Rocketown

ROCKTOW

Form 990

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

OMB No. 1545-0047 Open to Public

inte		vonue Service The organization may have to use a copy of this return to satisfy state reporting requires	ment	s. Inspection
A	For th	ne 2005 calendar year, or tax year beginning 7/01/05, and ending 6/30/06		
В		if applicable: Please C Name of organization	D	Employer identification no.
Ī		use IRS		62-1571573
H		ROCKETOWN OF MIDDLE TENNESSEE	E	Telephone number
=	Name	change type. Number and street (or P.O. box if mail is not dollvered to street address) Room/suite		615-843-4001
	loitial r		$\overline{}$	Accounting method: Cash
	Final re	eluro Specific City and a state of Tip. 4		
		Instruc-		Accrual Other (specify)
	Ameno			
	Applica	stion pending ■ Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable H and I are not applicable to se trusts must attach a completed Schedule A (Form 990 or 990-EZ). H(a) Is this a group ratum for		_ (
		They is and a group rotation		· — —
G	Webs	ite: WWW.ROCKETOWN.COM H(b) If "Yes," enter number of	faffilia	ilos 🟲
J		nization type H(c) Are all affiliatos included	?	∐ Yes ∐ No
	(chec	k only one) ► X 501(c) (3) < (insert no.) 4947(a)(1) or 527 (if No,* attach a list. See	a lastr.	-}
к	Check	here Fig. if the organization's gross receipts are normally not more than \$25,000. The H(d) is this a separate return to	liled b	
•		zation need not file a return with the IRS; but if the organization chooses to file a return, be organization covered by	a grou	up ruling? Yes X No
	*	file a complete return. Some states require a complete return.	mber	>
	2419.40	M Check ▶ if the	orga	inization is not required
	Gross	· · · · · · · · · · · · · · · · · · ·	_	0, 990-EZ, or 990-PF).
	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instru		
<u> </u>	1		1	
	1	Contributions, gifts, grants, and similar amounts received: Direct public support 12 1,058,036		
	a	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4	.1
) Þ	Indirect public support 1b	-]
	C	Government contributions (grants) Total (add lines 1a through 1c) (cash \$ 1,058,035 noncash \$ }	┧・・	1
	d	Total (add lines 1a through 1c) (cash \$ 1,058,035 noncash \$)	10	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	291,950
	. 3	Membership dues and assessments	3	
	4	Interest on savings and temporary cash investments	4	
	5	Dividends and interest from securitles	5	
	6a	Gross rents 8a 119,299		
	b			
		Less: rental expenses Net rental Income or (loss) (subtract line 6b from line 6a)	60	119,299
	7	Other investment income (describe)	7	
활	1		1	
Revenue	8a	Gross amount from sales of assets other (A) Securities (B) Other	1.5	a de la composición
æ		than Inventory 8a		
_	ь	Less: cost or other basis and sales expenses 8b	10.7	
	C	Gain or (loss) (attach schedule)	4. 16	ŸĮ
	d	Not gain or (loss) (combine line 8c, columns (A) and (B))	8d	
	9	Special events and activities (attach schedule). If any amount is from gaming, check her		
	a	Gross revenue (not including \$ of		
	[contributions reported on line 18) 98 5,650	ľ	1
	ь	Loss: direct expenses other than fundraising expenses 95 143		
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9¢	5,507
	10a	Gross sales of inventory, less returns and allowances 10a 305, 525		
	b b	Less: cost of goods sold 10b 190,448	1	1
		Gross profit or (loss) from sales of Inventory (attach schedule) (subtract line 10b from line 10a) SEE STMT	10c	115,077
	C			24 442
	11	Other revenue (from Part VII, fine 103)	11	
$\overline{}$	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	
un	13	Program services (from line 44, column (B))	13	
Expenses	14	Management and general (from line 44, column (C))	14	
Her	15	Fundraising (from line 44, column (D))	15	
Ä	16	Payments to affiliates (attach schedule)	16	
	17	Total expenses (add lines 16 and 44, column (A))	17	
Sis	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	333,942
ا رو <u>ن</u>	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	3,283,698
Net Assets	20	Other changes in not assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	3,617,640
For	Privac	y Act and Paperwork Reduction Act Notice, see the separate		Form 990 (2005)
DAA	uction	· ·		

