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Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form ► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

<b>B</b> Ch	eck ıf a	applicable	endar year, or tax year beginn C Name of organization NASHVILLE CONVENTION & VISIT		g 06-30-2014		mployer ider	ntification number
	dress c me cha	_	Doing Business As			0:	2-0700616	5
	tial retu	_						
_	rminate		Number and street (or P O box i 150 4th Avenue North G-250	f mail is not delivered to street address) Ro	oom/suite	E Te	lephone num	ber
		return	City or town, state or province, country, and ZIP or foreign postal code				15)259-4	708
		n pending	Nashville, TN 37219	ountry, and zir or foreign postar code				
Ар	piicatio	ii penung			<u> </u>		oss receipts \$	
			<b>F</b> Name and address of p Christopher Spyridon	officipal officer	H(a)	Is this a g subordinat		for
			150 4th Ave N Ste G250					
			Nashville,TN 37219		H(b)	Are all sub included?	ordinates	Γ Y es Γ N o
<b>T</b> Ta	ıx-exer	npt status	□ 501(c)(3)	◀ (insert no )			tach a list	(see instructions)
	ebsit	e:► ww	w visitmusiccity com		H(c)	_	mption nur	
V Car		raa n. <del></del>	Corporation Trust Associa	tion C Other b	<del></del>			
	m or or I <b>rt I</b>	_	imary	ation   Other	LY	ear of formatio	n 2003   M	State of legal domicile TN
ГŒ			<del>-</del>	sion or most significant activities				
Governance		ındustry	to Nashville, TN, which is the	on & Visitors Bureau is to maximize city's second largest industry This y each year It's health is critical to	s industry pr	ovides jobs 1		
50% S	2	Check tl	his box দ if the organization	discontinued its operations or dispo	osed of more	than 25% c	fits net as	sets
Activities &	3	Number	of voting members of the gove	erning body (Part VI, line 1a)			з	19
ě				rs of the governing body (Part VI, lir			4	18
<u> </u>				in calendar year 2013 (Part V, line			5	196
đ,	6	Total nu	mber of volunteers (estimate i	fnecessary)			6	50
	7a	Total un	related business revenue from	Part VIII, column (C), line 12 .			7a	65,827
	b	Net unre	elated business taxable incom	e from Form 990-T, line 34			7b	0
						Prior Yea	r	Current Year
a.	8 Contri		ibutions and grants (Part VIII	, line 1 h)		1,0	10,497	596,347
i i	9		am service revenue (Part VIII		20,5	1,112	21,810,031	
Revenue	10				(A), lines 3, 4, and 7d)			
_	11			A), lines 5, 6d, 8c, 9c, 10c, and 11e		34,783	5,270	
	12			11 (must equal Part VIII, column (A		21,5	19,840	22,413,143
	13			art IX, column (A), lines 1-3) .		1,9	71,000	2,234,000
	14	Benef	its paid to or for members (Par	t IX, column (A), line 4)	🗀		0	0
ιħ	15			oyee benefits (Part IX, column (A), l	ines		27.507	7 270 607
Expenses	16-	5-10		V column (A) line 11c)		0,0	27,587	7,279,607
क	16a			X, column (A), line 11e)	• • —			0
Δ	b		indraising expenses (Part IX, column		_	1 2 0	14,196	12666 202
	17 18			), lines 11a-11d, 11f-24e) nust equal Part IX, column (A), line			12,783	12,666,392
	19			ne 18 from line 12			07,057	233,144
<u>ኞ</u>						ginning of C		End of Year
Not Assets or Fund Balances						Year		
A.S. B.a.	20						14,541	6,714,708
<u> </u>	21						91,594	4,858,617
	22 11 1		nature Block	ct line 21 from line 20		1,6	22,947	1,856,091
Unde my k	r pen nowle arer h	alties of dge and as any k		examined this return, including acco			d on all info	
			e or print name and title					
		F	Print/Type preparer's name	Preparer's signature	Date	Check		
Paid	d	-	Firm's name			self-emplo		
	pare		<b>F</b>					
Hes	·Λn	اليران	Fırm's address 🟲			Phone no		

May the IRS discuss this return with the preparer shown above? (see instructions)  $\,$  .

┌ Yes ┌ No

# Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{*}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I$	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
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? <i>If "Yes," complete Schedule C, Part III</i>	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
L <b>O</b>	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
1	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
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	11b		No
	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	11c		No
	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	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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	11f		No
.2a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
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 and XII is optional	12b	Yes	
<b>.</b> 3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		No
.4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
<b>.5</b>	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
.6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
<b>.7</b>	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 $11e^{2}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
.8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
.9	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	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
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 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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 $I$	25a		
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	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III </i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	

	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		 Yes	. J No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   180		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
3	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			
	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	Yes	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
1	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		N
	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	טכ		
	11 163, to line 3a of 3b, the the organization life Form 6000-1"	5c		
1	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
	Organizations that may receive deductible contributions under section 170(c).			
	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	<del>- ^</del>		
ı	The rest, indicate the number of Forms 8282 med during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> 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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
1	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
	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			
	Enter the amount of reserves on hand	[		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 7.20 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
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?	2		Νo
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? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	<i>ye Cod</i>	e.) <b>No</b>
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?  The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No No

- 17 List the States with which a copy of this Form 990 is required to be filed►TN
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►Nashville Convention Visitors Bureau 150 4th Ave North G-250
  Nashville,TN 37219 (615) 259-4708

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

Check if Schedule O contains a response or note to any line in this Part VII  $\,\cdot\,\,$  .  $\,\cdot\,\,$ 

