ROCKTOW

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No. 1545-0047
2008
Open to Publication #2

A	For the 2008 ca	alendar year, or tax year beginning $7/01/08$, and ending $6/30/0$	9		
В	Check if applicable:	Please C Name of organization		D Emple	yer identification number
	Address change	tabel or ROCKETOWN OF MIDDLE TENNESSI	ZE .		
П	Name change	print or Doing Business As		62-	-1571573
ñ	Initial return	type. Number and street (or P.O. box if mail is not delivered to street address)	Room/sulte		none number
H) 	See P. O. BOX 331129	l	615	5-843-4001
Ш	Termination	Instruc- City or town, state or country, and ZIP + 4		G Gross mo	this 1,334,445
	Amended return	fions. NASHVILLE TN 37203			· · · · · · · · · · · · · · · · · · ·
П	Application pending	F Name and address of principal officer:		H(a) is this	a group return for
	, , , , , , , , , , , , , , , , , , , ,	REGINA NEWKIRK		affia:	es? Yes X No
		SAME AS ABOVE		H(b) Are all includ	od? Yes No
				tt "No,	attach a list. (see instructions)
<u>'</u>	Tax-exempt state				
<u>J</u>		WWW.ROCKETOWN.COM		H(c) Group	exemption number
K	Type of organization	n: X Corporation Trust Association Other L	Year of formation: 1	994	M State of legal domicile: TN
_ <u>F</u>	Partis S	ummary			
	1 Briefly d	lescribe the organization's mission or most significant activities:			
6	ROCI	KETOWN'S MISSION IS TO CREATE CULTURALLY RELEVANT EN	VIRONMENT:	THAT	
Š	FOS'	ter vital relationships between disenfranchised adoi	escents a	₹D	
Ē	CHR	ISTIAN MENTORS IN ORDER TO MEET THE SOCIAL, SPIRITUA	L, AND PH	SICAL	
8	2 Check th	his box 🕨 🔲 if the organization discontinued its operations or disposed of more than 2	5% of its assets.		
	3 Number	of voting members of the governing body (Part Vi, line 1a)		3	23
8	4 Number	of independent voting members of the governing body (Part VI, line 1b)		ii 🚹	23
呈	5 Total nu	mber of employees (Part V, line 2a)		5	60
Activities & Governance	6 Total nu	mber of volunteers (estimate if necessary)			60-75
•	7a Total gro	oss unrelated business revenue from Part VIII, line 12, column (C)		7a	
	b Net unre	elated business taxable income from Form 990-T, line 34	. 	. 7b	0
			Prior Ys	ar l	Current Year
4	8 Contribu	tions and grants (Part VIII, line 1h)		0,130	284,221
Ę	9 Program	service revenue (Part VIII, line 2g)	27	6,800	285,888
Revenue	10 Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)			
12	11 Other res	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	46	B,419	<u>555,396</u>
		renue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,24	5,349	1,125,505
	13 Grants a	ind similar amounts paid (Part IX, column (A), lines 1-3)	<u></u>		
		paid to or for members (Part IX, column (A), line 4)			
9	15 Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-10)	47	2,544	588,091
Exponsos	16a Professio	onal fundraising fees (Part IX, column (A), line 11e)		95	
8	b Total fun:	draising expenses (Part IX, column (D), line 25) 127, 153			是是是"种性的"。
ũ		penses (Part IX, column (A), lines 11a-11d, 11f-24f)		3,480	628,483
1	18 Total exp	penses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,17	6,119	1,216,574
_	19 Revenue	less expenses. Subtract line 18 from line 12		9,230	-91,069
s or			Beginning of	Year	End of Year
Net Assets Fund Balanc	20 Total ass	ets (Part X, line 16)		3,531	3,690,474
到	21 Total liab	itiles (Part X, line 26)		790	83,802
		ts or fund balances. Subtract line 21 from line 20	3,69	7,741	3,606,672
<u>-P</u>		gnature Block			
	Unc	der pensities of perjury, I declare that I have examined this return, including accompanying schedules a I belief, it is true, correct, and complete. Declaration of preparer (either than officer) is based on all infor	nd statements, and	to the best o	f my knowledge
	I .	r seed, it is see, contact, and complete. Declaration of preparer (other trial officer) is based off an inform	nation of which proj	asida hera erij	knowledge.
Sig					· · · · · · · · · · · · · · · · · · ·
Her	~e •	Signature of officer		Date	
		To a second seco	 		
	<u> </u>	Type or print name and title			Description of the control of the co
Pale		parer's Date Date	Chock i	′ –	Preparer's identifying number (see instructions)
_	parer's	esture Thelope L. Wilson CPA 11/10	og employe	≈ ▶ ∐	P00940948
	• 1	n's name (or yours BLANKENSHIP CPA GROUP, PLLC		EIN	▶ 45-0491842
	if so	ki-employed), 109 WESTPARK DRIVE, SUITE 430		Phone	
		ress, and ZIP+4 BRENTWOOD, TN 37027-5032		no. ▶	615-373-3771
_		s this return with the preparer shown above? (see instructions)			X Yes No
DAA	For Privacy A	Act and Paperwork Reduction Act Notice, see the separate instructions.			Form 990 (2008)

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you for taking part in the IRS e-file Program.

ROCKETOWN OF MIDDLE TENNESSEE P. O. BOX 331129

NASHVILLE, TN 37203

- [X] Your Form 8868, Application for Extension of Time to File an Exempt Organization Return for tax year June 30, 2009 is being filed electronically with the IRS by the services of BLANKENSHIP CPA GROUP, PLLC.
- [X] Your extension was accepted by the IRS on 11/05/09 and the Submission Identification Number assigned to your return is 62701920093090838145.

Since you are filing your return electronically, PLEASE DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

Acknowledgement Process

The IRS will notify your electronic return originator when they accept your return, usually within 48 hours. If your return was not accepted, IRS will notify your electronic return originator of the reasons for rejection.

Form **8868** (Rev. April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury

► File a separate application for each return.

Intornal Revenue	o Service		
	filing for an Automatic 3-Month Extension, complete only Part I and check this box		▶ 🗓
	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).		
Do not compl	ete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form	8868.	
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A corporation	required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete		
-			▶□
	rations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extensi		
•	radoris (dicuding 1720-C distry), partnerships, ricimics, and dusts hidst use Form 700-10 request an extensi time tax returns.	U11 U1	
		. da 60a	
	ing (e-filo). Generally, you can electronically file Form 8888 if you want a 3-month automatic extension of time		
	rns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8869 f (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8670, g		
•	proposite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part I	-	m
-	e details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits	-	•••
			er Identification number
Type or	Name of Exempt Organization	Employ	at mannication timinal
print	ROCKETOWN OF MIDDLE TENNESSEE	62-1	571573
File by the due date for	Number, street, and room or suite no. If a P.O. box, see instructions.		012010
filing your	P. O. BOX 331129		
return. See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
instructions.	NASHVILLE TN 37203		
Chack type of	return to be filed (file a separate application for each return):		
X Form 99			Form 4720
Form 99			Form 5227
Form 99			Form 6069
Form 99	i i Taran da antara d		Form 8870
			_
Telephone If the organ If this is for for the whole ga	roup, check this box	this is	▶□
	an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time		
	2/15/10 , to file the exempt organization return for the organization named above. The extension is		
	ganization's return for:		
	catendar year cr lax year beginning 7/01/08, and ending 6/30/09.		
▶ ⊠	ax year degrining 1/01/00, and ending 6/30/03.		
2 If this tax	year is for less than 12 months, check reason:	accoun	ling period
3a If this app	plication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax.	T	<u> </u>
	nonrefundable credits. See instructions.	3a	\$
	plication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax		
	s made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balanco	Duo. Subtract line 3b from line 3a. Include your payment with this form, or, if required,		
	rith FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment		
System).	See instructions.	3c	\$
Caution. If you	are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO)	
or payment ins	tructions.		
For Privacy Ac	t and Paperwork Reduction Act Notico, see Instructions.		Form 8868 (Rev. 4-2009)

			OF MIDDLE			62-1571	L573	Page
_				Accon	plishments (se	instructions)		
1	ROCKETOWN FOSTER VI	I'S MISS Tal rel	ION IS TO ATIONSHIPS	BET	WEEN DISEN	FRANCHISED	T ENVIRONMENTS TADOLESCENTS AND ITUAL, AND PHYSI	••••••••
2	the prior Form 9	390 or 990-EZ?				hich were not listed or	1	Yes X No
3	Did the organize services?	ation cease con		nificant c	hanges in how it cond			Yes X No
4	Describe the exp Section 501(c)(3	empt purpose a 3) and 501(c)(4) organizations and s	ection 49	organization's three la 147(a)(1) trusts are re for each program se	rgest program service quired to report the an	s by expenses. nount of grants and	
48) (Expenses) (Revenue \$	
			SKATEPARK	<i>.</i> .:) (Kasaima 🏓	
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c T	(Code: HE EMPYRE) (Expenses EAN COFF		895	including grants of	\$) (Revenue \$	• • • • • • • • • • • • • • • • • • • •
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			se in Schedule O.)					
	Expenses \$ Total program se		,697 Including	URDING OF) (Revenue i Part IX. Line 25. colu)
•	P H . W . (1) 424		~ ~			. CAD IA. LIDS 25. COU		

Form 990 (2008)

Part IV Checklist of Required Schedules Yes No is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes." complete Schedule D, Part IV Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 257 if "Yes," complete Schedule D. Parts VI, VII, VIII, IX, or X as applicable x 11 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII X 12 is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the U.S.? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 18 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J 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," enswer questions 24b-24d and complete Schedule K. If "No," go to question 25. b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 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 X b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II X 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or

substantial contributor, or to a person related to such an Individual? If "Yes," complete Schedule L, Part III

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		200	20
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or	1.2	- xxe0	
	employee), or an indirect business relationship through ownership of more than 35% in another entity		34.5	
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,	- 351		
	Part IV	28a		X
ь	Have a family member who had a direct or indirect business relationship with the grounization? If "Yes."			
	complete Schedule L, Part IV	28b		x
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L., Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, tine 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
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		l	
	VI	37	L	х

