Form **990-EZ**

Department of the Treasury Internal Revenue Service

Short Form

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)

Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form
990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the
end of the year may use this form.

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

OMB No. 1545-1150

2006

Open to Public Inspection

Α	For the	2006 calendar	r year,	or tax year beginning January , 2006, and ending	g Dece	mber	, 20 06
В	Check if a	pplicable: F	lease	C Name of organization	D Emplo	yer ide	ntification number
	Address o	ddress change use IRS label or Rejoice Ministries 62					1791396
	Name cha		orint or	Number and street (or P.O. box, if mail is not delivered to street address) Roo	om/suite E Teleph	none nu	mber
\mathbf{V}	Initial retu	l c	ype. See	700 Russell Street	(615		210-1147
H	Final retu	''' Is	Specific	City or town, state or country, and ZIP + 4	F Group		
H	Amended		instruc- tions.	Nashville, TN 37206-3711		er	
ᆜ							☑ Cash ☐ Accrual
	• Secti	ion 501(c)(3) oi		ations and 4947(a)(1) nonexempt charitable trusts must attach apleted Schedule A (Form 990 or 990-EZ).	Other (specify)		V Casii
			a con	<u> </u>			
		te: N/A		H	I Check ► ∐		•
-	Websi			h	is not required		n , 990-EZ, or 990-PF).
				lly one)—			
				in is not a section 509(a)(3) supporting organization and its gross receipts zation chooses to file a return, be sure to file a complete return.	are normally not	more th	an \$25,000. A return is
				ne 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of	of Form 990-EZ.	▶ \$	
	art I			nses, and Changes in Net Assets or Fund Balances (Se		the ins	structions.)
	1					1	92545
	1		-	grants, and similar amounts received		2	
	2	•		evenue including government fees and contracts		3	334
	3	•		and assessments			
	4	Investment i		1 - 1		4	462
	5a	Gross amou	ınt fro	m sale of assets other than inventory 5a			
	b	Less: cost of	or othe	er basis and sales expenses	<u> </u>	Bulletill	
a)	С			n sale of assets other than inventory (line 5a less line 5b) (attach		5c	-
Revenue	6	Special even	its and	activities (attach schedule). If any amount is from gaming, check h	iere 🕨 🔲		
Š	а	Gross reven	ue (no	ot including \$ of contributions		1	
æ		reported on)	•		
	b	Less: direct	expe	nses other than fundraising expenses 6b	<u> </u>		
	С	Net income	or (lo	ss) from special events and activities (line 6a less line 6b)		6c	
	7a	Gross sales	of inv	entory, less returns and allowances	•		
	b	Less: cost o		·	-		
	C			ss) from sales of inventory (line 7a less line 7b)		7c	-
	8			scribe ► N/A')	8	
	9			dd lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	•	9	93341
	10	Grants and	simila	r amounts paid (attach schedule)		10	
	11			r for members		11	•
Ś	1	•		mpensation, and employee benefits		12	36818
Expenses	13			and other payments to independent contractors		13	510
- De	14			· ·		14	6538
X	15			utilities, and maintenance		15	2040
	15			lescribe ► Bank /gov. fees, program expenses, dancewear		16	13254
	16 17			add lines 10 through 16)		17	59160
						18	34181
Net Assets	18			for the year (line 9 less line 17)		54) I (6)	37101
SS	19			d balances at beginning of year (from line 27, column (A)) (mu		10	11873
, t	20			reported on prior year's return)		19 20	11073
ž	20 21	Not assets of	jes III or fund	balances at end of year (combine lines 18 through 20)	. ▶	21	46054
D.	art II			:—If Total assets on line 25, column (B) are \$250,000 or more, fi			
	ar C II	Dalatice S					
-	_			ee page 51 of the instructions.)	(A) Beginning of y		(B) End of year
22				estments	118	73 22	46054
23						- 23	
24		•		>		- 24	****
25					118	73 25	46054
26	Tota	l liabilities (d	escrib	e >		- 26	40004
27	Net :	assets or ful	na ba	lances (line 27 of column (B) must agree with line 21)	1 1 8	73 27	46054