#### 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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter-0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h an	check (, unles n office rustee)	ss !r	from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) Ed Hardy	5	x						0	0	0
Chairman	0							0	Ŭ	O .
(2) Ken Levitan	5	x						0	0	0
Chair Elect	0									
(3) Bob Patterson	1	х						0	0	0
Past Chairman	0	L^_		<u></u>	L					
(4) Ronnie Smith	1	×						0	0	0
Board Member	0	^						U	U	U
(5) Peter Weien	1							0	0	0
Board Member	0	X						0	0	0
(6) John Fleming	1	Ü								_
Board Member	0	×						0	0	0
(7) Pam Wright	1	Ţ,,						_		_
Board Member	0	X						0	0	0
(8) Mike Dungan	1	,,						_	_	_
Board Member	0	X						0	0	0
(9) Beth Fortune	1	,						_	_	_
Board Member	0	X						0	0	0
(10) Beth Courtney	1									
Board Member	0	X						0	0	0
(11) Henry Hicks	1						$\exists$			
Board Member	0	X						0	0	0
(12) Jason Sheer	1									
Board Member	0	X						0	0	0
(13) Rick Schwartz	1					$\vdash$				
Board Member	0	X						0	0	0
(14) Kevin Lavender	1					$\vdash$	$\exists$			
Board Member	0	X						0	0	0
(15) Don MacLachlan	1									
Board Member	0	X						0	0	0
(16) Steven Andre	1									
Board Member	0	Х						0	0	0
(17) Deb MdDermott	1	-				<del>   </del>	$\dashv$			
Board Member	0	х						0	0	0
Locald mellibel	U									Form <b>990</b> (2013)

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

	organizations below dotted line)	Individual trustee or director	a Institutional		or/tr	unifice unfice (, of user Highest compensated	er	compensation from the organization (W- 2/1099- MISC)	compensation from related organizations (W- 2/1099- MISC)	amount of compen from organiz and re organiz	sation the zation lated
		rustee	d Trustee		,00	mpensated					
(18) Waverly Crenshaw	1	] <sub>x</sub>						C	0		0
Board Member	0	, ,							,		
(19) Patrick Franzone	1	x						C	0		0
Board Member	0										
(20) Christopher Spyridon	60	x		х				543,150	0		47,180
President/CEO	0	^						545,130			47,180
(21) Jeff Mefford	50			х				163,985	0		23,332
CF0	0			_^				103,303			23,332
(22) Kay W Wallen	50				Х			240,929	0		22,505
Chief Sales Officer	0				^			240,923			22,303
(23) Deana Ivey	50				х			237,713	0		26,874
Chief Marketing Officer	0				_^			237,713	Ů		20,074
(24) Stephanie Spallino	50					×		148,296	0		18,718
Vice President	0							110,230	, and the second		10,710
(25) William Wright	50					x		137,462	0		19,440
Vice President	0							137,402	, and the second		15,110
(26) Mary Arnold	50					×		129,457	0		23,802
Sr Vice President	0							125,437	Ů		23,002
(27) Brenda Dempsey	50					x		126,224	0		14,215
Regional Sales Director	0							120,224	Ů		14,213
(28) Charles Creasy	50					×		123,903	0		17,751
Vice President	0										
1b Sub-Total						<b>F</b>					
c Total from continuation sheets to Pa	rt VII, Section A					▶□					
d Total (add lines 1b and 1c)						▶□		1,851,119	0		213,817
Total number of individuals (including \$100,000 of reportable compensation				ed al	ove	e) who	rec	eived more than			

	_		res	NO
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
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	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			
5	services rendered to the organization? If "Yes," complete Schedule J for such person	_		
	services rendered to the organization? 17 Yes, complete schedule 5 for such person	5		Νo

#### **Section B. Independent Contractors**

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
VML Inc 250 Richards Road Kansas City MO 64116	Video production	463,830
JRNEWO Inc 818 19th Ave South Nashville TN 37203	Entertainment fee	150,000
Lofthouse Enterprises Woodlands Park StreetHitchenHertsUKSG4 9AH	Tourism Marketing	124,093