Form 990 (2008)

<u> </u>	art V Statements Regarding Other IRS Filings and Tax Compliance				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1	1	-3.3	114	14207
	U.S. Information Returns, Enter -0- If not applicable	1a	11			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			الارد د د د د
c	Did the organization comply with backup withholding rules for reportable payments to vendors and report	table				3
	gaming (gambling) winnings to prize winners?			10		X
2a		J		150	· 5	June 1
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	60			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	, —		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	••••	• • • • • • • • • • • • • • • • • • • •	1353	12/20	
	instructions)				JK.	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered to	у			1.1	2.5
	this return?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other aut	hority				
	over, a financial account in a foreign country (such as a bank account, securities account, or other finan-	cial		1		
	account)?			. 4a		X
b	If "Yes," enter the name of the foreign country:				Α.	3,43
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bar	nk			姚	数
	and Financial Accounts.			22	選篮	283
5 a						X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	n?		. 5b		X
Ç	If "Yes," to question 5a or 5b, did the organization file Form 8888-T, Disclosure by Tax-Exempt Entity			- 1		
	Regarding Prohibited Tax Shelter Transaction?			5c	<u> </u>	
6a	Did the organization solicit any contributions that were not tax deductible?			<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or				l
_	gifts were not tax deductible?			8b	1.000	34.55
7	Organizations that may receive deductible contributions under section 170(c).				쀎	-37
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more the	en				1000
_	\$757	• • • • • •	• • • • • • • • • • • • • • • • • • • •	· 7a	X	├
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	• • • • • •	•••••	7b	<u> </u>	\vdash
C	The state of the s			7-		x
a	required to tile Form 82827 If "Yes," Indicate the number of Forms 8282 filed during the year	7d		7c	· Ketai	
0	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pers					
•	henefit contract?				*876.	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract		· · · · · · · · · · · · · · · · · · ·		\vdash	X
a	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			' -		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as		•••••	··		_
	roquired?			7h		x
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section		•••••		20 mg	
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponso	anh				
	organization, have excess business holdings at any time during the year?	_				X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	•••••	• • • • • • • • • • • • • • • • • • • •	· 34	生业	.53
a	Did the organization make any taxable distributions under section 4966?			9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X
10	Section 501(c)(7) organizations. Enter:			200	16	10
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			統	
þ		10b			28	
11	Section 501(c)(12) organizations. Enter:				XX	4
	Gross income from members or shareholders	11a			然实	1
	Gross income from other sources (Do not net amounts due or paid to other sources against			333	到時	9
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	· • • •		. 12a	710.14.2	
<u> </u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		185	44.	4.4

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Se	ction A. Governing Body and Management						
						Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe th	0		[-3	257	- 76
	circumstances, processes, or changes in Schedule O. See Instructions.	1	Ì		遊	4	
1a	Enter the number of voting members of the governing body	1a	23		4	甇	
b	Enter the number of voting members that are independent	1b	23				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship wi	th			+		
	any other officer director trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the dir	ect	• • • • • • • • • • • • • • • • • • • •	·····			
	supervision of officers, directors or trustees, or key employees to a management company or other person	ວກ?			3		x
4	Did the organization make any significant changes to its organizational documents since the prior Form 9	90 wa	s filed?		<u>-</u>	_	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?				5		X
6	Does the organization have members or stockholders?				8	\vdash	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more memb	Ara	• • • • • • • • • • • • • • • • • • • •	·····	•	_	
	ni the accommon hadu?				7a		x
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons		• • • • • • • • • • • • • • • • • • • •		7b	_	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		• • • • • • • • • • • • • • • • • • • •	·····		16.112	
•	the year by the following:	y					
a	The coverning body?						
b		• • • • •	• • • • • • • • • • • • • • • • • • • •	·····	8a	X	<u> </u>
9a	Each committee with authority to act on behalf of the governing body?	• • • • •	· • • • • • • • • • • • • • • • • • • •	·····	8b	X	-
	Does the organization have local chapters, branches, or affiliates?	· · · · · ·	· • • • • • • • • • • • • • • • • • • •	·····	9a		X
Ь	If "Yes," does the organization have written policies and procedures governing the activities of such chap						
44	affillates, and branches to ensure their operations are consistent with those of the organization?				9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization's	zations	ŀ	ŀ	i		
					10	X	
11	is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be react			1			
_	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	,		<u>.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	11		X
Sec	tion B. Policies						
						Yos	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13				12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could gi	ve		J	Į		
	rise to conflicts?			<u>L</u> 1	2b	X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	•					
	describe in Schedule O how this is done				2c	X	
13	Does the organization have a written whistleblower policy?				13		X
14	Does the organization have a written document retention and destruction policy?				14]	X
15	Did the process for determining compensation of the following persons include a review and approval by		• • • • • • • • • • • • • • • • • • • •		1	WE.	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and de	cision:		13		20	
a	The organization's CEO, Executive Director, or top management official?			[7	5a		X
ь	Other officers or key employees of the organization?				5b	x	
	Describe the process in Schedule O. (see instructions)	• • • • •	• • • • • • • • • • • • • • • • • • • •	·····		34	3443
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			19	Ş.		20
	with a taxable entity during the year?				6a	200	X
ь	if "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	• • • • • •				360	2241
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safegua	red].3		7.5	1
	the organization's exempt status with respect to such arrangements?			1	6Ь	انتلاب	The Li
Seci	ion C. Disclosure	•••••		· · · · · · · · · · · · · · · · · · ·	6D]		—
17	List the states with which a copy of this Form 990 is required to be filed TN		·				
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 980, and 990-T (501)			• • • • • • • • • • • • • • • • • • • •	• • • •	• • • • •	• • • •
••	available for public inspection. Indicate how you make these available. Check all that apply.	(C)(J)8	cniy)				
	Own website						
19							
	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	it of thi	erest				
3A	policy, and financial statements available to the public.						
20	State the name, physical address, and telephone number of the person who possesses the books and recoverable to the person who possesses the books and recoverable to the person who possesses the books and recoverable to the person who possesses the books and recoverable to the person who possesses the books and recoverable to the person who possesses the books and recoverable to the person who possesses the books and recoverable to the person who possesses the books and recoverable to the person who possesses the books and recoverable to the person who possesses the books and recoverable to the person who possesses the books and recoverable to the person who possesses the books and recoverable to the person who possesses the books and recoverable to the person who possesses the books and recoverable to the person who possesses the books and recoverable to the person who person to the person who person to the person who person to the person						
MA	organization: ► LAUREN BROOKS 401 6TH AVE S		<u> </u>			,	: 22 -
11/1	SHVILLE	1 37	7203	615-	84 3	5-4(101

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)
 who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of
 the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
 List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest
 compensated employees; and former such persons.

(A)	organization did not compe (B)			(C)			(O)	(E)	(F)
Name and Title	Average hours per week	individual bustee		Officer	Key employee	Highest compensated omployes		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
	MITH	П	Г	Г						
BOARD MEMBER	1	X	L	<u> </u>	_	L	<u> </u>	0	0	0
MARK EZELL BOARD MEMBER	1 1	x						o	o	o
TOM HARRINGT	4 "				Г					
BOARD MEMBER BARD LIDDLE	1	X			_	H		0	0	0
BOARD MEMBER	1 1	$ \mathbf{x} $						o	o	o
LYDIA ARMIST	₹									
BOARD MEMBER	1	X			_	Ш	_	0	0	0
MARK BLAZE BOARD MEMBER	1	x						o	o	0
JUDITH BRAKE	N					T	_			
BOARD MEMBER	1	X			_			0	0	0
ROBIN CROW BOARD MEMBER	1	x						o	اه	0
BETTY DICKEN BOARD MEMBER	1	x						0	0	
CHARLES DORR			-	-			一	<u> </u>		0
BOARD MEMBER	1	X						0	0	0
JEFF EDMONSO BOARD MEMBER	N 1	$ \mathbf{x} $				ľ				
MARK G'FRANC			\dashv	\dashv		┥	┪	0	0	0
BOARD MEMBER	1	x						0	0	O
JAY STROTHER BOARD MEMBER	1	x	ı			1		0	o	0
EAMOHT YMA					┪	7	7			
BOARD MEMBER EMMETT H. TU	1 RNER	X	-		-	-	\dashv	O	0	0
BOARD MEMBER	1	x		j				0	o	0
MICHAEL VADE BOARD MEMBER	N 1	ж						o	0	0
ROBERT E. WO			7	\dashv	_	一	+		<u>v</u>	
BOARD MEMBER	1	x				_	\Box	0	0	. 0

	A. Officers, Directors, Trus	3t008	3, Ke	y Er	nplo	yees	s, an	d Highest Compensated E	mployees (continued)				
(A) Name and title	(B)	Pos	itlon i) (chec	C) kalit	hat aı	natvi	(D)	(E)		(F)		
reality and aug	Average hours per week	or director	_	,	_	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	1	Estima amour othe compan from organiz and rei	nt of or sation the ation	
			8) a				,	organiz		
GLENN WORLEY BOARD MEMBER	1	x						0	0		<u>, </u>		
SEPHIA WRIGH BOARD MEMBER	1	x						0	0				
BOB YEAGER BOARD MEMBER	1	x						0	0				<u>`</u>
LAURA GRIDER				Г									
BOARD MEMBER BOB MUELLER	1	X	-	\vdash	_		H	0	0				
BOARD MEMBER	1	X		_	_	_		0	0			_	
WILLIAM WRIG BOARD MEMBER	1	x						0	0				
•													
•													
												-	
• • • • • • • • • • • • • • • • • • • •													
• • • • • • • • • • • • • • • • • • • •											_		
						• •	▶.						
2 Total number of indivi organization ➤ 0	iduals (including those in 1a	ı) wh	o re	ceive	ed me	cre ti	han (\$100,000 in reportable comp	pensation from the				
3 Did the organization li	ist any former officer, direct	tor or	r trus	stee,	key	empi	loye	e, or highest compensated			ंब्रक्त 3	Yes	No X
4 For any individual lists	ed on line 1a, is the sum of related organizations greate	герсі	rtabl	e co	mper	nsati	on al	nd other compensation from				12	
individual	on line 1a receive or accrue										4	Quit es	X
services rendered to t	the organization? If "Yes," c	ompl	ete	Sche	dule	J fo	r suc	person		,,,,,	5	arn.	X
Section B. Independent C Complete this table for	r your five highest compens	sated	Ind	epen	dent	con	tract	ors that received more than	\$100,000 of				
compensation from th	(A) Name and business address							Doscriotic	(B) on of services		Cor	(C) opensat	
			-						, , , , , , , , , , , , , , , , , , , ,				
													