Form 8868

(Rev December 2004)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Form 8868 (Rev. 12-2004)

Department of the		File a separate application for each return.	
		stomatic 3-Month Extension, complete only Part I and check this box	▶ X
		iditional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form).	
		ess you have already been granted an automatic 3-month extension on a previously filed Form 8868.	•
Part I		c 3-Month Extension of Time- Only submit original (no copies needed).	
Form 990-T c	orporations re	equesting an automatic 6-month extension-check this box and complete Part I only	▶ 🖺
All other corpo	orations (Includ	ting Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns.	
Partnerships.	REMICs, and t	trusts must use Form 8738 to request an extension of time to file Form 1065, 1066, or 1041.	
Electronic Fil	ilng (e-file). Fa	rm 8868 can be filed electronically If you want a 3-month automatic extension of time to file one of the	•
returns noted	below (6 month	hs for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional	
(not automatio	e) 3-month exte	onsion, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more	
details on the	electronic filing	g of this form, visit www.irs.gov/efile.	
Type or	Name of Exe	empt Organization Employer ide	ntification number
print			
Flie by the	ROCKET	OWN OF MIDDLE TENNESSEE 62-1571	.573
due date for filing your		eet, and room or sulte no. If a P.O. box, see instructions. BOX 331129	
return. See Instructions,		post office, state, and ZIP code. For a foreign address, see instructions.	
	NASHVI		
Check type o		filed (file a separate application for each return):	
X Form 99		Form 990-T (corporation)	Form 4720
Form 99		Form 990-T (sec. 401(a) or 408(a) trust)	Form 5227
Form 99		Form 990-T (trust other than above)	Farm 6069
Form 99		Form 1041-A	Form 8870
٠٠٥٠ ب			_
Telephone If the orga If this is fo Is for the whole names and Ell Telephone Telephone If the whole names and Ell Telephone If the whole If the	No. F 61! nizallon does no ra Group Retu o group, chock Ns of all memb t an automatic o exempt organicalendar year ax yoar beginn	FAX No. ► The state of the organization's four digit Group Exemption Number (GEN) If this cathis box ► If it is for part of the group, check this box ► and attach a list with the less the extension will cover. 3-month (6-months for a Form 990-T corporation) extension of time until 2/15/07. Inization return for the organization named above. The extension is for the organization's return for: or 7/01/05, and ending 6/30/06.	▶□
2 If this tax	year is for les:	s then 12 months, check reason: I initial return Final return Change in accounting pe	riod
nonrefun b If this app made. In c Balance with FTD	dable credits. Splication is for Ficude any prior Due. Subtract coupon or, if re	Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any See instructions Form 990-PF or 990-T, enter any refundable credits and ostimated tax payments year overpayment allowed as a credit line 3b from line 3a. Include your payment with this form, or, if required, deposit equired, by using EFTPS (Electronic Federal Tax Payment System). Soe	
Gaution (Fuer	are going to m	nake an electronic fund withdrawal with this Form 8868, see Form 8453-EQ and Form 8879-EQ	
for anyment ins	-		