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►3

		Check if Schedi	ule O contains a respor	nse or note to any lir	<u>ne in this Part VIII</u>			<u>l _</u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
0	1a	Federated cam	paigns 1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership du	ies <b>1b</b>	0				
3ra 100								
S, (	С	_						
ᄩᆲ	d	Related organiz	zations 1d					
s, i≣i	e	Government grant	s (contributions) <b>1e</b>	596,347				
ë S	f		ons, gifts, grants, and <b>1f</b>	0				
tributio Other		sımılar amounts no						
真豆	g	1a-1f \$	ons included in lines	0				
Com	h	Total. Add lines	s 1a-1f	🛌	596,347			
				Business Code				
E	2a	Government mark	etina services	541900	19,121,245	19,121,245	0	
e.	ь	Membership dues	etting services	541900	805,415	805,415	0	0
E		<del></del>	narticination		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		0
Š	C	Marketing program		541900	278,330	278,330	0	0
) S	d	Visitor services rev		561500	1,537,527	1,537,527	0	0
Program Service Revenue	e	Publication/Online		541800	67,514	0	67,514	0
50	f	All other progra	am service revenue		0	0	0	0
₹	g	Total. Add lines	s 2a-2f		21,810,031			
	3		ome (including dividen		1,495	0	0	1,495
	_		ar amounts)	F	1,493	0	0	1,493
	4		stment of tax-exempt bond	proceeds	6,254	6,254	0	0
	5	Royalties	(ı) Real	(II) Personal	0,231	0,231		-
	6a	Gross rents	(I) Keal	(II) Personal				
	b	Less rental						
	_	expenses Rental income	0	0				
	С	or (loss)	-					
	d	Net rental inco	me or (loss)	· · · · · · · · · · · · · · · · · · ·				
	_	C	(ı) Securities	(II) O ther				
	7a	Gross amount from sales of						
		assets other than inventory						
	b	Less cost or other basis and						
		sales expenses						
	C	Gain or (loss)	0	0				
	d		ss)					
ψ l	8a	events (not inc	rom fundraising luding					
Other Revenue		\$	0					
9 A		of contributions See Part IV, lin	s reported on line 1c)					
œ		See Parciv, III	a					
프	b	Less direct ex	penses <b>b</b>					
ة	c		· (loss) from fundraising	events 🛌				
	9a	Gross income f	rom gaming activities					
		See Part IV, lin	ne 19					
			a					
			penses <b>b</b> (loss) from gamıng actı	Lutino t				
			ı	vicies				
	104	Gross sales of returns and allo						
			а	213,649				
	b	Less cost of g	oods sold <b>b</b>	215,336				
	С		(loss) from sales of inv		-1,687	0	-1,687	0
		Miscellaneous	s Revenue	Business Code				
	11a	Miscellaneous	receipts	900099	703	703	0	0
	b							
	c							
	d	All other reven	ue		0	0	0	0
	е	Total. Add lines	s 11a-11d	🕨	703			
	12	Total revenue.	See Instructions .	🕨	22 413 143	21 749 474	65 827	1 /195

	,	
Part IX	Statement of Functional Expenses	
Section 50	L(c)(3) and $501(c)(4)$ organizations must complete all columns	All other organizations must complete column (A)

36000	on 501(c)(3) and 501(c)(4) organizations must complete all columns All				
	Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B</b> ) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	2,234,000			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,306,065			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	4,865,861			
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	208,662			
9	Other employee benefits	492,630			
10	Payroll taxes	406,389			
11	Fees for services (non-employees)				
а	Management	36,000			
b	Legal	13,761			
c	Accounting	19,500			
d	Lobbying	123,365			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	84,699			
12	Advertising and promotion	2,489,571			
13	Office expenses	1,021,849			
14	Information technology	192,296			
15	Royalties	0			
16	Occupancy	450,516			
17	Travel	675,418			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	073,418			
19	Conferences, conventions, and meetings	6,109,073			
20	Interest	448			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	209,242			
23	Insurance	15,269			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	15/25			
а	Visitor fulfillment costs	1,097,140			
b	Industry organization dues	57,335			
c	Industry research activities	58,510			
d	Miscellaneous expenses	12,400			
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	22,179,999	0	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

	T X	Check if Schedule O contains a response or note to any line in t	this Part X	<u> </u>	<u> </u>	<u> </u>	· · -
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing		ı	950	1	1,950
	2	Savings and temporary cash investments			1,143,154	2	2,424,715
	3	Pledges and grants receivable, net		0	3	0	
	4	Accounts receivable, net			4,132,812	4	2,969,414
	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees. Complete Paschedule L	art II of		0	5	0
ŧs	6	Loans and other receivables from other disqualified persons (at $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and and sponsoring organizations of section $501(c)(9)$ voluntary errorganizations (see instructions) Complete Part II of Schedule 1	gemployers	0		0	
ssets	7	Notes and loans receivable, net			0	<u> </u>	
ď	8	Inventories for sale or use			35,804	<b>–</b>	92,396
	9	Prepaid expenses and deferred charges			325,153	<del>-</del> -	207,983
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		• 2,475,731	,	9	201,000
	ь	Less accumulated depreciation	10b	1,839,126	698,351	10c	636,605
	11	Investments—publicly traded securities			278,317		381.645
	12	Investments—other securities See Part IV, line 11	0				
	13	Investments—program-related See Part IV, line 11	0		0		
	14	Intangible assets		0		0	
	15	Other assets See Part IV, line 11			0	<u> </u>	0
	16	Total assets. Add lines 1 through 15 (must equal line 34).		6,614,541	<u></u> -	6,714,708	
	17	Accounts payable and accrued expenses			3,489,432		3,740,949
	18	Grants payable		0	$\vdash$	0	
	19	Deferred revenue		435,043		551,957	
	20	Tax-exempt bond liabilities	0	20	0		
	21	Escrow or custodial account liability Complete Part IV of Sche	326,309				
lities	22	Loans and other payables to current and former officers, directively employees, highest compensated employees, and disquality	ors, trustee		320,303	21	
Liabiliti		persons Complete Part II of Schedule L	•	0	22	0	
ï	23	Secured mortgages and notes payable to unrelated third partie	-	0	23	0	
	24	Unsecured notes and loans payable to unrelated third parties	_	100,000	24	0	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Pa	irties,	,			
		D		640,810	25	565,711	
	26	Total liabilities. Add lines 17 through 25			4,991,594	26	4,858,617
ces		Organizations that follow SFAS 117 (ASC 958), check here ►   lines 27 through 29, and lines 33 and 34.	▼ and com	plete			
an	27	Unrestricted net assets	•	1,622,947	27	1,856,091	
е В	28	Temporarily restricted net assets		0	28	0	
돧	29	Permanently restricted net assets	ı	0	29	0	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	ere ► ┌ a	nd			_
9	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
ΑS	32	Retained earnings, endowment, accumulated income, or other f				32	
Net	33	Total net assets or fund balances			1,622,947	33	1,856,091
Z	34	Total liabilities and net assets/fund balances			6,614,541	34	6,714,708
	1				1 2,5,571		