						+			 				
						1						_	
						\top						-	
2 Total number of independent of compensation from the	endent contractors (includin	ig the	ose i	n 1)	who	rece	ived	more than \$100,000 in					
DAA			_			-	-		····		Form	990	(2008)

		nent of Rev				(A) Total revenue	(B) Related or exampt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
i 1	a Federated can	npaigns	18				建设和建设 公	or all a successions	in the state of the
3 1	b Membership d	ues	1b						
~	c Fundraising en		10			No.		WAR VALUE	
ᄫ	d Related organ	zations	1d				S. T. VILLER		
	9 Government grants	(contributions)	10	=.	60,000				
	f All other contribution	ıs, gifts, grants,					以外的社会		第二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十
틹	and similar amounts	nat included above	16	:	224,221		《集》(1)		
	g Noncash contributio	ns included in lines 1	a-1f:						
21 '	- h Total. Add line					284,221			
1					Buan. Code			注册图除时间的股份	10 (10 (10 (10 (10 (10 (10 (10 (10 (10 (
2:	PROGRAM	SERVICE RE	VENUE			285,888			
	- · · · · · · · · · · · · · · · · · · ·		*****	• · · · · · · · ·					
1 2	~	•••••	• • • • • •	• • • • • • • • • • • • • • • • • • • •					
1 :	•	• • • • • • • • • • • • • • • • • • • •	• • • • • •	• • • • • • • • • • • • • • • • • • • •					
1 :	*	• • • • • • • • • • • • • • • • • • • •	• • • • • •	• • • • • • • • •	-		 		
	f All other progra	······································		• • • • • • • • •	 				
Ι.	Total. Add line					20E 000	an almost a section	West Street on the Street	Afactivitation
╀~						203,000	Contraction of the State of the Contraction	न र का का अध्यास्त्र के अन्य ग्री अन	(moreonerical contraction
3			GIAIGSI	nos, intere	st, and				1
Ι.	other similar ar							ļ	
4	Income from in	vestment of ta	x-exem	ipt bond pr	oceeds >				
5	Royalties	· · · · · · · · · · · · · · · · · · ·	····		>		Late of Control		
1		(i) Real			Personal				
6a	Gross Rents	144	,293	3					
6	Less: rental exps.			<u> </u>					
c			1,293	3					
1 4		ne cr (loss)				144,293			144,2
/a	Gross amount from sales of assets	(I) Securiti	85	(1	i) Other	WARREN TO THE		METERS MAN	
	other than inventory			1			EN STATE OF	14 Table 1990	Sec 1301
Ь	Less: cost or other					"性"。这种		2 X 2 X 2 X 2 X 2 X	
1	basis & sales exps.					1000			DIMES OF
C	Gain or (loss)								300
d	Net gain or (los	s)							
8a	Gross income from	n fundraising evo	ents			THE PROPERTY OF	是12年代 明末年代	当然の変化が変われ	
	(not including \$	•					31.36	"是一个"	Market States
	of contributions re	ported on line 1c	3.	i					
	See Part IV, fine		-	J	232,017	A STATE OF THE			
Ь	Less: direct exp	• • • • • • • • • •	b	-	20,521			STATE OF THE STATE	
,	Net income or (···· -			211,496	211.496	mentional and design	ACTUREUM <u>CONTRACTOR</u>
	Gross income from		_	, 010.1.0		A STATE OF THE STA	Security Company		Market and the second
	See Part IV, line 1				Į.		33H24M312		
۱.	Less: direct exp					1			
	Net income or (ivitiee			○ 日本のは、これは、日本のは、日本のは、日本のは、日本のは、日本のは、日本のは、日本のは、日本の	AND A COURT CONTRACTOR OF A CONTRACTOR	recover description of the second section of
	Gross sales of i		A acı	410G3	·····	Capacity and the	PART WALLES		
. va	returns and allo	-	_	J	344,957	公司的	"好"		191
	Less: cost of go		a b		188,419	·本门的是: 2000年5月	ENWINE IN	18-12-12-12-12	THE PERSON NAMED IN
	Net income or (I	• • • • •		ч—	100,419	THE ESSENCE OF THE SECOND	A LEE BOOK	er in ini hina er engritten	AND STANDARDED
		laneous Revenu		retitory	Busn. Code	156,538	156,538	eng jar i jagan sakiri sakar i sakara	TORGONICO TORGONICO POSTA
444				-	ausn. C008			And professions	是其所被
11a	SPONSORSHI		• • • • • •	• • • • • • •	 	21,800	21,800		
Ь	OTHER REVE	• • • • • • • • • • • • • •	• • • • • •	• • • • • • •	 	21,269	21,269		
C									
	All other revenue		• • • • • •	• • • • • • • • • • • • • • • • • • • •	\vdash			andreas the first section of the second	and the day of the second
	Total. Add lines				▶ }	43,069	HARMING BY ST. ST.	被称为为。19 03年	A STATE OF THE STATE OF THE STATE OF
12					1, 8c,				
	Do 100 and 114	<u></u> ,			• I	1,125,505	696,991	l Ol	144,29

Form 990 (2008)

Part X Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

1 2 3 4 5 6	8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, tine 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	303,889	oxpenses	general expenses	
2 3 4 5 6	organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	303,889	057.004		
3 4 5 6	Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	303,889	057.004		
3 4 5 6	the U.S. See Part IV, tine 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, tines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	303,889	057.004		
4 5 6	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	303,889	057.004		
6 7	U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	303,889	057.004		
6 7	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	303,889	057.004		
6 7	Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	303,889	057 004	一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一	19.30 4.40 4.40 4.40 4.40
6 7	trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	303,889	057 004		出る地域が発送を行う
6 7	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	303,889			
7	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		257,284		46,60
7	persons described in section 4958(c)(3)(B)		li .		
7					
		100.010	110 001		
8	Other salaries and wages	193,310	149,954	24,580	18,77
	Pension plan contributions (include section 401(k)	10 004	- ^		
0	and section 403(b) employer contributions)	10,901 37,734			
9 ^	Other employee benefits				
0 1	Payroll taxes Fees for services (non-employees):	42,257	32,743	6,092	3,422
b	Management	39,197	1,072	30,813	7,312
	Legal	39,491	1,012	30,613	7,314
d	AccountingLobbying				
	Professional fundraising services. See Part IV, Ilne 17		Villendringer eine Se	AND PROPERTY.	
	Investment management fees		Control of the Paris of the Control	Military and Life Lots of Artist Andrews	
g	Other	· · · · · ·			
2 ,	Advertising and premotion				
3 (Office expenses	25,776	5,866	18,095	1,815
. 1	Information technology				
5 (Royalties				
3 (Оссиралсу	25,083	19,159	4,569	1,359
	Travel	7,674	6,316	997	361
3 F	Payments of travel or entertainment expenses				
f	or any federal, state, or local public officials				
9 (Conferences, conventions, and meetings				
) [nterest				
l F	Payments to affiliates				
} [Depreciation, depletion, and amortization	124,652	115,926	4,363	4,363
3 1	nsurance	A Company of the Hardward of Land			
_					
	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	i% of total expenses shown on line 25 below.) PURCHASED SERVICES OTHER	76 003	THE BUTTER STREET	CANAL CONTRACTOR OF THE PARTY O	AND AND ASSOCIATION OF THE PARTY OF THE PART
α.	UTILITIES OTHER	76,893 74,017	45,429	11,416	20,048
	PURCHASED SERVICES PERSON	58,344	70,077 56,711	1,970 260	1,970
	INSURANCE	43,417	39,076	4,341	1,373
• .	REPAIRS AND MAINTENANCE	34,666	34,036	630	
A	I other expenses	118,764	83,259	23,988	11,517
	otal functional expenses. Add lines 1 through 24f	1,216,574	952,396	137,025	127,153
Ji S oi fr	cint Costs. Check here If following OP 98-2. Complete this line only if the reganization reported in column (B) joint costs om a combined educational campaign and undraising solicitation			201,020	227,133

