPTIST ADULT HOMES INC5001 MARYLAND WAY PO BOX 728 BRENTWOOD,TN 370240728	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	21,780

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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a *Paid during the year*				
TENNESSEE CONFERENCE ON SOCIAL WELFAREPO BOX 291231 NASHVILLE,TN 37229	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	1,500
TENNESSEE EMERGENCY MEDICAL SERVICES FOR CHILDREN FOUNDATION2007 TERRACE PLACE NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	13,696
TENNESSEE HEALTH CARE CAMPAIGN INC1103 CHAPEL AVE NASHVILLE,TN 37206	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	29,416
TENNESSEE IMMIGRANT AND REFUGEE RIGHTS COALITION446 METROPLEX DRIVE NASHVILLE,TN 37211	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	1,000
TENNESSEE JUSTICE CENTER INC 301 CHARLOTTE AVE NASHVILLE,TN 37201	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	32,976
TENNESSEE KIDNEY FOUNDATION INC95 WHITE BRIDGE ROAD SUITE 300 NASHVILLE,TN 37205	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	20,000
TENNESSEE RESPITE COALITION 19 MUSIC SQUARE WEST SUITE J NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	27,442
THE CAMPUS FOR HUMAN DEVELOPMENT705 DREXEL STREET NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	50,000
THE KEY ALLIANCEPO BOX 23168 NASHVILLE,TN 37202	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	1,000
THE NEXT DOORP O BOX 23336 NASHVILLE,TN 37202	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	39,500
THE SHEPHERDS CALLPO BOX 1835 SPRING HILL,TN 37174	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	1,000
UNITED NEIGHBORHOOD HEALTH SERVICES INC711 MAIN STREET NASHVILLE,TN 37206	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	79,533
UNITED WAY OF MIDDLE TENNESSEE INC250 VENTURE CIRCLE NASHVILLE,TN 37228	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	31,487
UPPER CUMBERLAND CHILD ADVOCACY CENTER INC480 SOUTH OLD KENTUCKY ROAD COOKEVILLE,TN 38501	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	13,725
UPPER CUMBERLAND HUMAN RESOURCE AGENCY580 SOUTH JEFFERSON AVENUE COOKEVILLE,TN 38501	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	10,200
URBAN HOUSING SOLUTIONS INC 822 WOODLAND STREET NASHVILLE,TN 37206	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	44,000
VANDERBILT UNIVERSITY2525 WEST END AVE SUITE 400 NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	289,827
WAVES INC145 SOUTHEAST PARKWAY SUITE 100 FRANKLIN,TN 37064	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	5,550
WELCOME HOME MINISTRIESP O BOX 100183 NASHVILLE,TN 37224	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	13,749
WILLIAMSON COUNTY CASA INC 101 FORREST CROSSING BLVD SUITE 108A FRANKLIN,TN 37064	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	20,000
YOUNG MENS CHRISTIAN ASSOCIATION OF NASHVILLE AND MIDDLE TENNESSEE1000 CHURCH STREET NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	26,250
YOUTH SPEAKS NASHVILLE INC 1704 CHARLOTTE AVE SUITE 200 NASHVILLE,TN 37203	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	250
YOUTH VILLAGES INC3310 PERIMETER HILL DRIVE NASHVILLE,TN 37211	NONE	501(C)(3)	TO EXPAND ACCESS TO COMPASSIONATE HEALTHCARE FOR VULNERABLE POPULATIONS	5,000
Total . . . . . ▶ **3a**				3,737,587

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TY 2011 Accounting Fees Schedule

Name: BAPTIST HEALING HOSPITAL TRUST

EIN: 52-2362225

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	14,605	7,302		7,303

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TY 2011 General Explanation Attachment