Par	<b>Reconcilliation of Net Assets</b> Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		22,4	413,143
2	Total expenses (must equal Part IX, column (A), line 25)	2		22,:	179,999
3	Revenue less expenses Subtract line 2 from line 1	3		Ž	233,144
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) $\cdot$ .	4		1,6	522,947
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1,8	356,091
Par	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. F
				Yes	No
1	Accounting method used to prepare the Form 990	_			
2a	• Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or re a separate basis, consolidated basis, or both	viewed or			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a s basis, consolidated basis, or both	eparate			
	☐ Separate basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for overs audit, review, or compilation of its financial statements and selection of an independent accountant?	ıght of th	e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, expla Schedule O	n in			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Single Audit Act and OMB Circular A-133?	the	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo t		3b	Yes	

DLN: 93493048014185

02-0700616

### OMB No 1545-0047

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

Department of the Treasury

Internal Revenue Service

## **Political Campaign and Lobbying Activities**

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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

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

NASHVILLE CONVENTION & VISITORS BUREAU

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

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

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** 

1	Provide a description of the org	ganızatıon's dırect and ındırect politic	al campaign act	ivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Dar	t T-P Complete if the or	ganization is exempt under	saction E01/	c)(3)	
1		e tax incurred by the organization und			¢
2	·	e tax incurred by organization manag			φ
3	•	section 4955 tax, did it file Form 472		11 4 9 3 3 F	Yes No
	Was a correction made?	section 4933 tax, and it me Form 472	o loi tilis year		Yes
4a					Yes   No
b Dar	If "Yes," describe in Part IV	ganization is exempt under	section 501/	c) except section 50	1(c)(3)
1		ended by the filing organization for se			<u>^_</u>
2		organization's funds contributed to ot	•		<b>&gt;</b>
2	exempt function activities	organization's funds contributed to ot	ner organizacions	s for section 527 ►	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 112	0-POL, line 17b ►	<b>¢</b>
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?			√ Yes  No
5	organization made payments f amount of political contribution	nd employer identification number (E) For each organization listed, enter the ns received that were promptly and d political action committee (PAC) If	e amount paid fro irectly delivered	om the filing organization's to a separate political orga	funds Also enter the inization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
Ear D	angruerk Poduction Act Notice co	e the instructions for Form 990 or 990	_E7		

Sch	hedule C (Form 990 or 990-EZ) 2013					Page <b>2</b>
P	art II-A Complete if the organization	is exempt under	section 501(	c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Donk IV an			a adduses FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		list in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		ol" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l.)		(a) Filing organization's totals	( <b>b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisl	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount to	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
		1.6				
_	Grassroots nontaxable amount (enter 25% of lir	•				
	Subtract line 1g from line 1a If zero or less, ent			_		1
	Subtract line 1f from line 1c If zero or less, ente			L		1
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	have to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

e Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

	filed Form 5768 (election under section 501(h)).		•		(1.)	
	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying		a) 	(b)		
actıv	ity.	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					—
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  Other activities?					
i	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		1			
b	If "Yes," enter the amount of any tax incurred under section 4912			-		
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	t III-A Complete if the organization is exempt under section 501(c)(4), section 5	01(c	)(5), d	or se	ctio	n
	501(c)(6).			Т	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		۲	1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		Νo
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		Νo
Par	<b>TIII-B</b> Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1			801	5,41
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	_				- / 1 -
а	Current year	2a			112	2,24
b	Carryover from last year	2b				
С	Total	2c				2,24
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			187	7 ,5 8
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5			-75	5,34
P	art IV Supplemental Information					
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grount II-B, line 1 Also, complete this part for any additional information	p list),	Part II	-A, lır	ne 2,	and
	Return Reference Explanation					

201124416 3 (1 31111 333 31 333 12) 2313		- age -				
Part IV Supplemental Information	on <i>(continued)</i>					
Return Reference	Explanation					
l						

Schedule D (Form 990) 2013

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DLN: 93493048014185

OMB No 1545-0047

**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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public Inspection

Na	me of the organization SHVILLE CONVENTION & VISITORS BUREAU	Employer identification number				
INAS	INVILLE CONVENTION & VISITORS BOREAU		02-0	0700616		
Pa	rt I Organizations Maintaining Donor Adv				<b>s.</b> Complet	e if the
	organization answered "Yes" to Form 990	, Part IV, line 6.  (a) Donor advised funds	1	( <b>b</b> ) Funds and	otheraccou	ınte
	Total number at end of year	(a) Donor advised funds		(b) i ulius aliu	other accou	1111.5
,	Aggregate contributions to (during year)					
	Aggregate grants from (during year)					
ı	Aggregate value at end of year					
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		onor advi	sed	☐ Yes	
,	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benef conferring impermissible private benefit?	onor advisors in writing that grant fun			┌ Yes	☐ No
Pa∣	rt III Conservation Easements. Complete if	the organization answered "Yes'	" to Forn	n 990, Part I	V, line 7.	
	Purpose(s) of conservation easements held by the organization of land for public use (e.g., recreation Protection of natural habitat  Preservation of open space  Complete lines 2a through 2d if the organization held a	or education) Preservation of Preservation of	a certifie	d historic stru	cture	
	easement on the last day of the tax year					
				Held at the	e End of the	Year
a	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
2	Number of conservation easements on a certified histo	, ,	2c			
d	Number of conservation easements included in (c) acq historic structure listed in the National Register	uired after 8/17/06, and not on a	2d			
	Number of conservation easements modified, transferr	ed, released, extinguished, or termina	ated by th	ne organizatior	n during	
	the tax year ►					
	Number of states where property subject to conservati	on easement is located 🛌				
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, ha	andling of	violations, an	d <b>Yes</b>	┌ No
	Staff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation eas	ements o	luring the year	-	
	A mount of expenses incurred in monitoring, inspecting	and enforcing conservation easeme	nts during	n the vear		
	►\$	, and emoreing conservation caseme	nes danni,	g chie yeur		
	Does each conservation easement reported on line 2(c and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of s	section 17	70(h)(4)(B)(ı)	☐ Yes	┌ No
	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financ				
ą li	Complete if the organization answered "Y		s, or Otl	her Similar	Assets.	
a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, educatio	n, or rese	arch in further		
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to these	ts held for public exhibition, educatio				ıc
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$		
	(ii) Assets included in Form 990, Part X			<b>►</b> \$		
	If the organization received or held works of art, historic following amounts required to be reported under SFAS					
3	Revenues included in Form 990, Part VIII, line 1			<b>F</b> \$		
b	Assets included in Form 990, Part X			<u></u>		
	maacca meruucu mir omi aada, r art A			<b>-</b> ⊅		