					(A) Beginning of year			(B) End of		
_	1	Cash—non-interest bearing			57,694	1	 			610
	2	Savings and temporary cash investments	• • • • • •	• • • • • • • • • • • • • • • • • • • •	3.7.00 ::	2	\vdash		<u>, , , , , , , , , , , , , , , , , , , </u>	
	3	Pledges and grants receivable, net	••••		203,473	3	1	1.	11.	457
	4	Accounts receivable, net			7,822					179
	5	Receivables from current and former officers, directors, tru	istees.	kev			†			
	1	employees, or other related parties. Complete Part II of Sc			ĺ	5				
	6	Receivables from other disqualified persons (as defined ur			Committee of the commit	200	Mess	37X		河州
	1	4958(f)(1)) and persons described in section 4958(c)(3)(B)								a ii≥ Xanis
		Part II of Schedule L	•			6	Έ			
鞀	7	Notes and loans receivable, net				7	1			
Assets	8				32,795	8		- :	32,	995
8	9	Prepaid expenses and deferred charges Land, buildings, and equipment: cost basis			662	9				
	10a	Land, buildings, and equipment: cost basis	10a	4,325,482		1	1500	1000	4.	1
	b					ر صر	13.2			3
		Part VI of Schedule D	10b	969,260	3,476,085	10c	,	3,35	56,	222
	11	Investments—publicly traded securities				11				
	12	Investments—other securities. See Part IV, line 11				12				
	13	Investments—program-related. See Part IV, line 11				13				
	14	Intangible assets				14				
	15	Other assets. See Part IV, line 11				15				011
	16	Total assets, Add lines 1 through 15 (must equal line 34)			3,778,531			<u>3,69</u>		
	17	Accounts payable and accrued expenses		••••••	80,790	17		8	<u>33,</u>	802
	18	Grants payable				18	ļ			
	19	Deferred revenue				19	<u> </u>			
/B	20	Tax-exempt bond liabilities		••••••		20	<u> </u>			
Liabilities	21	Escrow account liability. Complete Part IV of Schedule D				21	<u> </u>			
#	22	Payables to current and former officers, directors, trustees,	-			16.	30.00	1.0		1.1
į		employees, highest compensated employees, and disquall	fied		35.75.75.60.00 TOE	33	1000		28 C	
		persons. Complete Part II of Schedule L.				22	 			
	23	Secured mortgages and notes payable to unrelated third pa	arties .			23	—			
	24	Unsecured notes and loans payable				24	├			
	25	Other liabilities. Complete Part X of Schedule D	• • • • • •		00 700	25	┼		_	
	26	Total liabilities. Add lines 17 through 25			80,790	26	January Lon-	Erathilities	13,	802
ĕ		Organizations that follow SFAS 117, check here	and				15 #W	授纸	类型	
Ē	27	complete lines 27 through 29, and lines 33 and 34.			3,494,268	混团	2577			
ᆵ	28	Unrestricted net assets	•••••					3,48		
밁	29	Temporarily restricted net assets Permanently restricted net assets	• • • • • •	• • • • • • • • • • • • • • • • • • • •	203,473		 		1	<u> 796</u>
Fund Balances	23	Organizations that do not follow SFAS 117, check here	K		00000000000000000000000000000000000000	29	73303	200	2001	79 75 75 75
こし		and complete lines 30 through 34.	- ⊔					100	E	
Ö	30	Capital stock or trust principal, or current funds			A TANK A ST. COMPANY ST. BONNEY	30	1128984	ADMINITED TO	194.2	(b) Peta
	31	Paid-in or capital surplus, or land, building, or equipment fur	nd	• • • • • • • • • • • • • • • • • • • •		31	 			
اق	32	Retained earnings, endowment, accumulated income, or other	her fund	ds		32	<u> </u>			
<u></u>		Total and annata as fixed belows a			3,697,741	33	 	3,60	6.	672
ž		Total liabilities and net assets/fund balances			3,778,531			3,69		
Pa	rt X									
									Yes	No
1		ounting method used to prepare the Form 990: 🔲 Ca		Accrual Ott			ſ	_		_
2a		e the organization's financial statements compiled or review			7		l	2a		X
b		e the organization's financial statements audited by an indep		******	•••••			2b	X	
C		es" to lines 2a or 2b, does the organization have a committee							_	
_		audit, review, or compilation of its financial statements and s		•				2c	X	
3a		result of a federal award, was the organization required to	undergo	an audit or audits as set t	forth in		i			
j.				•••••	• • • • • • • • • • • • • • • • • • • •			38		X
	u ~Y(es," did the organization undergo the required audit or audit	57	****************	····	••••		3b		
		•						Ferm \$	330 A	(2008)

Form 4562

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No. 1545-0172

► See separate instructions. ► Attach to your tax return.

Attachment Sequence No. 67

Nan	nc(s) shown on return ROCKI	ETOWN OF MIDI	OLE TENNESS	BEE				ilying n -157	umber 1573
	ness or activity to which this form rela	tes							
	NDIRECT DEPRECI								
	art l	pense Certain Prop	erty Under Sect	on 179					•
_	Note: If you nav	ve any listed proper	ty, complete Par	t v perore you	ı compi	<u>ete Pa</u>	rt I.	т.	050.00
2	Maximum amount. See the ins	urucuons ior a nigner umit ista placad in accide (coo	Tor cenain businesse	s	• • • • • • • •	• • • • • • • •		1	250,00
3	Total cost of section 179 prope Threshold cost of section 179	nry placed in service (see	instructions)	· · · · · · · · · · · · · · · · · · ·	• • • • • • • •	• • • • • • •	• • • • • • •	2	900 00
4	Reduction in limitation. Subtract	property before reduction of line 3 from line 2. If zero	un unuauon (see insti	uccons)	• • • • • • • • •		• • • • • • • •	3	800,00
5	Dollar limitation for tax year. Subtra			d filina seasontolu e	o inetnucii		• • • • • • • • • • • • • • • • • • • •	5	
<u> </u>		ription of property		b) Cost (business us			lected cos		150 - 10 918 AV.
6		· · · · · · · · · · · · · · · · · · ·				(-) -		•	
7	Listed property. Enter the amount	unt from line 29			77	··			
8	Total elected cost of section 17	9 property. Add amounts	in column (c), lines 6	and 7	<u> </u>			8	Corp. Corp. Sec. 1
9	Tentative deduction. Enter the	smaller of line 5 or line 8			• • • • • • • • •		• • • • • • •	9	
10	Carryover of disallowed deduct	tion from line 13 of your 2	007 Form 4562	• • • • • • • • • • • • • • • • • • • •			•••••	10	
11	Business income limitation. En	ter the smaller of busines:	s income (not less tha	in zero) or line 5 (s	see instru	ctions)	•••••	11	
12	Section 179 expense deduction	n. Add lines 9 and 10, but	do not enter more tha	ın line 11			•••••	12	
13	Carryover of disallowed deduct	tion to 2009. Add lines 9 a	<u>ind 10, less line 12 🗼</u>		13		**********		POT VIEW DISTRICT
Note	o: Do not use Part II or Part III be	low for listed property. Ins	tead, use Part V.						
P	art II Special Deprec	iation Allowance ar	nd Other Deprec	iation (Do not	include	listed	ргоре	ty.) (See instructions.)
14	Special depreciation allowance								
	during the tax year (see instruc							14	
15	Property subject to section 168	(f)(1) election						15	
16	Other depreciation (including A	<u>CRS)</u>						18	124,81
Pi	irt III MACRS Deprec	lation (Do not inclu	de listed propert	v.) (See instru	ctions.)				
			Section						
17	MACRS deductions for assets p							17	
8	If you are electing to group any asse	ts placed in service during the	tax year into one or mo	re general asset acc	ounts, chec	k here		环设	经营制机能够到的
	88C0011	B-Assets Placed in Se				Daprec	lation Sy	stem	
	(a) Classification of property	year placed in service	(c) Basis for deprecta (business/investment only-see instruction	use	(0) Can	vention	(f) Mo	thod	(g) Depreciation deduction
9a	3-year property								· · · · · · · · · · · · · · · · · · ·
ь	5-year property							T	
C	7-year property					t			
d	10-year property								
0	15-year property								
f	20-year property								
9	25-year property	-10 ST. 10 ST. 1		25 yrs.			S/L		
h	Residential rental			27.5 yrs.	MI	A	S/L		
	property			27.5 yrs.	MA	A	S/L		
j	Nonresidential real			39 yrs.	MA		S/L		
	property				MM		S/L		
	Section C-	-Assets Placed in Servi	co During 2008 Tax	Yoar Using the A	lternativ	e Depre	ciation S	ystem	
0a_	Class life	- 1996 Pro-					S/L	T	
	12-year			· 12 yrs.			SAL		
	40-year			40 yrs.	MM	A T	S/L		
	rt IV Summary (See i								
	Listed property. Enter amount fro		• • • • • • • • • • • • • • • • • • • •					21	
2	Total. Add amounts from line 12	, lines 14 through 17, line	s 19 and 20 in colum	n (g), and line 21.					
	Enter here and on the appropriat			orations—see ins	r. , , , , , , ,			22	124,817
	For assets shown above and pla	ced in service during the Ibutable to section 263A (•		1			- 1	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate Instructions.

OMB No. 1545-0047

2008

Open to Public
Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ROCKETOWN OF MIDDLE TENNESSEE

Employer Identification number 62–1571573

<u> </u>	art I	Read	Bon for Public Charity	Status (All organizations	must c	complete	e this p	art.) (s	see in	structio	ns)		
The	orga			e it is: (Please check only one of									
1		A church, co	onvention of churches, or ass	ociation of churches described in	section	170(b)(1)	(A)(I).						
2		A school de	scribed in section 170(b)(1)((A)(II). (Attach Schedule E.)									
3				ce organization described in sec	tion 170(I	b)(1)(A)(II	I). (Attac	h Sched	ule H.)				
4		A medical re	esearch organization operate	d in conjunction with a hospital d	escribed i	n section	170(6)(IXAYIID.	. Enter (he hospit	ats name.		
		city, and sta								•			
5		An organiza	tion operated for the benefit (of a college or university owned o	r operate	d by a go	vernmen	tal unit d	escribe	d In	• • • • • • • • • • •	•••••	•••••
			(b)(1)(A)(iv). (Complete Part		•								
6		A federal, st	ate, or local government or g	overnmental unit described in se	ction 170	(b)(1)(A)	(v).						
7	X			substantial part of its support fro				m the ge	neral p	ublic			
	_		soction 170(b)(1)(A)(vi). (C		-			•	•				
8		A community	y trust described in section 1	170(b)(1)(A)(vi). (Complete Part	II.)								
9						ontribution	ns, mem	bership (ees, an	d gross			
	An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % 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). (Complete Part III.)											
10	Ц	An organizat	tion organized and operated	exclusively to test for public safet	y. See se	ction 509	!(a)(4). (s	see Instr	uctions)				
11	\sqcup			exclusively for the benefit of, to p									
				ed organizations described in se						ction			
		509(a)(3). CI	heck the box that describes t	he type of supporting organizatio	n and con	nplete line	:s 11e th	rough 11	lh.				
	_	a Type		c Type III-Function			d		e III-C	ther			
9	Ш			anization is not controlled directly									
				and other than one or more publi	icly suppo	rted organ	nizationa	describ	ed in se	ction			
			section 509(a)(2).										
f				mination from the IRS that it is a	Type I, T	ype II, or	Type III	supportir	1 9				_
		-	check this box	·····						. 			. 📙
9				ion accepted any gift or contribut	ion from a	ıny of the							
		following per										_	
				ntrols, either alone or together w								Yes	No
				the supported organization?							1150	τ	├
			member of a person describ		· · · · · · · · · ·	• • • • • • • •				 .	11g(ii	_	├──
		(III) A 3576 C	ontroked entity of a person d	escribed in (i) or (ii) above?					• • • • • •	• • • • • • • •	119(11]	Ь
<u>n</u>				e organizations the organization	supports.		_						
(1) (of supported inization	(ii) EIN	(iii) Type of organization		organization		you notify		ta the		nount of	
	Oiga	BUZEUMI		(described on lines 1-9 above or IRC section	1	Isted in your document?		ntzation in of your		tion in cal. Izad in the	sup	port	
				(see instructions))				port?	Ü.	8.7			
					Yes	No	Yes	No	Yes	No			
					i			1		1			
					<u> </u>			<u> </u>	<u> </u>	-			
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						1]	1					
			THE PERSON NAMED IN	SAN DEN ALEMAN	\$31.00m	3786	20.40	N.S.XI	12.3	ELECT			
otal					数数	劉邦				是			