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Rocketown

Form 990 (2005) ROCKETOWN OF MIDDL	E TENI	VESSEE	62-1571573		Page:
Doublist Statement of All propriet	tions must	complete column (A).	Columns (B), (C), and	(D) are required for se	action 501(c)(3) and (
Functional Expenses organization	ns and sec	tion 4947(a)(1) nonexe	mpt charitable trusts t	out optional for others.	(See the Instructions
Do not include amounts reported on line		(A) Total	(B) Program	(C) Management	(D) Fundraising
6b, 8b, 9b, 10b, or 16 of Part I.	n mi	(A) Total	services	and general	(w) · anatasing
22 Grants and allocations (attach schedule)					
(cash\$ cash\$) 22				
If this amount includes foreign grants, check here					
23 Specific assistance to individuals (attach					
schodule)	23		·		
24 Benefits paid to or for members (attach					
schedule)	24				an salandin new Common Color
25 Componsation of officers, directors, etc.	25	195,079	<u>61,883</u>		38,403
26 Other salaries and wages		263,313	263,313		
27 Pension plan contributions	27				
28 Other employee benefits	28	41,186	21,847		
29 Payroll taxes	29	39,630	29,083	7,546	3,001
30 Professional fundraising fees	30				
31 Accounting fees	31			· · · · · · · · · · · · · · · · · · ·	
32 Legal fees	32	17,804		17,804	
33 Supplies	33	19,232	13,417	5,579	236
34 Telephone	34	11,773	3,456	7,673	644
35 Postage and shipping	35_	9,055	1,860	2,564	4,631
36 Occupancy	36	15,195	8,787	6,047	361
37 Equipment rental and maintenance	37				
38 Printing and publications	38	19,083	6,425	1,421	11,237
39 Travel	39	20,234	11,274	7,997	963
40 Conferences, conventions, and meetings	40				
41 Interest		34,151	34,151		
42 Depreciation, depletion, etc. (attach schedule)		153,963	143,185	5,389	5,389
13 Other expenses not covered above (itemize):					
a SEE STATEMENT 2	43a	447,672	328,912	110,059	8,701
b	43b				
C	1			•	
d					
0	·				
f	·				
g					
4 Total functional expenses, Add lines 22	"				
through 43. (Organizations completing		1			
columns (B)-(D), carry these totals to lines					
13-15)	. 44	1,287,370	927,593	275,795	83,982
oint Costs. Check ► If you are following SOP 98-2.					•
re any joint costs from a combined educational campaign	and fundra	ising solicitation report	ed in (B) Program ser	vices?	Yes X No
"Yes," enter (i) the aggregate amount of these joint costs					
10 the state of alternative forms					 ·

Fam 990 (2005)

Form 990 (2005) ROCKETOWN OF MIDDLE TENNESSEE 62-1571573	Page 3
Part III Statement of Program Service Accomplishments (See the instructions.)	
Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about	ita .
particular organization. How the gublic perceives an organization in such cases may be determined by the information pre	sented
on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization	tion's
programs and accomplishments.	
What is the organization's primary exempt purpose?	Program Service
▶ SEE STATEMENT 3	Exponses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number	(Required for 501(c)(3) &
of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4)	(4) orgs., & 4947(3)(1)
organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	trusts; but optional for others.)
B THE SIXTH AVENUE SKATEPARK	January,
a THE SIATH AVENUE SARIEFARA	*******
· · · · · · · · · · · · · · · · · · ·	
	•••••
(Grants and allocations \$) If this amount includes foreign grants, check	here ▶
ь THE ROCKTOWN MUSIC VENUE	
61-211-1111-1111-1111-111-111-111-111-11	
· · · · · · · · · · · · · · · · · · ·	*******

D1111111111111111111111111111111111111	
(Grants and allocations \$) If this amount includes foreign grants, check	here ► 380,779
c THE EMPYREAN COFFEE BAR	
	_
(Grants and allocations \$) If this amount includes foreign grants, check to	here > 166,492
d AFTER SCHOOL PROGRAMS AND SUMMER CAMPS	
•	
·	
(Grants and allocations S) If this amount includes foreign grants, check it	nere ▶ 41,544
e Other program services (attach schedule)	
(Grants and allocations \$) If this amount includes foreign grants, check t	aere ▶ □
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	927,593
	Form 990 (2005)