Part	Organizations Maintaining Co	<u>llections of Art</u>	<u>, His</u>	tori	<u>cal Tr</u>	easu	<u>res, or Oth</u>	er:	<u>Similar Asse</u>	ets (cc	ontinued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other record	ds, cl	neck	any of t	he follo	owing that are	e a si	gnificant use o	fits	
а	Public exhibition		d	Γ	Loan	or excl	nange program	ns			
b	Scholarly research		е	Γ	Other						
С	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	llections and expla	ın hov	w the	y furthe	r the o	rganızatıon's	exer	mpt purpose in		
5	During the year, did the organization solicit of							ımıla			<b>-</b>
Day	assets to be sold to raise funds rather than t <b>t IV</b> Escrow and Custodial Arrang							"Voc	<u>'</u>	Yes	│ No
Fall	Part IV, line 9, or reported an an						i aliswereu	165	י נט רטוווו פי	J,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						r other asset	s no		Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	wing t	able						
									Amo	unt	
С	Beginning balance						1	С			
d	Additions during the year						10	4			
е	Distributions during the year						10	+			
f	Ending balance						1	f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?	•					Γ	Yes	□ No
ь	If "Yes," explain the arrangement in Part XII									<u> </u>	<u> </u>
Pa	t V Endowment Funds. Complete	f the organizatior (a)Current year		)Prior					IV, line 10. ree years back (e	- <b>\</b> Faur	aara baak
1a	Beginning of year balance	(a)Current year	(D	PHOL	уеаг	D (C)IV	vo years back (	<u>u) i iii</u>	ee years back (e	:)rour ye	ears back
ъ	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 curr	ent year end balanc	e (lır	ne 1g	, colum	n (a)) h	neld as				
а	Board designated or quasi-endowment ►										
b	Permanent endowment ►										
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
3a	Are there endowment funds not in the posses	ssion of the organiza	ation	that	are held	d and a	dmınıstered f	or th	e		<del></del>
	organization by (i) unrelated organizations								3a(i)	Yes	No
	(ii) related organizations		• .					٠	3a(ii)	_	<del>                                     </del>
b	If "Yes" to 3a(II), are the related organization							٠.	3b	<del>                                     </del>	
4	Describe in Part XIII the intended uses of th	e organization's end	dowm	ent f	unds						
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1		he o	rgar	ıızatıor	n answ	vered 'Yes'	to Fo	orm 990, Part	IV, lu	ne
	Description of property				Cost or		<b>(b)</b> Cost or oth basis (other)		(c) Accumulated depreciation	(d) B	ook value
1a	and					0		0		†	0
Ь	Buildings					0		0	0		0
c	_easehold improvements					0	1,128,5	532	863,600		264,932
d	Equipment					0	1,347,1	199	975,526		371,673
	Other					0		0	0		0
Tota	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part >	K, colu	ımn (	B), line	10(c).)		•		<u></u>	636,605
									Schedule D (	Form 9	90) 2013

Part VII Investments—Other Securities. Co	omplete if the organization	n answered 'Yes' to For	rm 990, Part IV, line 11b.
See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of v	
(Including name of security) (1)Financial derivatives		Cost or end-of-year	market value
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>*</b>		
Part VIII Investments—Program Related.	Complete if the organization	on answered 'Yes' to Fo	orm 990, Part IV, line 11c.
See Form 990, Part X, line 13.	(h) Book value	(a) Mathadafu	aluation
(a) Description of investment	(b) Book value	(c) Method of v Cost or end-of-year	
		,	
	<b>•</b>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. Complete if the organization		D Part IV line 11d See	Form 990 Part V June 15
(a) Desc		o, raiciv, ille ilu see	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)		
Part X Other Liabilities. Complete if the org			
Form 990, Part X, line 25.	·		
1 (a) Description of liability	(b) Book value		
Federal income taxes	0	]	
Accounts Payable - Related entity	12,587	]	
Restricted deposits	349,466	1	
Deferred lease incentive	203,658	1	
		1	
		1	
	+	1	
		]	
		1	
		-	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<b>▶</b> 565,711		
2 Liability for uncortain tay positions In Part VIII. provi		.h	I - k - k k - k   - k