		CKETOWN O				-1571573	Page 2				
٤.	如性則 Support Schedule for O	rganizations D	escribed in Se	ctions 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(vi)					
_	(Complete only if you ch	ecked the box	on line 5, 7, or	8 of Part I.)							
	ction A. Public Support										
C	alendar year (or fiscal year beginning in) >	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total				
1	Gifts, grants, contributions, and memberahlp fees received. (Do not include any "unusual grants.")	538,192	1,058,036	525,550	500,130	284,221	2,906,129				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf										
3	The value of services or facilities furnished by a governmental unit to the organization without charge				·						
4	Total. Add lines 1-3	538,192	1,058,036	525,550	500,130	284,221	2,906,129				
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						765,449				
6	Public support. Subtract line 5 from line 4	4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Control of the second	and the feet of the first	APPLICATIONS.		2,140,680				
Sec	tion B. Total Support		31.574 4.4.5	THE PERSON NAMED IN THE	THE COURT OF THE C	Africa alle manageral	2,140,000				
_	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2008	(d) 2007	(o) 2008	(f) Total				
7	Amounts from line 4	530,192	1,058,036	525,550	500,130	284,221	2,906,129				
8	Gross income from interest, dividende, payments received on securities loans, rents, royalties and income from similar sources	168,355	119,299	144,088	139,557	144,293	715,592				
9	Net income from unrelated business activities, whether or not the business is regularly carried on										
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. Add lines 7 through 10 Gross receipts from related activities. etc. (r	4.704	31.443	18.037	73.361	43,069	170,614				
11	Total support. Add lines 7 through 10		-0.45 (CE) (CE)	POSTA RESERVE	A Salahan A Maria	Sec. 478-4789	3,792,335				
12	Gross receipts from related activities, etc. (too instructions\		Contract that Fredde, NET C	CONTRACTOR SERVICES	12					
13	First five years. If the Form 990 is for the o						1,750,447				
	omenization shock this have and steen have	មេនកោកទក្សា ន ភេដ្ឋ ៖	secona, unro, rouru	ı, or mın tax year a	s a section but (c)(3)	, m				
Sec	organization, check this box and stop here tion C. Computation of Public Sur	port Percenta	40			********	P L				
14	Public support percentage for 2008 (line 6,	port reteema	yo	<u> </u>		Laal					
15	Public current comparison from 1997 Cabad	tula A. Daniel A. Ya	y wite 11, colonin (w	• • • • • • • • • • • • • • • • • • • •		56.4475 %				
16a	Public support percentage from 2007 Sched	iule A, Part IV-A, iir	18 201 F F 40			15	61.2460 %				
10a .		tanou did uct cueci	tine box on line 13	, end line 14 is 33 '	1/3 % or more, one	CK this dox	. 🖼				
	and stop here. The organization qualifies as	a a publicly support	ed organization				▶ 🗷				
Ь	33 1/3 % support test—2007. If the organiz	racon did not check	a box on line 13 o	r 16a, and line 15 b	s 33 1/3 % or more	, check this	, \Box				
47.	box and stop here. The organization qualified	es as a publicity sup	ported organization	n			▶ 🛚				
178	10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the										
						/ how the	. 🗂				
	organization meets the "facts-and-circumsta						▶ 🛚				
D	10%-facts-and-circumstances tost—2007	. If the organization	did not check a bo	x on line 13, 16a, 1	16b, or 17a, and lin	e 15 is 10% cr					
	more, and if the organization meets the "fact	s-and-circumstanc	es" test, check this	box and stop here	e. Explain in Part IV	/ how the	_				
	organization meets the facts-and-circumsta	nces" test. The org	anization qualifies	aa a publicly suppo	rted organization.	• • • • • • • • • • • • • • • • • • • •	▶ 🏳				
8	Private foundation. If the organization did r	not check a box on	line 13, 16a, 16b, 1	7a, or 17b, check t	ihis box and see in	structions	▶ ⊔				

_	ledule A (Form 990 or 990-EZ) 2008 KC					2-15/15/3	Page Page
F	art III Support Schedule for C	Organizations E	Described in S	ection 509(a)(2)		
_	(Complete only if you c	hecked the box	on line 9 of P	art I.)			
	ction A. Public Support	·			· · · · · · · · · · · · · · · · · · ·		
C	alendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(o) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include						
2	any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities						<u> </u>
	furnished in any activity that is related to the organization's tax-exempt purpose		ļ	ļ	-		
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
_	line 6.)		表 2 表 1 · 1 · 2 · 2 · 2 · 2 · 2 · 2 · 2 · 2 ·	国际特别及约约	AND SHOW THE	HI FEET HOLDE	
	tion B. Total Support	,	·	· · · · · · · · · · · · · · · · · · ·			
	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6		ļ				
10a	Gross income from Interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b			<u> </u>			
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)			1.8%和2.8%和2.8%			
14	First five years. If the Form 990 is for the	organization's first,	second, third, four	lh, or fifth tax year a	s a section 501(c)	(3)	
	organization, check this box and stop here		• • • • • • • • • • • • • • • • • • • •				<u></u> ▶ L
Sect	tion C. Computation of Public Su	pport Percenta	ige				
15	Public support percentage for 2008 (line 8,	column (f) divided I	by line 13, column	(f))			%
16	Public support percentage from 2007 Sche	dule A, Part IV-A, li	ne 27g		4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	16	%
58C1	ion D. Computation of Investmen	nt Income Perc	entage				
17	Investment income percentage for 2008 (lin	ne 10c, column (f) d	ivided by line 13, o	column (f))	• • • • • • • • • • • • • • • • • • • •	17	- %
18	Investment income percentage from 2007 5	Schedule A, Parl IV	-A, line 27h				<u>%</u>
	33 1/3 % support tests—2008. If the organization has 33 1/3 % shock this has						. –
b	17 is not more than 33 1/3 %, check this bo 33 1/3 % support tosts—2007. If the organ	nization did not che	ck a box on line 14	or line 19a, and lin	e 16 is more than 3	33 1/3%, and	
	line 18 is not more than 33 1/3 %, check thi	s box and stop her	e. The organizatio	n qualifies as a pub	licly supported org	anization	▶ ∟
	Private foundation. If the organization did	not check a box on	tine 14, 19a or 19	b, check this box ar			<u>▶ </u>
AA						Schedule A (Form 99	0 or 990-EZ\ 2008

Schedule A (For	m 990 or 990	-EZ) 2008	ROCKE	TOWN O	MIDDL	e tenn	essee		62-15715 [°]	73 Pag
Part IV	Suppleme Part II lin	ental Info	rmation. 0	Complete t	his part to p	provide th	e explanati	on require	ed by Part II, on. (see instr	ine 10:
						any ours	i additional	monnau	on, (see mau	uctions)
PART II	, LINE	10 -	OTHER	INCOME	DETAIL	• • • • • • • • • •	•••••			•••••
MISCELL	Aneous	REVE	IUE	•••••	\$	1	70,614			•••••
		• • • • • • • • •		••••••			•••••			••••••
· · · · · · · · · · · · · · · ·	• · · • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		•••••	• • • • • • • • • • • • • • • • • • • •		•••••	••••••		
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	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		••••••	•••••••	••••••		•••••		•••••
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

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Schodule D (Form 989) 2008

Name of the organization Employer Identification number ROCKETOWN OF MIDDLE TENNESSEE 62-1571573 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. Part I (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year 🕨 _ _ _ _ _ 4 Number of states where property subject to conservation easement is located >_____ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? 6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year > \$ _ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service. provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 980, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.