Name: BAPTIST HEALING HOSPITAL TRUST

EIN: 52-2362225

Identifier	Return Reference	Explanation
		FORM 990-PF, PART XV, LINE 2C - SUBMISSION DEADLINES THERE ARE TWO DEADLINES FOR EACH GRANT CYCLE (PRELIMINARY PROPOSAL AND FULL PROPOSAL) AND THE DATES VARY BY YEAR FORTHE SPRING GRANT CYCLE THE PRELIMINARY APPLICATION DEADLINEIS TYPICALLY IN EARLY FEBRUARY AND THE FULL PROPOSALDEADLINE IS TYPICALLY EARLY MARCH FOR THE FALL GRANT CYCLETHE PRELIMINARY APPLICATION DEADLINE IS TYPICALLY IN LATEJULY OR EARLY AUGUST AND THE FULL PROPOSAL DEADLINE ISTYPICALLY LATE AUGUST OR EARLY SEPTEMBER THE TRUST HAS AGRANT CATEGORY CALLED CRITICAL NEEDS WHICH ARE ACCEPTED ON AROLLING BASIS CRITICAL NEEDS GRANT REQUESTS ARE TIMESENSITIVE IN NATURE AND TYPICALLY REQUIRE A RAPID FUNDINGDECISION AND THEREFORE THERE ARE NO DEADLINES FOR THESEGRANTS CRITICAL NEEDS GRANT APPLICANTS MUST COMPLETE ANAPPLICATION WHICH CAN ALSO BE FOUND ON THE TRUST WEBSITE.
		FORM 990-PF, PART XI, LINE 6 & PART XIII, LINE 1(D) ON JANUARY 1, 2009, THE TRUST CONVERTED TO A PRIVATEFOUNDATION ITS START-UP PERIOD FOR MAKING"QUALIFYING DISTRIBUTIONS" PURSUANT TO CODE SECTION 4942BEGAN JANUARY 1, 2010 THE START-UP PERIOD WILL EXTEND FROMJANUARY 1, 2010 THROUGH DECEMBER 31, 2013, IN ACCORDANCEWITH THE PROVISIONS OF TREAS REG SECTION 53 4942(A)-3(B)(4) IN 2014 AND FOR ALL SUBSQUENT YEARS THEREAFTER,THE TRUST WILL MAKE THE FULL, REQUIRED QUALIFYINGDISTRIBUTIONS ON AN ANNUAL BASIS START-UP PERIOD MINIMUM AMOUNTS ARE AS FOLLOWS 12/31/2010 - TWENTY PERCENT OF DISTRIBUTABLE AMOUNT12/31/2011 - FORTY PERCENT OF DISTRIBUTABLE AMOUNT12/31/2012 - SIXTY PERCENT OF DISTRIBUTABLE AMOUNT12/31/2013 - EIGHTY PERCENT OF DISTRIBUTABLE AMOUNTFORM 990-PF, PART XI, LINE 7 5,813,979FORM 990-PF, PART XIII, LINE 1, COLUMN (D) 2,325,592(PART XI, LINE 7 MULTIPLIED BY 40%)

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TY 2011 Investments - Other Schedule

Name: BAPTIST HEALING HOSPITAL TRUST

EIN: 52-2362225

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
CERTIFICATES OF DEPOSIT	FMV	0	0
HEDGE FUNDS	FMV	20,233,840	20,233,840
MUTUAL FUNDS	FMV	70,700,485	70,700,485
PRIVATE CAPITAL / PARTNERSHIPS	FMV	13,300,414	13,300,414

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TY 2011 Legal Fees Schedule

Name: BAPTIST HEALING HOSPITAL TRUST

EIN: 52-2362225

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	92,942	0		92,942

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TY 2011 Other Decreases Schedule

Name: BAPTIST HEALING HOSPITAL TRUST

EIN: 52-2362225

Description	Amount
UNREALIZED GAIN ON INVESTMENTS	11,122,197

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TY 2011 Other Expenses Schedule

Name: BAPTIST HEALING HOSPITAL TRUST

EIN: 52-2362225

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSE	25,001	0		28,826
INSURANCE	3,493	0		2,885
GIFTS & AWARDS	2,524	0		2,524
DUES & SUBSCRIPTIONS	9,191	0		9,191
CONTRACT SERVICE	12,899	0		12,899
MISCELLANEOUS	7,982	0		7,982
EVENTS & SEMINARS	6,585	0		6,585
CONSULTING FEES	20,767	0		20,767
TECHNOLOGY SUPPORT SERVICES	10,273	0		10,273
POSTAGE	1,834	0		1,834
BANK FEES	389	389		0
SALUTE TO EXCELLENCE AWARDS	54,053	0		54,053

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TY 2011 Other Income Schedule

Name: BAPTIST HEALING HOSPITAL TRUST

EIN: 52-2362225

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MISCELLANEOUS REVENUE	4,285		4,285

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TY 2011 Other Liabilities Schedule

Name: BAPTIST HEALING HOSPITAL TRUST

EIN: 52-2362225

Description	Beginning of Year - Book Value	End of Year - Book Value
BWPH EQUIPMENT LEASE	148,045	0
BWPH PROPERTY LIABILITY	1,569,482	0
BWPH BRIDGE LIABILITY	2,092,645	0
BWPH CURRENT PORTION	452,826	0

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TY 2011 Other Professional Fees Schedule

Name: BAPTIST HEALING HOSPITAL TRUST

EIN: 52-2362225

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	151,585	151,585		0
PROFESSIONAL FEES	8,390	0		8,390

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TY 2011 Taxes Schedule

Name: BAPTIST HEALING HOSPITAL TRUST

EIN: 52-2362225

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	31,043	0		23,362
OTHER TAXES	37,574	0		0