		2005) ROCKETOWN OF MIDDLE TE		5EE 02-1	3/13/3	_	Page 4
<u> </u>	art IV	Balance Sheets (See the instructions.)				1	
	Note:	Where required, attached schedules and amounts wit column should be for end-of-year amounts only.	hin the de	escription	(A) Beginning of year		(B) End of year
	45	Cash-non-interest-bearing			186,071	45	92,557
	46	Savings and temporary cash investments				46	
	ļ						
	47a	Accounts receivable	473	2,106		20	
	Ь	Less: allowance for doubtful accounts	47b		3,473	47c	2,106
	485	Pledges receivable	483	116,193		1	
	b	Less: allowance for doubtful accounts	48b		83,396		116,193
	49	Grants receivable		49			
	50	Receivables from officers, directors, trustees, and key				_	
		(attach schedule)		-,,,,,,,,		50	
	51a	Other notes and loans receivable (attach	1 T			43	
in.		schedule)	51a			174,624	
Assets	L	Less: allowance for doubtful accounts	515		25,449	51c	31,664
	52	Inventories for sale or use					
	53	Prepaid expenses and deferred charges		rentario de la compositione de la c	15,191		2,590
	54	Prepaid expenses and deferred charges Investments-securities		Cost FMV		54	
	55a	Investments-land, buildings, and	1 1				
		equipment: basis	553				,
	Ь	Less: accumulated depreciation (attach	55b			55c	
	50	schedule) Investments-other (attach schodule)	• • • • • • • • • • • • • • • • • • • •		, , , , , , , , , , , , , , , , , , ,	56	
	56 57a	Land, buildings, and equipment: basis	57a	4,283,489		3.64	
		Loss: accumulated depreciation (attach	3.2	4,200,400			
			57b	557,527	3,869,695	576	3,725,962
	58	schedule) Other assets (describe ▶			<u> </u>	58	
	30	Other assets (describe		······ / -	****		
	59	Total assets (must equal line 74). Add lines 45 throug	ıb 5 8.		4,183,275	59	3,971,072
_	60	Accounts payable and accrued expenses			100,202		93,432
	61	Grants payable				61	
	62	Deferred revenue	• • • • • • • • • • • • • • • • • • • •			62	
	63	Loans from officers, directors, trustees, and key employed				15.5	
iţi		schedule)				63	
abilities	64a	Tax-exempt bond liabilities (attach schedule)				64a	
ן כ	b	Mortgages and other notes payable (attach schedule)	SE	E WORKSHEET	799,375	64b	260,000
İ	65	Other liabilities (describe)		65	
l							
	66	Total [[ab]]Itles. Add lines 60 through 65			899,577	66	353,432
	Organ	nizations that follow SFAS 117, check here 🕨 🔀 ar	nd comple	ate lines			
		67 through 69 and lines 73 and 74.					
S		Unrestricted			3,200,302	67	3,501,447
j j	68	Temporarily restricted			83,396	68	116,193
Ba	69	Permanently restricted				89	
밑		nizations that do not follow SFAS 117, check here	· 🔲 and	1		36	
₫		complete lines 70 through 74.			i		•
Net Assets or Fund Balances						70	
ise		Paid-in or capital surplus, or land, building, and equipm				71 72	
₹		Retained earnings, endowment, accumulated Income. Total net assets or fund balances (add lines 67 throu					
2		70 through 72:	Au na nt i	III IOG			
		column (A) must equal line 19; column (B) must equal	line 211		3,283,698	73	3,617,640
		Total liabilities and not assets/fund balances. Add fir		d 73	4,183,275		3,971,072
							Form 990 (2005)