_		OF MIDDLE TI				71573		Page 2
<u> </u>	art III Organizations Maintaining	Collections of Art, I	Historical Treas	ures, c	r Other S	<u>lmilar Ass</u>	ets (contin	ued)
3	Using the organization's accession and other items (check all that apply):	records, check any of the f	ollowing that are a sig	gnificant	use of its col	lection		
8	Public exhibition	d 🔲 Loan	or exchange program	ns				
t	Scholarly research	e 🗌 Other						
•	Preservation for future generations						_	
4	Provide a description of the organization's col Part XIV.	lections and explain how th	ey further the organiz	ation's e	xempt purpo	se in		
8	During the year, did the organization solicit or assets to be sold to raise funds rather than to	receive donations of art, hi	storical treasures, or	other sin	nilar		∏ Yes	□ No
P	art IV Trust, Escrow and Custod				answere	1 "Vee" to F		L NO
	Part IV, line 9, or reported				@131761Ct	. 103 to 1	onn ooo,	
1a	Is the organization an agent, trustee, custodia	n or other intermediary for	contributions or other	assets i	not			····
	included on Form 990, Part X?	, , , , , , , , , , , , , , , , , , , ,			•••		☐ Yes	∏ No
b	If "Yes," explain the arrangement in Part XIV a	and complete the following t	able:	•••••	• • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		
	•						Amo	unt
c	Beginning balance	************				1c		
d	Additions during the year	*********	• • • • • • • • • • • • • • • • • • • •	• • • • • • •		1d	-	
•	Distributions during the year	************	• • • • • • • • • • • • • • • • • • • •	• • • • • • •		10		
f	Ending balance					1 46		
2a	Did the organization include an amount on For	m 990, Part X. line 217	• • • • • • • • • • • • • • • • • • • •	• • • • • • •	•••••		Yes	No
b	if "Yes," explain the arrangement in Part XIV.		**************		• • • • • • • • • • • • • • • • • • • •	•••••		
P	irt V. Endowment Funds. Compl	ete if organization an	swered "Yes" to	Form	990. Part	IV. line 10		-
		(a) Current year	(b) Prior year		years back	(d) Three year		our years back
1a	Beginning of year balance		《海南沙安城园》	大小田	18.5	975 C (C.E.)		
b	Contributions		一次 では 発音性の	2000	阿勒斯德	20 8 1 CH	光度点 372. 9	STATE OF
c	Investment earnings or losses		CHIEF REPORT	5. 10. 66	W.V. W.W.	foot with	1000	V-107 0
d	Grants or scholarships		"一个才态是到699	S. STATE	ALL AND A	P. ST. LANGE	AND WAY	to the rule of
0	Other expenditures for facilities		"netween the activity of	17.230		Harry TOP		7 P. W. W.
	and programs							
f	Administrative expenses			英语诗		E-14/2		EN STATE
8	End of year balance		心理和基础		经济学的			Manager of
2	Provide the estimated percentage of the year of			•		-		
a	Board designated or quasi-endowment > _	%						
þ	Permanent endowment > %							
C	Term endowment ▶ %							
3 a	Are there endowment funds not in the possess	ion of the organization that	are held and adminis	tered for	r the			
	organization by:							Yes No
	(i) unrelated organizations						3a(n l
	(II) related organizations						38(I)
b	If "Yes" to 3a(ii), are the related organizations li	isted as required on Schedi	ule R?		• • • • • • • • • • • •	••••	3b	
4	Describe in Part XIV the intended uses of the o	rganization's endowment fo	ında.					
P.a	rt VI: Investments—Land, Buildir		<u>See Form 990,</u>	Part X				
	Description of investment	(a) Cost or other basis	(b) Cost or other		(c) Dep	reciation	(d) Bo	ok vatue
		(investment)	basis (other)		TO THE REST OF THE PERSON			
1a	Land							050,000
þ	Buildings		2,599	667		<u>168,545</u>	2,	131,122
	Leasehold improvements		 					
	Equipment		661			186,361		175,100
8	Other	1	14,	354		14,354		
otal.	Add lines 1a-1e. (Column (d) should equal For	m 990, Part X, column (B),	line 10(c).)	بيبيب		>	3,:	356,222

	Form 990) 2008 ROCKETOWN OF MIDDLE TI		62-1571573	Page 3
Part VII		Part X, line 12.		
	(a) Description of security or category	(b) Book value	(c) Method of	
	(including name of security)		Cost or end-of-yea	r market value
Financial deriv	vatives and other financial products			
Closely-held e	equity interests			
Other				
		<u> </u>		
		<u> </u>		
				
	·			
				NV selection and a selection a
Total. (Column	n (b) should equal Form 990, Part X, col. (B) line 12.)	<u> </u>	STATES OF CASE	(1) 10 10 10 10 10 10 10 10 10 10 10 10 10
Part VIII	Investments—Program Related. See Form 990	T		
	(a) Description of investment type	(b) Book value	(c) Method of	
			Cost or end-of-yes	r market value
Total. (Celumn	n (b) should equal Form 980, Part X, col. (B) line 13.)		THE SAME GRANT SET	are the feel of the second
Part IX	Other Assets. See Form 990, Part X, line 15.			
	(a) Description			(b) Book value
				_
				······································
		 		
Total. (Column	(b) should equal Form 990, Part X, col. (B) line 15.)		•	
Part X	Other Liabilities. See Form 990, Part X, line 25.			
	(a) Description of liability	(b) Amount	THE REAL PROPERTY.	Marie Color Davis
Federal income	taxes			
_				
				
				reseas havi
otal (Cohima	(b) should equal Form 990, Part X, col. (B) line 25.)			
	(b) should equal Form 990, Part X, col. (B) line 25.)		A STANSON OF THE PROPERTY OF THE PARTY OF TH	THE PROPERTY OF THE PROPERTY O

uncertain tax positions under FIN 48.

hedule D (Form 990) 2008 ROCKETOWN OF MIDDLE TENNESS		<u>62-1571573</u>	Page 4
Part XII Reconciliation of Change in Net Assets from Form 990			
Total revenue (Form 990, Part VIII, column (A), line 12)		1	
Total expenses (Form 990, Part IX, column (A), line 25)		2	1,216,574
Excess or (deficit) for the year. Subtract line 2 from line 1		3	
Net unrealized gains (losses) on investments		4	
Donated services and use of facilities		5	
Investment expenses		6	
Prior period adjustments		7	
Other (Describe in Part XIV)		<u></u>	
Total adjustments (net). Add lines 4-8		9	
Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			-91,069
art XIII Reconciliation of Revenue per Audited Financial Stater	nents With F	Revenue per Return	
Total revenue, gains, and other support per audited financial statements			1,317,19
Amounts included on line 1 but not on Form 990, Part VIII, line 12:	• • • • • • • • • • • • • • • • • • • •	38	3
Net unrealized gains on investments	2a	13	
Donated services and use of facilities	2b	3,270	Š
Recoveries of prior year grants	2c		
Other (Describe in Part XIV)	2d	188,419	3
Add lines 2a through 2d			"
Subtract line 2e from line 1	• • • • • • • • • • • • • • • • • • • •	3	1,125,50
Amounts included on Form 990, Part VIII, line 12, but not on line 1:		े बहु	18 To
Investment expenses not included on Form 990, Part VIII, line 7b	4a		
Other (Describe in Part XIV)	4b		4
Other (Describe in Part XIV)	401	4c	£5
Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This should equal Form 980, Part 1, line 12.)	• • • • • • • • • • • • • • • • • • • •		1,125,50
inf XIII Reconcillation of Expenses per Audited Financial State		Evpopose par Potus	<u> </u>
Total expenses and losses per audited financial statements	MIGHICA TTICH	1	1,408,263
Amounts included on line 1 but not on Form 990, Part IX, line 25:	• • • • • • • • • • • • • • • • • • • •	····	
Donated services and use of facilities	10-1	3,270	M1
Prior year adjustments	··· 2a	3,270	
	··· 20		<u> </u>
Losses reported on Form 990, Part IX, line 25 Cither (Describe in Part XIV)	··· 26	188,419	3
Other (Describe in Part XIV)	2d		401 604
Add lines 2a through 2d			
Subtract line 2e from line 1		3	1,216,574
Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1		3
Investment expenses not included on Form 990, Part VIII, line 7b			2
Other (Describe in Part XIV)	[4b]		
		<mark>4c</mark>	
Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		<u> 5</u>	1,216,574
irt XIV Supplemental Information			
plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, li		ert IV, lines 1b	
2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d			
PART XI, LINE_8RECONCILATION_OF CHANGES	<u> </u>	3	
COST OF GOOD SOLD		¢	199 410
			• = =
COST OF_GOODS_SOLD		\$ _	<u>-188,419</u>
		. – – – – –	
PART XII, LINE 2D - REVENUE AMOUNTS INCLUD	ED IN FI	NANCIALS - O	THER
Cost of Good Soud			_ Too'413

Schedule D (I	Form 990)	2008	RO	CKE	TC	NW	OF	MI	DD	LE	TE	NNE	SSE	EE			6	2-1	571	.57	3					Page 5
Part XIV	Supp	<u>iemen</u>	cai in	ITOM	nati	ion (d	contin	ued)													_					
PART	<u>XI</u> II	<u>L</u> I	NE_	2 <u>D</u>	=	EXI	PEN:	SE	<u>AM</u>	<u>OUN</u>	T <u>s</u>	ĪN	CTī	DE	D_ 1	<u> N</u>	<u>FIN</u>	ANC	<u>IAI</u>	<u>.</u> s_		O <u>T</u> I	HEF	L .		
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ROCKTOW

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding **Fundraising or Gaming Activities**

▶ Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6e.