Par		<b>evenue per Audited Financial Stat</b> vered 'Yes' to Form 990, Part IV, line 1		is with kevenue	per ĸ	<b>eturn</b> Complete i
1		r support per audited financial statements			1	
2	Amounts included on line 1 bu	it not on Form 990, Part VIII, line 12				
а	Net unrealized gains on invest	ments	2a			
b	Donated services and use of f	acılıtıes	2b			
c	Recoveries of prior year grant	s	2c			
d	Other (Describe in Part XIII )		2d			
е	Add lines <b>2a</b> through <b>2d</b> .		<del></del>		2e	
	Subtract line ${f 2e}$ from line ${f 1}$ .				3	
	Amounts included on Form 99	0, Part VIII, line 12, but not on line <b>1</b>				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII )		4b			
С	Add lines <b>4a</b> and <b>4b</b>				4c	
	Total revenue Add lines <b>3</b> and	d <b>4c.</b> (This must equal Form 990, Part I, line	12).		5	
art		xpenses per Audited Financial Sta		nts With Expense	s per	Return. Complet
		swered 'Yes' to Form 990, Part IV, line			1 .	T
	· ·	raudited financial statements			1	
		t not on Form 990, Part IX, line 25	1 -	I		
3		acilities	2a		_	
b			2b		_	
c			2c			
d	Other (Describe in Part XIII )		2d		4 _	
е	_				2e	
					3	
		0, Part IX, line 25, but not on line 1:	1	I		
a	·	uded on Form 990, Part VIII, line 7b			_	
b			4b		4	
<b>C</b>					4c	
		nd <b>4c.</b> (This must equal Form 990, Part I, lin	e 18 )		5	
	Supplemental Inf					
art		Part II, lines 3, 5, and 9, Part III, lines 1a, lines 2d and 4b, and Part XII, lines 2d and				de any addıtıonal
	Return Reference	Explanation				
		-				

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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DLN: 93493048014185

SCHEDULE F (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

### **Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

**Employer identification number** 

NASI	HVILLE CONVENTION & VISITO	RS BUREAU				
					02-0700616	
Pa	rt I General Information "Yes" to Form 990, Par			ne United States. Co	omplete if the organiz	ation answered
1	For grantmakers. Does the o	rganızatıon ma	aintain records	to substantiate the a	mount of its grants ar	nd
	other assistance, the grantee					
	to award the grants or assista	ance?				┌ Yes ┌ No
2	For grantmakers. Describe in assistance outside the United		ganızatıon's pı	rocedures for monitori	ng the use of its grant	ts and other
3	Activites per Region (The follow	ing Part I, line 3	table can be du	uplicated if additional spa	ace is needed )	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	Europe (including Iceland and Greenland)	0	1	Program Services	Tourism marketing	103,178
( 2)						
( 3)						
(4)						
( 5)						
3a	Sub-total					
b	Total from continuation sheets to Part I					
_	Totale (add lines 3a and 3h)	l n	1	1	l	103178

			ived more than \$5,0					
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	<b>(f)</b> Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
( 2)								
(3)								
(4)								
			ted above that are re or counsel has pro					
3 Enter total nu	mber of other or	ganızatıons or en	tities					

Schedule F (Form 990) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	duplicated if addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)
(1)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
( 2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
( 12)							
(13)							
(14)							
( 15)							
( 16)							
( 17)							
( 18)							
	1			l .			

### Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	ি	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	দ	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	ত	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Yes	<b>~</b>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	া	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	্ব	Νo

Schedule F (Form 990) 2013

#### **Additional Data**

**Software ID:** 13000241

**Software Version:** v1.00

**EIN:** 02-0700616

Name: NASHVILLE CONVENTION & VISITORS BUREAU

Schedule F (Form 990) 2013

Page **5** 

#### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

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Schedule I (Form 990)

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

OMB No 1545-0047

DLN: 93493048014185

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990 ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

name of the organization						Employer identifi	cation number
NASHVILLE CONVENTION &	& VISITORS BUREAU					02-0700616	
Part I General Infor	mation on Grants	and Assistance				L	
<ul> <li>Does the organization m the selection criteria use</li> <li>Describe in Part IV the organization m</li> </ul>	ed to award the grants organization's procedur	or assistance? res for monitoring the us	e of grant funds in the l	Jnited States			√ Yes ┌
		Governments and receive					1 "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Country Music Association One Music Circle South Nashville,TN 37203	62-0606066	501(c)(6)	750,000	0	Cash payment		To assist in the production of the CMA Music Festival which brings thousands of visitors to Nashville each June
(2) Music City Bowl Inc 414 Union Street Suite 800 Nashville, TN 37219	62-1720086	501(c)(3)	750,000	0	Cash payment		To assist with the production of the Music City Bowl college football game which takes place each December, and brings thousands of visitors to Nashville
(3) Nashville Local Organizing Committee 414 Union Street Suite 800 Nashville,TN 37219	27-3917015	501(c)(3)	600,000	0	Cash payment		To assist with the production of the 2014 NCAA Women's Final Four basketball tournament which was held in Nashville in April 2014
(4) Competitor Group Inc 9477 Waples Street Suite 150 San Diego, CA 92121	26-1399945	n/a	85,000	0	Cash payment		To assist in the production of two annual marathon events which bring thousands of visitors to Nashville each April and Sept
(5) Greater Nashville Hospitality Association 475 Craighead Street Nashville,TN 37204	62-1862311	501(c)(6)	34,000	0	Cash payment		To support the recipient organization in their mission, which mirrors that of the reporting organization
2 Enter total number of sec	-tue F01/2/2/					<b>.</b>	2

Enter total number of other organizations listed in the line 1 table . . . . . . . . . . . . . . . .