Part III Statement of Program Service Accomplishments (See page 51 of the instructions.) What is the organization's primary exempt purpose? To teach ballet to at-risk children in a Christian environment							Expenses (Required for 501(c)(3) and (4) organizations		
Desc	ribe what was achieved in carrying out the organizeribe the services provided, the number of persons be	zation's exempt purposes. Ir enefited, or other relevant info	n a clear and conc ormation for each p	rogram title.	and	4947(a)(1) trusts; others.)		
	Afterschool dance instruction. Throughout 2006, more performed multiple times in church and community sett								
	Grants \$) If this amount inc				28a		35000		
	Summer Intensive Program. In this program, over 20 st								
ļ	Grants \$) If this amount inc	ludes foreign grants, check	here	. ▶ ⊔	29a		6412		
30))				
•		ludes foreign grants, check			30a				
31	Other program services (attach schedule)								
	Grants \$) If this amount inc	ludes foreign grants, check	here	. ▶ 🗆	31a				
	otal program service expenses (add lines 28a t				32		41412		
Pa	t IV List of Officers, Directors, Trustees, and Key								
	(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contribution employee benefit deferred compe	plans &	acc	Expense ount and allowances		
(ple	ase see attached)								
		-							
Pa	t V Other Information (Note the stateme	nt requirement in Genera	al Instruction V.)				Yes No		
33	Did the organization engage in any activity not p description of each activity			h a detailed		33	1		
34	Were any changes made to the organizing or go			 3S? If "Yes "					
						34	✓		
35	If the organization had income from business activities, reported on Form 990-T, attach a statement explaining	such as those reported on line your reason for not reporting t	es 2, 6, and 7 (amon	g others), but 990-T	not				
а	Did the organization have unrelated business group	ss income of \$1,000 or mor			and	35a			
h	proxy tax requirements?		• • • • • •	• • • •	• •	35b	-		
36	Was there a liquidation, dissolution, termination,			· · · · · · · · · · · · · · · · · · ·	h a	000			
372	statement.)		etructions 137	 al	 N/A	36	\		
	Did the organization file Form 1120-POL for this			<u> </u>	14071	37b			
	Did the organization borrow from, or make any lo	•							
	any such loans made in a prior year and still unp	aid at the start of the perio	d covered by this	return? .		38a	/		
b	If "Yes," attach the schedule specified in the lin	e 38 instructions and ente		. [
00	involved		38	3232	N/A				
39	501(c)(7) organizations. Enter: Initiation fees and capital contributions included of	on line O	20.	1	A1/A				
b	Gross receipts, included on line 9, for public use	of club facilities	39a 39a		N/A N/A		* 4 1		

Pari	t V	Other Information (Note the statement requirement in G	eneral Instruc	tion V.) <i>(Cont</i>	inued)			_
	sectio	c)(3) organizations. Enter amount of tax imposed on the organization 4911 ►0; section 4912 ►0	t ; section 495	5 ▶	0	ŗ	Yes No	_
	year o	r)(3) and (4) organizations. Did the organization engage in any section of the organization and section of the organization from a prior	year? If "Yes," a	ittach an explai	during the nation		V	<u>-</u>
	the ve	r amount of tax imposed on organization managers or disqualified ear under sections 4912, 4955, and 4958		. •		_		.H
d	Enter	amount of tax on line 40c reimbursed by the organization		. •		- [1]		ă
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?							<u> </u>
41	List th					F 00	0.0075	_
42a	The b	books are in care of ► Tim Kernell		Telephone i			8-30/5	
	Locat	ated at ► 850 Rose Park Drive, Nashville, TN		ZIP +	4 🕨	3720	16	
С	over accou If "Ye See th At an If "Ye Section	ny time during the calendar year, did the organization have an interaction account in a foreign country (such as a bank account)? es," enter the name of the foreign country: the instructions for exceptions and filing requirements for Form Interpretate the name of the foreign country: es," enter the name of the foreign country: ion 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lienter the amount of tax exempt interest received or accrued during Under penalties of periory, declare that I have examined this return, including a serior of periory.	TD F 90-22.1. In office outside eu of Form 104 ng the tax year	of the U.S.?	er financial	42b 42c		
Plea Sign Here)	and belief it is true, correct, and complete. Declaration of preparer (other than signature of officer Chan Sheppard, Board President Type or print name and title.	n officer) is based o	on all information of Date	f which prep	arer has any	y knowledg	e.
Paid	arer's	Preparer's signature	Date	Check if self- employed ▶	Preparer's S	SN or PTIN (Se	ee Gen. Inst.	X)
Use (- 1	Firm's name (or yours if self-employed),		EIN	>			_
		address, and ZIP + 4		Phone n	0. ▶ (}		
						QQ() E7 ///	٠.,