OMB No. 1545-0047 2008 Open To Public

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization ROCKETOWN OF MIDDLE TENNESSEE 62-1571573 Partia Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees Yes No or key employees listed in Form 990, Part VII) or entity in connection with professional fundralsing services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table. lii) Did fund-(i) Name of individual (ti) Activity (lv) Gross receipts (v) Amount paid to (vi) Amount paid to raiser have custody or or entity (fundraiser) from activity (or retained by) (or rotained by) fundraiser listed in organization control of col. (1) ontribulions' Yes No Total List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

		G (Form 990 or 990-EZ)			OF 1	MIDDLE TENNESS	EE_	62-15	7157	73	Page 2
١.,١	Part l		ven: .000	ts. Complete if the orga 0 on Form 990-EZ, line	aniza Ba	ation answered "Yes" to	For	rm 990, Part IV, lin	e 18, d	or report	ed
				(a) Event #1 UNDRAISING EVE (event type)	_	(b) Event #2		(c) Other Events (ONE (total number)	(4	d) Total Ever dd col. (a) th col. (c))	
Revenue	1 2 3	Gross receipts Less: Charitable contributions Gross revenue (line 1 minus line 2)		232,017							,017
	4	Cash prizes		232,017						232	,017
Direct Expenses	5	Non-cash prizes					_			<u> </u>	
Direct E	7	Other direct expenses		20,521						20	,521
	9	Net income summary. Co	mbine	lines 4 through 7 in column (d e lines 3 and 8 in column (d) .			. 			211	,521 ₎
.8	art Ji	Gaming. Compute than \$15,000 or	olete on Fo	if the organization ansom 990-EZ, line 6a.	new:	ed "Yes" to Form 990,	Part	IV, line 19, or repo	orted n	nore	
Revenue				(a) Bingo		(b) Pull tabe/instant bingo/prograssive bingo		(c) Other gaming		ctal gaming (a) through co	
Œ.	1_	Gross revenue					<u> </u>				
penses		Cash prizes	_								
Direct Expenses		Rent/facility costs									
		Other direct expenses Volunteer labor	F	Yes %	F	Yes %	Н	Yes %			
			Add i	lines 2 through 5 in column (d)	····					No. of Parties	
	8	Net gaming Income summ	ary. C	Combine lines 1 and 7 in colum	nn (d)			.			
9 a b	Is th	e organization licensed to one constant of the	opera	nization operates gaming activ ate gaming activities in each o	f thes		• • • •		•••••	9a	
0a b		ss," Explain:		ing licenses revoked, suspend						10a	
1	is the	the organization operate	gamii enefic	ng activities with nonmembers clary or trustee of a trust or a r		•••••••••••	• • • • •	•••••		11	

Schedule G (Form 990 or 980-EZ) 2008

ROCKTOW

Sch	edule G (Form 990 or 990-EZ) 2008	ROCKETOWN	OF	MIDDLE	TENNESSEE	62-15715	73	F	Page 3
								Yes	No
13	Indicate the percentage of gaming acti						1.03	1	
a	The organization's facility					. 13a 9	<u> </u>	3	1.13
þ	An outside facility					13b 9	6	37	183
14	Provide the name and address of the p	erson who prepares the	orga	nization's gam	ing/special events books			150	議員
	and records:						1	2	3
							3		12.
	Name ▶							100	
	_								
	Address >								1
								2014	83
15a	Does the organization have a contract								
	revenue?			•••••			15a	<u> </u>	
b	ir res, enter the amount of gaming re	venue received by the c	organı	zation > 3	5	and the	1.48	2	7.4.5
	amount of gaming revenue retained by	the third party ▶ \$			······································		1 33	1	- 6
C	if "Yes," enter name and address:								1
							1.3	30.0	100
	Name ▶	••••					7.60		12/2
								100	
	Address ►	******************			• • • • • • • • • • • • • • • • • • • •				
							1.5%	高麗	
16	Gaming manager information:						35		
								1	
	Name ▶	**********							
							71		130
	Gaming manager compensation ▶ \$	******************						- 1	3
	Description of services provided ▶		. .	· • • • • • • • • • • • • • • • • • • •				10	
		_					132		
	Director/officer En	nployee	Indep	endent contra	ctor			表新	
							. 0		
17	Mandatory distributions:								· 深耸
a	Is the organization required under state	law to make charitable	distrit	outions from the	e gaming proceeds to		1	图图	
	retain the state gaming license?	• • • • • • • • • • • • • • • • • • • •			***************************************		17a		
b	Enter the amount of distributions require	ed under state law distri	buted	to other exem	ot organizations or spent			Figure	1
	in the organization's own exempt activit	ies during the tax year I	<u> </u>	\$				1888	27/19

Schedule G (Form 990 or 990-EZ) 2008

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990

CMB No. 1545-0047

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Open to Public

Name of the organization ROCKETOWN OF MIDDLE TENNESSEE	Employer Identification number 62–1571573
FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT AC	TIVITIES
NEEDS OF THE TEENS. ROCKETOWN HAS VISITORS REPRESENTING	EVERY SOCIAL
DEMOGRAPHIC OF THE GREATER NASHVILLE AREA AND SURROUNDIN	G COUNTIES.
FORM 990, PART I, LINE 6	
VOLUNTEERS PROVIDE SERVICE TO THE ORGANIZATION IN THE FO	LLOWING
AREAS: BUILDING MAINTENANCE AND IMPROVEMENT, CROWD MANA	GEMENT AT EVENTS,
SPECIALTY TEACHERS AND LECTURERS, AND THROUGH OTHER ACTI	VITIES.
FORM 990, PART III, LINE 4D - ALL OTHER ACHIEVEMENTS	
AFTER SCHOOL PROGRAMS AND SUMMER CAMPS	
	•••••
FORM 990, PART VI, LINE 10 - ORGANIZATION'S PROCESS USED	••••••
THE DRAFT 990 IS PROVIDED TO BOTH THE FINANCE COMMITTEE 2	•••••
COMMITTEE FOR REVIEW PRIOR TO APPROVAL. APPROVAL IS RECI	
COMMITTES AND THE 990 IS FILED. THE 990 IS THEN PROVIDE	TO THE FULL BOARD
OF DIRECTORS FOR THEIR REVIEW.	
FORM 880 DARM UT TIME 120 - ENGODORMENT OF CONTEXTORS DO	
FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS PO	•
THE BOARD GOVERNANCE COMMITTEE ANNUALLY ISSUES THE CONFLI	***************************************
POLICY AND MONITORS CONVERSATIONS AND BOARD MEETINGS FOR CONFLICTS.	FULLINITIAL
CORPULCIO.	
FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OR	FICERS

THE ORGANIZATION DOES NOT HAVE ANY EMPLOYEES WHICH MEET THE \$100,000

Name of the organization ROCKETOWN OF MIDDLE TENNESSEE	Employer Identification number 62-1571573
THRESHOLD FOR REPORTING COMPENSATION. THE ORGANIZA	ATION UTILIZED AN OUTSIDE
CONSULTANT WHEN SEARCHING FOR QUALIFIED KEY EMPLOYS	es. The consultant was
TRAINED TO LOOK FOR THE MOST QUALIFIED APPLICANTS &	VITHIN THE MARKET
COMPENSATION RANGE FOR COMPARABLE JOBS. APPLICANTS	WERE INTERVIEWED BY A
COMBINATION OF PEOPLE INCLUDING THE CONSULTANT, BOX	ARD MEMBERS AND STAFF.
THE ULTIMATE DECISION WAS MADE BY OUR EXECUTIVE COM	MITTEE OF THE BOARD.
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DI	SCLOSURE EXPLANATION
THE ORGANIZATION'S ANNUAL REPORT AND FORM 990 ARE A	AVAILABLE ON THE
ORGANIZATION'S WEBSITE. THE 990 IS ALSO AVAILABLE	THROUGH THE WEBSITE
GUIDESTAR.COM. ALL OTHER ORGANIZING DOCUMENTS ARE	AVAILABLE UPON REQUEST.

ROCKTOW ROCKETOWN OF MIDDLE TENNESSEE 62-1571573 Federal Asset Report FYE: 6/30/2009 Form 990, Page 1