(a) Type of grant or assistance

(b) Number of

recipients

Director of the city of Nashville

(f)Description of non-cash assistance

	,	
ш	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Pa	art IV, line 22.
	Part III can be duplicated if additional space is needed.	

(d)A mount of

non-cash assistance

Metro Gov't Event and Marketing Fund Committee involve an independent application and interview process, and are ultimately approved by the Finance

(c)A mount of

cash grant

(e)Method of valuation

(book,

	recipients	cash grant	non cash assistance	FMV, appraisal, other)	
Part IV Supplemental Ir	<b>nformation.</b> Provide the info	ormation required in Pa	irt I, line 2, Part III, col	umn (b), and any other a	dditional information.
Return Reference	Explanation				
Schedule I, Part I, Line 2 Grants are primarily made to local non-profit organizations that carry out programs which further the exempt purposes of the reporting organizations that they are engaged in activities designed to generate visitor travel to Nashville. The NCVB is an active partner in promoting and/or proclarge scale programs, and as such, is able to monitor the use of the funds in a very tangible way. Those grants that result from amounts applicable way.				in promoting and/or producing these	

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DLN: 93493048014185

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule J (Form 990)

**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.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization NASHVILLE CONVENTION & VISITORS BUREAU **Employer identification number** 

02-0700616

Pa	Tt I Questions Regarding Compensation			
			Yes	No
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			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in 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	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	▼ Compensation committee			
	✓ 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			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only 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			
а	The organization?	5a		
	Any related organization?	5b		
	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			
а	The organization?	6a		
b	Any related organization?	6b		
	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	7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990	
(1)Christopher Spyridon President/CEO	(i) (ii)	365,000 0	158,900 0	19,250 0	29,500 0	17,680 0	590,330 0	0	
(2)Kay W Wallen Chief Sales Officer	(i) (ii)	176,267 0	61,200 0	3,462 0	11,502 0	11,003 0	263,434 0	0	
(3)Deana Ivey Chief Marketing Officer	(i) (ii)	173,911 0	60,500 0	3,301 0	11,435 0	15,439 0	264,586 0	0 0	
(4)Jeff Mefford CFO	(i) (ii)	146,107 0	16,000 0	1,878 0	9,408 0	13,925 0	187,318 0	0 0	
(5)Stephanie Spallino Vice President	(i) (ii)	111,600 0	36,412 0	284	9,176 0	9,542	167,014 0	0 0	
(6)William Wright Vice President	(i) (ii)	104,996 0	32,200 0	266 0	6,880 0	12,560 0	156,902 0	0	
(7)Mary Arnold Sr Vice President	(i) (ii)	108,290 0	21,000 0	166 0	6,960 0	16,842 0	153,258 0	0	

Schedule J (Form 990) 2013

### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

The state of the s	
Return Reference	Explanation
Schedule J, Part I, Line 1a	On rare occasions, when traveling with a group including entertainers to represent the city before an industry function or major client, it is more cost effective to utilize the services of a private charter flight rather than purchase commercial airline tickets for a large group. Also, the board of directors has authorized the President's spouse to travel and attend a limited number of business related events each year, usually where spouse participation at an event is expected. If there is not a bona fide benefit to the organization, such travel expenses are treated as compensation. The organization also provides health club memberships for 2 staff members, which is also reported as taxable compensation.
Schedule J, Part I, Line 3	See the process discussed in the explanation provided for Part VI, Line 15a
Schedule J. Part I. Line 4	Christopher Spyridon participates in a non-governmental 457b deferred compensation plan - \$14200

Schedule J (Form 990) 2013

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DLN: 93493048014185

OMB No 1545-0047

### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Transactions with Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the ore NASHVILLE CONVE	ganization NTION & VISITORS	BUREAU							<b>ver ident</b> 00616	ificatio	n numb	er
Part I Exce							organı	zatıor	ns only)			
	olete if the organ											
<b>1 (a)</b> Nam	e of disqualified	person (		ship betweer in and organi	n disqualified	( <b>c)</b> Des	cription	oftra	nsaction	`  -		rected?
				Trana organi	Zacion						Yes	No
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<b>5</b> Enter the c	amount of tax, n	uny, on mic	2, 45010,1	ciiiibui bea b	, the organizat			•	۲	-		
	ans to and/											
	mplete if the organization repor						r Form 9	90, P	art IV , li	ne 26,	or if the	
(a) Name of	(b)	(c)	(d) Loan		(e)O riginal	(f)Balance	<b>(g)</b> In		(h)		(i)Wi	ritten
ınterested	Relationship	Purpose of	or from t	he	principal	due	defaul		A pprov	ed	agree	
person	with organization	loan	organizati	on?	amount				by board			
	organization								or			
				Τ_	_			T	commi			T
			То	From			Yes	No	Yes	No	Yes	No
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<u> </u>		organız										
						<del></del>						

Part IV Business Transactions I Complete if the organization			e 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization' revenues?	
				Yes	No
(1) Tennessee Titans	Board member	· '	Purchased tickets for inclusion in vacation packages		No
	1	1	I and the second	ı	I

### Part V Supplemental Information

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

Return Reference	Explanation		

Schedule L (Form 990 or 990-EZ) 2013

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DLN: 93493048014185

**SCHEDULE 0** (Form 990 or 990-EZ)

Name of the organization

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 to provide any additional information. ► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