Form **990-EZ** (2006)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

2006

Employer identification number

Part I Compensation of the Five Hig (See page 2 of the instructions.	hest Paid Employees O List each one. If there a	t ner Than Offic re none, enter "l	ers, Directors, a None. <u>")</u>	ina Trustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000 .	>	an and rough	THE PARTY	i de de la compansión d
Part II-A Compensation of the Five Hig (See page 2 of the instructions. L		Contractors for	Professional Se	rvices
(a) Name and address of each independent contract		1	of service	(c) Compensation
None				
Total number of others receiving over \$50,000 for professional services	>		er eine eine eine eine eine eine eine ei	
Part II-B Compensation of the Five High (List each contractor who perfor firms. If there are none, enter "N	med services other than	Contractors for professional ser	Other Services	
(a) Name and address of each independent contract		1	of service	(c) Compensation
None				
Total number of other contractors receiving over \$50,000 for other services		e de la compansión de l		

Pa	Statements About Activities (See page 2 of the instructions.)	Yes	No
2	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)		
а	Sale, exchange, or leasing of property?		1
			√
b			
С	Furnishing of goods, services, or facilities?		✓_
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		✓
е	Transfer of any part of its income or assets?		✓
3а	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)		✓_
b	Did the organization have a section 403(b) annuity plan for its employees?		✓_
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement 3c		✓
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? . 3d		✓
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		✓
þ	Did the organization make any taxable distributions under section 4966?		√
С	Did the organization make a distribution to a donor, donor advisor, or related person?		<u>√</u>
d	Enter the total number of donor advised funds owned at the end of the tax year		0
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year •		0
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts		0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year		0

Pai	t IV	Reason for Non-Private	Foundation S	Status (See pages 4	through 7 o	f the instruct	ions.)		
cer	tify t	hat the organization is not a privat	e foundation bec	ause it is: (Please check	only ONE app	olicable box.)			
5		A church, convention of churches	, or association o	f churches. Section 170	(b)(1)(A)(i).				
6		A school. Section 170(b)(1)(A)(ii). (Also complete Pa	urt _. V.)					
7		A hospital or a cooperative hospit	tal service organiz	zation. Section 170(b)(1)(A)(iii).				
8	☐ A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).								
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state >							
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)							
11a	V	An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)							
11b		A community trust. Section 170(b)(1)(A)(vi). (Also co	omplete the Support Scl	hedule in Part	IV-A.)			
12		An organization that normally receives: (1) more than 331/3 % of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)							
13		An organization that is not control requirements of section 509(a)(3).					nd otherwise meets the		
		☐ Type I ☐ Type II	□Туре (II-Functionally Integrate	ed [Type III-Othe	er		
		Provide the following info	rmation about th	e supported organizat	ions. (See pag	e 7 of the insti	ructions.)		
(a) Name(s) of supported organization(s)			(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	Is the su organization the sup organiz	d) upported on listed in uporting zation's documents?	(e) Amount of support		
					Yes	No			
ota	١.					>			
14	П	An organization organized and on	erated to test for	public safety. Section 5	i09(a)(4), (See	page 7 of the i	nstructions)		