Ass	et Description	Date In Service	Cost	Bus Sec Basis % 179Bonus for Depr PerConv Met	n <u>Prior</u>	Current
0.5	er Depreciation:					
<u> </u>	ARCHITECTURE	6/30/02	25,115	25,115 15 MO S/L	10,046	1,674
3	SECURITY SYSTEM	1/10/03	34,419	34,419 5 MO S/L	34,419	1,074
	INSULATION AND SOUND ABATEMEN LOW VOLATE WIRING AND LADDER	1/10/03 1/10/03	2,376	2,376 10 MO S/L	1,307	237
]	MINI BLINDS THROUGHOUT FACILITY	2/18/03	20,780 1,885	20,780 39 MO S/L 1,885 10 MO S/L	2,931 1,005	532 189
9	CONSTRUCTIONS COSTS	1/06/03	2,117,690	2,117,690 39 MO S/L	298,649	54,299
7		1/10/03 3/01/03	91,179	91,179 39 MO S/L	12,859	2,337
Š	PARTY ROOM CARPET	8/31/03	3,000 1,579	3,000 10 MO S/L 1,579 10 MO S/L	1,600 763	300 158
10	BUILDING 401 6TH AVE SO	10/15/03	275,167	275,167 40 MQ S/L	32,676	6,879
11 12		12/10/04	1,000 28,569	1,000 15 MO S/L 28,569 5 MO S/L	239	67
13	3ID CARD SYSTEMS	1/10/03	18,586	28,569 5 MO S/L 18,586 5 MO S/L	28,569 18,586	0
14		1/10/03	4,830	4,830 3 MO S/L	4,830	Ó
i6		1/30/03 9/25/02	599 2,412	599 3 MO S/L 2,412 3 MO S/L	599 2,412	0
17	DELL DIMENSION COMPUTERS	12/05/02	1,180	1,180 3 MO S/L	1,180	ŏ
18 19		6/30/03 11/19/03	5,193	5,193 5 MO S/L	5,193	Ŏ
20	HP LASERJET 2300 PRINTER	5/01/04	1,328 1,174	1,328 5 MO S/L 1,174 3 MO S/L	1,218 1,174	110 0
21	VIDEO EDITING EQUIPMENT	7/15/04	2,232	2,232 5 MO S/L	1,786	446
22 23	SONY DIGITAL CAMCORDER G5 1.8GHz IMAC COMPUTER	8/10/04	1,240	1,240 5 MO S/L	971	248
24	OFFICE FURNITURE	6/09/05 12/01/01	5,439 500	5,439 3 MO S/L 500 5 MO S/L	5,439 500	0
25		1/07/02	1,082	1,082 5 MO S/L	1,082	ŏ
26 27		1/07/02 1/10/03	740	740 5 MO S/L	740	0
28	REFRIGERATED DISPLAY CASE	1/10/03	1,000 2,500	1,000 5 MO S/L 2,500 5 MO S/L	1,000 2,500	0
29	33 CUSTOM CAFE TABLES	1/10/03	2,550	2,550 5 MO S/L	2,550	ŏ
30 31	60 USED BALCK CHAIRS 18 CAFE TABLE BASES	1/10/03 1/10/03	2,398 869	2,398 5 MO S/L	2,398	.0
32	SKATE PARK RETAIL FIXTURES	1/06/03	2,820	869 7 MO S/L 2,820 5 MO S/L	683 2,820	124 0
33	VINTAGE STORE RETAIL FIXTURES	1/01/03	1,838	1,838 5 MO S/L	1,838	ŏ
34 35	2 STAINLESS STEEL TABLES 24 SWIVLE BAR STOOLS	1/10/03 1/10/03	400 1,199	400 10 MO S/L	220	40
36	5 COMPARTMENT FILE CABINET	2/05/03	607	1,199 5 MO S/L 607 10 MO S/L	1,199 329	0 60
37	3 ROLLING OFFICE CHAIRS	2/05/03	495	495 5 MO S/L	495	ŏ
38 39	GREEN ROOM FURNITURE OFFICE FURNITURE	1/10/03 2/05/03	1,411 1,779	1,411 10 MO S/L 1,779 5 MO S/L	776	141
40	8 SOFAS	1/10/03	5,147	5,147 7 MO S/L	1,779 4.044	0 736
41 42	29 CHAIRS SKATEPARK LOCKERS	1/10/03	10,242	10,242 7 MO S/L	8,048	1,463
43		3/14/05 10/15/03	1,450 1,050,000	1,450 7 MO S/L 1,050,000 0 — Land	691 0	207
44	HWS TELEVISION	8/09/94	1,712	1,712 7 MO S/L	1,712	0
45 46	STAGE LIGHTING SYSTEM SOUND GEAR CAPSTONE MUSIC	8/12/95 11/09/95	4,400	4,400 10 MO S/L	4,400	0
47	SOUND EOUIP NASH CARTAGE	11/21/95	5,075 1,068	5,075 10 MO S/L 1,068 10 MO S/L	5,075 1,068	0
48	VOCAL PROCESSING UNIT	1/09/96	667	667 10 MO S/L	667	ŏ
49 50	CORD WRAPS MONITOR MIXING BOARD	4/25/96 3/01/96	229 499	229 10 MO S/L	229	0
ŠĬ	SNAKE STAGE STUDIO	2/11/97	735	499 5 MO S/L 735 5 MO S/L	499 735	0
	LASER LIGHTS	3/13/97	747	747 5 MO S/L	747	0
53 54	SOUND/LIGHTS EQUIPMENT COMPUTER - SHAWN	6/24/99 8/05/00	1,000 1,489	1,000 5 MO S/L 1,489 3 MO S/L	1,000	0
55	2 TECHNIC 1200'S	8/07/00	1,000	1,489 3 MO S/L 1,000 5 MO S/L	1,489 1,000	0
56 57	AMERICAN MUSIC SUPPLY	8/17/00	2,980	2,980 5 MO S/L	2,980	0
58	CANON 2020 COPY MACHINE TENT	8/24/00 5/07/01	869 3,270	869 3 MO S/L 3,270 5 MO S/L	869	Ŏ.
59	HP COMPUTER	2/05/01	1,375	1,375 5 MO S/L	3,270 1,375	0
60 61	PALM PILOTS COMPUTER FOR OUTREACH	6/19/02 9/19/01	5,374 3,236	5,374 5 MO S/L	5,374	0
62	DIGITAL MOVIE CAMERA 1	0/30/01	3,236 3,769	3,236 5 MO S/L 3,769 5 MO S/L	3,236 3,769	0
63	LIGHTING	7/23/01	4,500	4,500 5 MO S/L	4,500	Ó
64 65	SKATE PARK RAMPS RANCILIO ESPRESSO MACHINE	1/06/03 1/10/03	200,662 6,400	200,662 10 MO S/L	110,364	20,066
66	LARGE RANCHILIO COFFEE GRINDER	1/10/03	700	6,400 10 MO S/L 700 7 MO S/L	3,520 550	640 100
	3 COMPARTMENT SINK 2 GRINDERS	1/10/03	796	796 10 MO S/L	438	79
70		1/10/03	1,236	1,236 5 MO S/L	1,236	0
						1

ROCKTOW ROCKETOWN OF MIDDLE TENNESSEE 62-1571573 Federal Asset Report FYE: 6/30/2009 Form 990, Page 1

		Date		Bus Sec Basis			
Asset	Description	In Service	e Cost	% 179Bonus for Depr	PerConv Meth	Prior	Current
69	2 COFFEE BREWERS	1/10/03	1,099	1,099	5 MO S/L	1,099	0
70	16 MOTOROLA WALKIE TALKIES	1/10/03	2,364	2,364	3 MO S/L	2,364	0
71 72	SOUND & LIGHTS SYSTEM USED SCISSOR LIFT	1/10/03	223,308	223,308		122,820	22,330
73	PROTECTIVE PADS FOR THE PAD REN	1/10/03	1,500	1,500	2 MO S/L	1,500	0
74	WASHER & DRYER	1/06/03	1,840 570	1,840 570	2 MO S/L 5 MO S/L	1,840 570	0
75	COPY MACHINE FOR SKATE PARK	1/06/03	908	908	3 MO S/L	908	ŏ
76	GREEN ROOM TV/VCR	1/10/03	513	513	5 MO S/L	513	ŏ
77	60" TV (DONATED)	2/01/03	2,000	2,000	5 MO S/L	2,000	ŏ
78	PHONE SYSTEM	1/01/03	11,000	11,000	7 MO S/L	8,643	1,571
79	LOUDSPEAKERS & MONITOR	9/10/03	2,006	2,006	5 MO S/L	1,939	67
80	STAGE CURTAIN	9/10/03	775	775	5 MO S/L	749	26
81	2 EV MTS-IFULL RANGE CABS	6/17/04	884	884	5 MO S/L	707	177
83	INFORMUS TECHNOLOGY SKATE PARK RAMP IMPROVEMENTS	11/01/03	8,000	8,000	5 MO S/L	7,467	533
84	RAMP IMPROVEMENTS	5/20/04 6/30/05	4,147 6,368	4,147	10 MO S/L	1,693	415
83	MICROPHONES (6) CABLES	9/30/04	1,298	6,368 1,298	5 MO S/L 5 MO S/L	3,821 974	1,274 259
86	COPY MACHINE SKATE PARK	10/09/04	534	534	5 MO S/L	400	107
87	MICROSOFT XP	1/11/02	974	974	5 MO S/L	974	107
88	FUNDRAISING SOFTWARE	11/05/01	2,443	2,443	5 MO S/L	2,443	ŏ
89	FUNDRAISING SOFTWARE	12/21/01	2,227	2,227	5 MO S/L	2,227	Ŏ
90	MICROSOFT RETAIL MGMT SOFTWAF		5,015	5,015	3 MO S/L	5,015	0
91	PC CHARGE SOFTWARE	1/10/03	1,425	1,425	3 MO S/L	1,425	Ō
92	QUICKBOOS PROFESSIONAL 2003	9/10/02	459	459	3 MO S/L	459	Ō
93	NSPIRE SOFTWARE NON PROFIT BOOKS	1/01/03	500	500	5 MO S/L	500	0
95		6/02/05 11/09/05	1,311	1,311	3 MO S/L	1,311	0
96	DELL LAPTOP	6/20/06	1,222 855	1,222 855	5 MO S/L 5 MO S/L	652 342	244 171
97	SKATE PARK IMPROVEMENTS	8/31/05	1,154	1,154	5 MO S/L	654	231
98	BOX TRUCK	5/01/06	2,500	2,500	5 MO S/L	1,083	500
99	BOX TRUCK	6/01/06	2,500	2,500	5 MO S/L	1,042	500
100	BOX TRUCK	6/30/06	2,000	2,000	5 MO S/L	800	400
101	AIRCONDITIONING UNIT SKATEPARK		23,809	23,809	10 MO S/L	2,579	2,381
102 103	NEW COUNTERS	6/30/07	728	728	5 MO S/L	146	145
103	Delta Stage Lighting Server HV3P	4/01/08 5/28/08	1,668 3,650	1,668	5 MO S/L 5 MO S/L	83 61	334
	Imac Computer 20/2.4/	6/30/08	1,199	3,650 1,199	5 MO S/L 5 MO S/L	0	730 240
106	Indoor Security	8/08/07	2,100	2,100	7 MO S/L	275	300
107	Jands Hog500-Lighting Board	12/31/07	4,050	4,050	7 MO S/L	289	579
108	Delta Stage Lighting SN F07516	4/15/09	4,790	4,790	7 MO S/L	Ö	171
	Total Other Depreciation		4,325,480	4,325,480		844,612	124,817
	romi Omei Depiecianon		4,323,460	4,323,400			124,017
	Total ACRS and Other Depreci	ation	4,325,480	4,325,480	•	844,612	124,817
				.,,			7,7,7
	Grand Totals		4,325,480	4,325,480		844,612	124,817
	Less: Dispositions		0	0		0	. 0
	Less: Start-up/Org Expense		0	0		<u>0</u> _	0
	Net Grand Totals		4,325,480	4,325,480		844,612	124,817

ROCKTOW ROCKETOWN OF MIDDLE TENNESSEE Federal Statements

FYE: 6/30/2009

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

Description	Total Expenses		Program Service		Management & General		Fund Raising	
OTHER SUPPLIES	\$	33,617	\$	31,720	\$	1,663	\$	234
TAXES AND LICENSES		22,804	-	19,088		3,416		300
FOOD AND ENTERTAINMENT		18,742		13,171		2,140		3,431
MARKETING AND ADVERTISING		10,674		6,173		98		4,403
BANK FEES		6,074		·		6,059		15
GIVEAWAYS/INCENTIVES		4,572		4,294		130		148
AUTOMOBILE		4,531		4,318		70		143
COMPUTER SOFTWARE/HARDWAR		4,394		160		4,234		
TUITION AND TRAINING		3,899		15		1,888		1,996
GIFTS		3,716		1,711		998		1,007
DUES & SUBSCRIPTIONS		3,578		1,533		1,383		662
MISCELLANEOUS		3,368		1,076		2,292		
CASH OVER (SHORT)		-383				-383		
BAD DEBT EXPENSE		-822						-822
TOTAL	\$	118,764	\$	83,259	\$	23,988	\$	11,517