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)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No 1545-0047

Α	For the	e 2006 calenda	r year, o	r tax year beginning	7/1/2006	, and	d ending		6/30/2007	
В	Check	ıf applicable	Please	C Name of organization				D Emp	loyer identification	n number
Ш	Addres	s change	use IRS	Maury County Senior Citizer	is, Inc.			62-100	4235	
	Name o	change	label or print or	Number and street (or P O box if	mail is not delivered to	street address)	Room/suite		hone number	
Ħ	Initial re	-	type.	DO B'000			•			
H	iiilidai 10	10111	See Specific	PO Box 993					88-9595	
Ш	Final re	tum	Instruc-	City or town	State or	country	ZIP + 4	F Acco	unting method:	X Cash Accrual
	Amend	ed return	tions	Columbia	TN		38402-0993		Other (specify)	
	Applica	tion pending	Section	on 501(c)(3) organizations and 4947					ole to section 527 o	manizations
				must attach a completed Schedule					return for affiliates?	• — —
G	Website	e: ► N/A			•	·		-	number of affiliates	
							╗ '′ .	•		
	Organia	ation type (check	copy opp)	► X 501(c)(3) ◀ (in	sert no) 4947(a)	(1) []	, , ,	all affiliates		Yes No
-	Organiz	audii type (check					_ (" "	vo, allacri	a list. See instruction	ons)
	Check h		If the orga	anization is not a 509(a)(3) supporting	organization and its g	ross	H(d) is th	ıs a separa	te return filed by ar	
				\$25,000 A return is not required, but	if the organization cho	oses	cove	ered by a gi	roup ruling?	Yes X No
	to me a i	return, be sure to t	me a comp	iete return			I Grou	ıp Exempti	on Number 🕨	
							M Che	ck ▶	if the omanizat	tion is not required
L	Gross i	receipts: Add lin	nes 6b, 8t	o, 9b, and 10b to line 12		542,31	1		3 (Form 990, 990-E	
Pa		• • • • • • • • • • • • • • • • • • • •		ses, and Changes in Net	Assats or Fund		- , , , , , , , , , , , , , , , , , , 			
ı e						J Daiances	(See the li	ISHUCH	ons.)	
	1			grants, and similar amounts		1.1		15 - 8	<u></u>	
						1a		0		
				t (not included on line 1a).		1b	1	18,656	우리	
				ort (not included on line 1a).		1c		7,667		
				utions (grants) (not included	·	1d		32,163 (§	4.24	
	1 _			hrough 1d) (cash \$	308,486 nonca			.)	1e	308,486
	2			enue including government f				L	2	134,025
	3	Membership	dues ar	nd assessments				ļ	3	0
	4	Interest on s	avings a	and temporary cash investme	ents			· L	4	1,185
	5			st from securities				L	5	0
_						6a			``	
0	þ	Less: rental	expense	s		6b			Large St.	
2007				(loss). Subtract line 6b from	line 6a			· . _	6c	0
NUV 1 € 30 N	7			come (describe					7	0
	Ва			sales of assets other	(A) Securities		(B) Other	:		
<u>چ</u> ج		tnan invento	ry		·	0 8a		8,114	\$ 2	
\supseteq	D			asis and sales expenses .		0 8b	_	0	¹ 4. →	
_		Gain or (loss				0 8c		8,114	i e	
\supset				ombine line 8c, columns (A)					8d	8,114
N L	9			vities (attach schedule) If any a			re -	إا لا		
	a			ncluding \$				الارتان		
₹	L			d on line 1b)		9a 9b		0,509		
کے				from special events. Subtrac				6,056	~ ··~	4.450
ע				tory, less returns and allowa		1 1		. 0	9c	4,453
				sold		10a 10b			. 4	
				om sales of inventory (attach sch			100		0.0	0
	11				•		ie ioa		10c	0
	12									<u></u>
				lines 1e, 2, 3, 4, 5, 6c, 7, 8d,					12	456,263
Ś	13			om line 44, column (B)) .		RECEIV	ED		13	435,796
Expenses	14			neral (from line 44, column (~ <i>))</i> · · • · · <u>- · · </u>				14	0
ě	15			e 44, column (D))		007.010			15	0
ü	16			s (attach schedule)		OCT 3 1 2	007		16	0
	17			lines 16 and 44, column (A		· · · · ·	· · · · · · · · · · · · · · · · · · ·		17	435,796
Net Assets	18	Excess or (de	eticit) foi	the year. Subtract line 17 fr	om line 12	CDEN			18	20,467
Ası	19	Net assets of	r tund ba	alances at beginning of year	(from line 73, col	WACHLEAD)IN,	<u>U.I.</u> .		19	117,607
έ	20			assets or fund balances (at					20	0
	21	Net assets or	r fund ba	alances at end of year. Comb	ine lines 18, 19,	and 20	<u> </u>		21	138,074

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. (HTA)

Form 990 (2006)

Form 990 (2006) Maury County Senior Citizens, Inc. 62-1004235 Part II Statement of All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.) **Functional Expenses** Do not include amounts reported on line