	TV-A Support Schedule (Complete only : You may use the worksheet in the instructions					accounting.
	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15	Gifts, grants, and contributions received. (Do	(.,	(-)			(-)
	not include unusual grants. See line 28.).	40668	27993	17386	14040	100087
16	Membership fees received					
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975.					
19	Net income from unrelated business activities not included in line 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf				,	
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23	Total of lines 15 through 22	40668	27993	17386	14040	100087
24	Line 23 minus line 17	40668	27993	17386	14040	100087
25	Enter 1% of line 23	407	280	174	140	194 J. 18 15
26	Organizations described on lines 10 or 11:	a Enter 2% of a	amount in colum	n (e), line 24	▶ 26a	2001
b	Prepare a list for your records to show the nan governmental unit or publicly supported organizamount shown in line 26a. Do not file this list wi	ation) whose total	gifts for 2002 th	rough 2005 exce	eded the	59749
С	Total support for section 509(a)(1) test: Enter lin	ne 24, column (e)			▶ 26c	100087
d	Add: Amounts from column (e) for lines: 18					
	22		26b			59749
е	Public support (line 26c minus line 26d total)					40338
f_	Public support percentage (line 26e (numera	tor) divided by li	ne 26c (denomi	nator))	▶ 26f	40 %
27	Organizations described on line 12: a Foperson," prepare a list for your records to show Do not file this list with your return. Enter the	the name of, and t	otal amounts rec	eived in each yea		
	(2005) (2004)					
b	For any amount included in line 17 that was received show the name of, and amount received for each (Include in the list organizations described in lines the difference between the amount received and amounts) for each year:	year, that was more through 11b, as w the larger amount	e than the larger of vell as individuals.) described in (1) of	of (1) the amount of Do not file this lis or (2) , enter the su	on line 25 for the y st with your return um of these differ	rear or (2) \$5,000. n. After computing ences (the excess
	(2005) (2004)	• • • • • • • • • • • • • • • • • • • •	(2003)		(2002)	• • • • • • • • • • • • • • • • • • • •
			10			•
С	Add: Amounts from column (e) for lines: 15				▶ 27c	1
	17 20 .					
d		and line 27b total				
e f	Public support (line 27c total minus line 27d to Total support for section 509(a)(2) test: Enter al					
g	Public support percentage (line 27e (numera				▶ 27g	%
_ h	Investment income percentage (line 18, colu		•	•••	• • •	%
28	Unusual Grants: For an organization describe	d in line 10, 11, d	or 12 that receiv	ed any unusual o	rante during 200	32 through 2005

Part V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	Yes N	10
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31	
32	Does the organization maintain the following:		
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33	Does the organization discriminate by race in any way with respect to:	1.00	
а	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
C	Employment of faculty or administrative staff?	33c	
	Scholarships or other financial assistance?	33e	
	Use of facilities?	33f	
9	Athletic programs?	33g	_
h	Other extracurricular activities?	33h	75.
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	_
b	Has the organization's right to such aid ever been revoked or suspended?	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	en Yu

Pai	t VII			ransfers To and Transa e page 13 of the instructio	ctions and Relationships W	ith None	chari 	table
51					following with any other organizatio on 527, relating to political organization		ed in s	section
а		•		to a noncharitable exempt orga			Yes	No
	(i) C	•				51a(i)		✓
	• •					a(ii)		✓
b		transactions:						
			es of assets with a	noncharitable exempt organiza	ition	b(i)]	1
				itable exempt organization		b(ii)		1
				ner assets		b(iii)		1
	(iv) A	Reimbursement a	rrangements .			b(iv)		1
	(v) L	oans or loan gua	arantees			b(v)		√
	(vi) F	Performance of s	ervices or members	ship or fundraising solicitations		b(vi)		1
С				sts, other assets, or paid emplo		С		✓
d	goods,	, other assets, o	r services given by	y the reporting organization. If t	e. Column (b) should always show the the organization received less than falls, other assets, or services received:			
	a) e no.	(b) Amount involved	Name of none	(c) charitable exempt organization	(d) Description of transfers, transactions, and	d sharing an	angem	ents
	, 110.	7 Mildelle Milvelled	That of home					
	-+							
	-							
522	Is the	organization dir	actly or indirectly	affiliated with or related to or	ne or more tax-exempt organizations			
	descri	bed in section 50	•	other than section 501(c)(3)) or	in section 527?		s v	☑ No
		(a) Name of organiz	ation	(b) Type of organization	(c) Description of relation	ebio		
		14ame of organiz	ation	Type or organization	Description of relation	31110		
		•						
-								