Rocketown

Form	990 (2005)	ROCKETOWN OF MIDDLE TENNES	SEE	62-	1571573		Page 5
	rt IV-A	Reconciliation of Revenue per Audited I	inancial State	ment	s With Revenue p	er Return (S	ee the
		instructions.)	_				·_ · <u> </u>
3		e, gains, and other support per audited financial staten	nents			. a	1,811,903
Þ		luded on line a but not on Part I, line 12:		ı	ı	[45.2]	•
1	Net unrealize	ed gains on investments		b1		422	
2	Donated sen	vices and use of facilities		<u>52</u>			
3		of prior year grants				_	
4	Other (specif	(y): _,,			SEE STMT 4	2,424,528,43	
				<u>b4</u>	190,59		
	Add lines b1	through b4			******	b	190,591
C	Subtract line	b from line a	,			C	1,621,312
ď	Amounts incl	uded on Part I, line 12, but not on line a:			•	(S) 100	
1	Investment e	xpenses not included on Part I, line 6b		d1 :			
2	Other (specif	y); , , , , , , , , , , , , , , , , , , ,					
				d2			
	Add lines d1	and d2				d	
e	Total revenu	e (Part I, line 12). Add lines c and d		,		e	1,621,312
<u>Pa</u>		Reconciliation of Expenses per Audited					
a		os and losses per audited financial statements				8	1,477,961
Þ		uded on line a but not Part I, line 17:					
1	Donaled serv	lces and use of facilities		þ1			
2	Prior year adj	ustments reported on Part I, line 20		b2			
3	Losses report	ted on Part I, line 20		ьз			•
4	Other (specify	y):			SEE STMT 5	3.00 (April 1987)	
	,	••••••			190,59		•
	Add lines b1	through b4				ь	190,591
¢	Subtract line	b from line a				c	1,287,370
ď	Amounts inclu	uded on Part I, line 17, but not on line a:				F	
		cpenses not included on Part I, line 6b,		d1			
2	Other (specify	/):					
		***************************************		d2			
	Add lines d1 a	and d2		 .		d	
e	Total expens	es (Part I, Ilne 17). Add lines c and d	<u> </u>		<u> </u>	8	1,287,370
Pa	rt V-A	Current Officers, Directors, Trustees, and or key employee at any time during the year even if the	Key Employe	es (Li	st each person who was	an officer, dire	ctor, trustee,
		or yes, emblodes at any anne draing me desi east a fil					
		(A) Name and address	(B) Title and average he week devoted to po	ours per	(G) Compensation (If not paid, enter	(D) Contrib. to mployee benefit sans a deferred	(E) Expense account and other
PT	TH CHOI	NIEWICZ	ADMIN DI		1	moonsation plans	allowances
4.0	i enu a	VENUE S NASHVILLE IN 37203	WONTER DE	ر پ ندی	i i		1
	DRA DAV			100	22,073	0	0
		VENUE S NASHVILLE TN 37203	DEV DIREC	TTOF	r i	•	
_	RY SETI			70 -	31,056	0	0
		VENUE S NASHVILLE IN 37203	OPERATION	42 T	1		
	EL GRIF			<i>7</i> 5	38,364	0	0
		VENUE S NASHVILLE TN 37203	SKATEPARI	עא	30 537	•	
		ESTBROOK	40 EXE DIREC	MOT	30,527	0	0
		VENUE S NASHVILLE TN 37203	40	T.O.	1		5 555
	TTHEW G		ADMIN DIF		63,702	0	5,000
		VENUE S NASHVILLE TN 37203	40	تات	l I		^
		HED LIST	40		9,356	0	0
			^		ا	ام	•
F ().	R NON-C	OMPENSATED	0		0	0	0
	• • • • • • • • • • • • • • • • • • • •						
					 		
	• • • • • • • • • • • • • • • • • • • •	•••••					
• · · •							
		· · · · · · · · · · · · · · · ·					Farm 990 (2005)

Fon	m 990 (2005) ROCKETOWN OF MIDDLE TENNESSEE		-1571573	• .			Page 8
	Part V-A Current Officers, Directors, Trustees, and Key				استندار	Yes	No
75a	Enter the total number of officers, directors, and trustees permitted to vote	e on organization	business at board		·		
	meetings		▶ 20			31.55	1
þ						3	N.
	employees listed in Schedule A, Part I, or highest componsated professio contractors listed in Schedule A, Part II-A or II-B, related to each other thr						
	relationships? If "Yes," attach a statement that identifies the individuals ar				75b	AND REPORTED TO	×
	Taidad Idilligat II (ad) allum a addatical and an	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,	3.55	123.07 123.07	
c	Do any officers, directors, trustees, or key employees listed in Form 990, i	Part V-A, or highe	est compensated			177	
	employees listed in Schedule A, Part I, or highest compensated professio	onal and other inde	ependent				
	contractors listed in Schedule A, Part II-A or II-B, receive compensation fr					The Control	
	tax exampt or taxable, that are related to this organization through commo		common control?		75c	4.00	X
	Note. Related organizations include section 509(a)(3) supporting organizations	ations.					
	If "Yes," attach a statement that Identifies the individuals, explains the rela	ationship between	this			W - 1	
	organization and the other organization(s), and describes the compensation						V.
	including amounts pald to each individual by each related organization.	•			4		
	Does the organization have a written conflict of interest policy?				75d	L	X
e Pr	Former Officers, Directors, Trustees, and Key (If any former officer, director, trustee, or key employee receiv the year, list that person below and enter the amount of comp	ved compensation	or other benefits (d	escribed below) during		rber	1eng
	instructions.) (A) Name and address (B) Lo	and Advances	(C) Compensation	(D) Contrib. to employee benefit plans & deferred compensation plans	(E)	Expe	ense 1 other
N/			(-)	compensation plans	all	owanc	05
——							· —
							