2013

Employer identification number NASHVILLE CONVENTION & VISITORS BUREAU 02-0700616

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section B, Line 11b	
Form 990, Part VI, Section B, Line 12c	The board-adopted Conflict of Interest Policy is reviewed annually with all board members and key staff. Each of these individuals completes a survey annually on which they are to disclose any situation that might give rise to an actual or perceived conflict as defined in the policy. These surveys are reviewed by the leadership and key staff of the organization who are involved in reviewing all financial transactions in which the organization is involved.
Form 990, Part VI, Section B, Line 15	The Board of Directors of the organization hires the President/CEO. This person is then re view ed annually by the Compensation Committee of the Board. In addition to performance against established measurements, this review includes an analysis of compensation. In making this analysis, the committee obtains comparable compensation data from multiple sources, including national industry surveys, local HR consultants, and industry executive placement sources. Based then on performance and comparable industry data, the committee sets the President's compensation for the coming year. The compensation of other key employees is then established by the President, within guidelines established by the Board-approved oper ating budget, utilizing industry comparison data as well.
Form 990, Part VI, Section C, Line 19	In general, other than as required by IRS regulations, the organization does not routinely make its governing documents and internal policies available to the public. The organizat ion does submit a copy of its annual audited financial statements to the Metropolitan Gove rnment of Nashville as required by contract

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

DLN: 93493048014185

2013

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2013

**Employer identification number** 

02-0700616

# SCHEDULE R (Form 990)

Department of the Treasury

Name of the organization

NASHVILLE CONVENTION & VISITORS BUREAU

Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 ► Attach to Form 990.
 ► See separate instructions.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) Name, address, and EIN (if applicable) of disregarded entity Legal domicile (state Total income End-of-year assets Direct controlling Primary activity or foreign country) entity Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Name, address, and EIN of related organization Public charity status Section 512(b) Primary activity Legal domicile (state Exempt Code section Direct controlling (13) controlled or foreign country) (if section 501(c)(3)) entity entity? Yes No ΤN (1) Music City Inc 501(c)(3) Produces music related Line 7 events for the general 150 4th Avenue North Suite G-250 public N/A Nashville, TN 37219 34-2064764

Cat No 50135Y

<b>(a)</b> Name, address, and EIN of related organization	, address, and EIN of		(c) Legal domicile (state o foreign country)	al Direct cule controlling e or entity gn	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(h) Disproprtionar allocations?				<b>j)</b> eral or aging ener?	g ownersh	
					314)			Yes	No	1	Yes	No		
V Identification of Related Org								swere	d "Yes	" on Form	990,	Part	IV,	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)		<b>(d)</b> Direct controllin entity	g Type of entity (C corp, S corp, or trust)	y Share of to	total Share	(g) Share of end- of-year assets		<b>(h)</b> Percentage ownership		i) on 512 (13) rolled tity?	!	
						<u> </u>			_		Yes		No	
									_				+	

Part V	Transactions With Related Organizations Complete if the organization	n answered "Yes" on Forn	n 990, Part IV, lın	e 34, 35b, or 36.					
Note	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule								
<b>1</b> During	the tax year, did the orgranization engage in any of the following transactions with one or	more related organizations li	sted in Parts II-IV?						
<b>a</b> Rec	eipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No		
<b>b</b> Gıft	<b>b</b> Gift, grant, or capital contribution to related organization(s)								
<b>c</b> Gıft	, grant, or capital contribution from related organization(s)				<b>1</b> c		No		
<b>d</b> Loa									
<b>e</b> Loa									
<b>f</b> Divi	f Dividends from related organization(s)								
<b>g</b> Sale	e of assets to related organization(s)				<b>1</b> g		No		
<b>h</b> Pur	chase of assets from related organization(s)				1h		No		
i Excl	hange of assets with related organization(s)				<b>1</b> i		No		
<b>j</b> Leas	j Lease of facilities, equipment, or other assets to related organization(s)								
<b>k</b> Lea	k Lease of facilities, equipment, or other assets from related organization(s)								
I Performance of services or membership or fundraising solicitations for related organization(s)							No		
<b>m</b> Perf	<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)								
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
<b>o</b> Sha	• Sharing of paid employees with related organization(s)								
<b>p</b> Reii	p Reimbursement paid to related organization(s) for expenses								
<b>q</b> Reir	mbursement paid by related organization(s) for expenses				1q		No		
<b>r</b> 0 th	er transfer of cash or property to related organization(s)				1r		No		
<b>s</b> Oth	s Other transfer of cash or property from related organization(s)								
<b>2</b> If th	ne answer to any of the above is "Yes," see the instructions for information on who must co	omplete this line, including co	overed relationships	and transaction thresholds					
	(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	<b>(d)</b> Method of determining amo	unt ii	nvolved			
(1) Music C	n O The reporting organization provide space and minimal administrative support for the controlled entity, version of staff of its own								
p 1,140,312 The controlled organization production expenses of these e						eral olled			

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

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

revenue) that was not a related organization. See instructions													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) (e) (f)  Il Predominant Are all partners Share of total er or (related, 501(c)(3) Income		(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership		
			314)	Yes	No			Yes	No		Yes	No	
												]	
												$\Box$	
	•												

### Part VII Supplemental Information

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

Return Reference	Explanation
Schedule R, Part V, Line 2	The reporting organization controls the related organization through control of board nominations
-	

Schedule R (Form 990) 2013

### **TY 2013 Reasonable Cause Explanation**

Name: NASHVILLE CONVENTION & VISITORS BUREAU

**EIN:** 02-0700616

**Software ID:** 13000241

**Software Version:** v1.00

**Explanation:** The organization filed a Form 8868 Extension Application which

was approved by the IRS.