						 ",	
			· · · · · · · · · · · · · · · · · · ·				
							<u>.</u>

							 ,
					· —-		
						•	
	art VI Other Information (See the instructions.)	300 16 00	1 -4 -4	10		Yes	No
76	Did the organization engage in any activity not previously reported to the IR description of each activity		• •		76	3 公司	X
77	description of each activity Were any changes made in the organizing or governing documents but not	t reported to the IF		·····	77	\dashv	x
	If "Yes," attach a conformed copy of the changes.				100	Siego I	and the same
78a	Did the organization have unrelated business gross income of \$1,000 or mo	ore during the yea	ir covered by this re	um?	78a		x
	If "Yes," has it filed a tax return on Form 990-T for this year?				78b		
79	Was there a liquidation, dissolution, termination; or substantial contraction of			ļi i	~~ `	NF#	v
80a	a statement Is the organization related (other than by association with a statewide or na			·····	79	8 3 a d	<u>x</u>
000	common membership, governing bodies, trustees, officers, etc., to any other	•	_	,	80a		x
b	If "Yes," enter the name of the organization ▶ and cr			nonexempt			
81a			81a		., [
	Did the organization file Form 1120-POL for this year?		<u> </u>		B1b		X
DAA	,			· · · · · · · · · · · · · · · · · · ·	Form	990 (2005)

ROCKTÓW

For	n 990 (2005) ROCKETOWN OF MIDDLE TENNESSEE 62	2-1571 <u>573</u>				⊃age '
-	art VI Other Information (continued)				Yos	No
823		les at no charge				
	or at substantially less than fair rental value?			82a	X	
ь	If "Yes," you may indicate the value of these items here. Do not include this	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3.5	Jan. 19	. (
	amount as revenue in Part I or as an expense in Part II,					
	(See Instructions In Part III.)	82b	-	_[
83a	Did the organization comply with the public inspection requirements for returns and exemp	tion applications?	· <u> </u>	83a	X	ĺ
b	Did the organization comply with the disclosure requirements relating to quid pro quo conti			83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?			84a		X
	If "Yes," did the organization include with every solicitation an express statement that such			- 6°	NE S	2.33
_	gifts were not tax deductible?		N/A	84b	1	
85	501(c)(4), (5), or (6) organizations, a Were substantially all dues nondeductible by member	r\$?	N/A	85a		
b		•••••••	N/A	85b		
-	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unles	s the organization			350	353
	received a waiver for proxy tax owed for the prior year.					
c	Ducs, assossments, and similar amounts from members	85c		-	2	3
ď	Section 162(e) lobbying and political expenditures	ادحوا		100	C. 3	
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices					97.43
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)					
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		N/A	85g	* *******	,10 17 5 (4)
h	If section 6033(a)(1)(A) dues notices were sent, does the organization agree to add the am			00,1	-	
	to its reasonable estimate of dues allocable to nondeductible lobbying and political expend.					
	(all a color and a		N/A	85h	i 1	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on			Sep. 5	10 m	(N) (N)
- Gu	P- 40	86a				(*)
ь	Gross receipts, Included on line 12, for public use of club facilities			123		
87	501(c)(12) orgs. Enter, a Gross income from members or shareholders			3.5	Ž.,	
٠ 5	Gross income from other sources. (Do not net amounts due or paid to other	********		223		
•	sources against amounts due or received from them.)	876		ا باز		- /
88	At any time during the year, did the organization own a 50% or greater interest in a taxable			3.33		
00	partnership, or an entity disregarded as separate from the organization under Regulations s					17
	and 301.7701-37 if "Yes," complete Part IX			88	(1)	x
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year t	. i		71.7	33490	<u> </u>
030	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4915		. 0		4.7	
. h	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess bene			3,000	24-25	12.172.1274
· ·	during the year or did it become aware of an excess benefit transaction from a prior year? It				- !	
	a statement explaining each transaction	105, aluich		89b		x
~	Enter: Amount of tax imposed on the organization managers or disqualified persons during	thá varr		030		
Ų	sections 4912, 4955, and 4958	nie Acai				٥
4	Enter: Amount of tax on line 89c, above, reimbursed by the organization		·······			
90a	t to be able to the second of					
Ь	Number of employees employed in the pay period that includes March 12, 2005 (See	**************				
_			906			29
91a	instructions.) The books are in care of ▶ RUTH CHODNIEWICZ	Telephon	eno ▶ 635=	843-	400	<u> </u>
7.4	401 6TH AVE SOUTH	· · · · · · · · · · · · · · · · · · ·	C1101 P (12.5)	7. T. T		? ;;; ,
		71P + 4 1	37203			
ь	At any time during the calendar year, did the organization have an interest in or a signature					• • • •
	over a financial account in a foreign country (such as a bank account, securities account, or			[·	Yes	No
			ſ	91b		x
	16.0 Mars Brookle steen agreement the Committee Committe			338X -	30000	==
	See the instructions for exceptions and filling regularements for Form TD F 90-22.1, Report of				* 1	
	and Financial Accounts.	· Areitte entry			\$ T	
	and Financial Accounts. At any time during the calendar year, did the organization maintain an office outside of the L	Inited States?	j	91c	· ′	x
	remaining to the contract of t					<u></u>
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in the of Form 1041- Check	here			b	- [
44	and enter the amount of tax-exempt interest received or accrued during the tax year		▶ 92	· · · · · · ·	•	ш
	tine time the amount of tax-example interest radared of accused during site tax year.	- Andready September 1997	-	Form	990 (2005)
					- •	

(FAX)6158434007

Form 990 (20	005) ROCKETOWN OF I	THE THEFT		62-157			Page 8
Part VII		oducina Activities	s (See the	instructions.)			
	gross amounts unless otherwise			d business income	Excluded	1 by sec. 512, 513, or 514	(E)
	31022 Bittioning niness princi wise	-					Related or
indicated.		1	(A) Business code	(B) Amount	(C) Exclusion	(D) Amount	exampt function
	m service revenue:				code		291,950
a PRO	OGRAM SERVICE REV.	ENUE					232,330
Ь							
¢							
d							
9							
	re/Medicald payments						
	and contracts from government ager						
							-
	ership dues and assessments						
	t on savings and temporary cash in				·		
	nds and intorest from securitles		and the second s	ar Salata La Maraner es realita arrenda	are lift period	entantes l'ann e la ration est el la constant	to Code equipment of the control of
97 Net ren	ntal income or (loss) from real estat	e:	24 (2 P. 2 P		和特殊心	122 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	の対象が表現を
a debt-fir	nanced property	<u> </u>					
b not det	ot-financed property	·			16	119,299	
98 Net ren	ntal Income or (loss) from personal	property				·	
	nvestment income						
100 Gain or	r (loss) from sales of assets other the	nan Inventory	Ī	 			
	come or (loss) from special events						5,507
101 Not inc	tottle or (loss) from solar of invents						115,077
	profit or (loss) from sales of invento	" ^y ·····					+10,011
	evenue: a						73 447
ь <u>ОТ</u>	HER REVENUE						31;443
c							
d							
ė							
104 Subtoto	ol (add columns (B), (D), and (E))		表表的	0	3334	119,299	443,977
105 Total (8	add line 104, columns (B), (D), and	(E))				•	563,276
Note: Line 10	35 olus line 1d. Part I. should equal.	the amount on line 12.	. Part I.	••••••			
Note: Line 10	05 plus line 1d, Part I, should equal	the amount on line 12.	Part I.			See the instruction	
Note: Line 10 Part VIII	35 plus fine 1d, Part I, should equal Relationship of Activiti	the amount on line 12.	. Part I. olishment	of Exempt Purp	oses (S		ns.)
Note: Line 10 Part VIII ² Line No.	D5 plus line 1d, Part I, should equal Relationship of Activiti Explain how each activity for whi	the amount on line 12. les to the Accomp ich income is reported	, Part I. p iishment In column (E	of Exempt Purp	oses (S		ns.)
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ROCKETOWN OF MIDDLE TENNESSEE 2006 BOARD OF DIRECTORS

Mark Ezell - President

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