	6b, 8b, 9b, 10b, or 16-of Part I		(A) Total	(e) Program	and general	(D) Fundraising
22 a	Grants paid from donor advised funds (attach schedule)				÷ ,	
	(cash \$0 noncash \$0)				ا ا	
			_	_	:	
	If this amount includes foreign grants, check here	22a	0	0	The second second	130 .
22 b	Other grants and allocations (attach schedule)				k 12 12#	Martin British
	(cash \$ 5,539 noncash \$ 0)) , 	
	If this amount includes foreign grants, check here ▶	22b	5,539	5,539		
23	Specific assistance to individuals (attach			- 1		
	schedule)	23	5,663	5,663	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	[/4.5 Y] T
24	Benefits paid to or for members (attach				Silver Silver	
	schedule)	24	ol			, , , , , , , , , , , , , , , , , , ,
25 a	Compensation of current officers, directors,					
	key employees, etc. listed in Part V-A (attach					
	schedule)	25a	27,125	27,125	o	C
b	Compensation of former officers, directors,		-			
	key employees, etc. listed in Part V-B (attach					
	schedule)	25b	ol	0	l o	l
С	Compensation and other distributions, not included above, to					
	disqualified persons (as defined under section 4958(f)(1)) and					
	persons described in section 4958(c)(3)(B) (attach schedule)	25c	223,957	223,957	o	C
26	Salaries and wages of employees not included					
	on lines 25a, b, and c	26	ol			
27	Pension plan contributions not included on					
	lines 25a, b, and c	27	o			
28	Employee benefits not included on lines		-			
	25a ~ 27	28	ol			
29	Payroll taxes	29	0			
30	Professional fundraising fees	30	0			
31	Accounting fees	31	8,577	8,577		
32	Legal fees	32	0			
33	Supplies	33	11,612	11,612		
34	Telephone	34	7,530	7,530		j
35	Postage and shipping	35	0			
36	Occupancy	36	32,419	32,419		
37	Equipment rental and maintenance	37	91,547	91,547		
38	Printing and publications	38	14,296	14,296		
39	Travel	39	3,928	3,928		
40	Conferences, conventions, and meetings	40	0			
41	Interest	41	0			
42	Depreciation, depletion, etc. (attach schedule)	42	2,934	2,934	0	0
43	Other expenses not covered above (itemize):					
а	Bank service charges	43a	245	245	o	o
	Health program promotion	43b	424	424	0	0
С		43c	0	0	0	0
d		43d	0	0	0	0
e		43e	0	0	0	0
f		43f	0	Ö	ol	0
g		43g	0	0	0	0
44	Total functional expenses. Add lines 22a					
	through 43g. (Organizations completing		}			1
	columns (B)-(D), carry these totals to lines				ļ	ı
	13–15)	44	435,796	435,796	o	0
laint	Costs. Check ► X if you are following SOP 98-2.		.551.501	.22,.30		<u>-</u>
			remarked in (D) D			Yes X No
	point costs from a combined educational campaign and fundraising sol					IES VINO
f "Yes,	enter (i) the aggregate amount of these joint costs		(ii) the amount a			;
iii) the	amount allocated to Management and general \$, and	d (iv) the amount	allocated to Fund	raising \$	
						- 000 (0000)

Form 990 (2006)

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

W	hat is the organization's primary exempt purpose? ► Operate senior center	Program Service Expenses
of	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) ganizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others.)
а	Senior Citizens Center: Operate senior centers in Maury County including transportation, meals, exercise, health promotion, information and advice, and other programs for the elderly. (Grants and allocations \$ 5,539) If this amount includes foreign grants, check here	435,796
b		
С		
d		
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶	
е	Other program services (attach schedule) (Grants and allocations \$ 0) If this amount includes foreign grants, check here	. 0
f	Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	435,796

62-1004235

	LIV	Balance Sheets (See the Instructions.)					
	Note:	Where required, attached schedules and amounts with column should be for end-of-year amounts only		scription	(A) Beginning of year		(B) End_of_year
	45	Cash—non-interest-bearing			36,522	45	28,013
	46	Savings and temporary cash investments			75,159		96,557
	ł				**		
		Accounts receivable	47a	0		·	
	þ	Less: allowance for doubtful accounts	47b	0	0	47c	
	40.5	Diadese mesticalis	40				
			48a	0	•	<u> </u>	
	49		48b	0	0	· · · · · ·	
	1	Grants receivable		49			
	30 a	key employees (attach schedule)			0	50a	c
	h	Receivables from other disqualified persons (as defined				30a	
	_ ~	4958(f)(1)) and persons described in section 4958(c)(3)				50b	
Assets	51 a	Other notes and loans receivable (attach	(D) (alia	arsaleddie)		300	
Š	" "	•	51a	ol			
	Ь	Less: allowance for doubtful accounts			0	51c	C
	52	Inventories for sale or use				52	<u> </u>
	53	Prepaid expenses and deferred charges				53	
	54 a	Investments—publicly-traded securities			0	54a	(
		Investments—other securities (attach schedule).	=	= = 1	0	54b	
		Investments—land, buildings, and				7	
	1	equipment: basis	55a	o		P.	
	ь	Less: accumulated depreciation (attach					
		schedule)	55b	o	0	55c	C
	56	Investments—other (attach schedule)			0	56	C
	57 a	Land, buildings, and equipment: basis	57a	81,081		G .	
	b	Less: accumulated depreciation (attach				· .	
		schedule)	57b	63,698	8,849		17,383
	58	Other assets, including program-related investme			0	58	0
	50	(describe •)	100 500	50	444.050
	59 60	Total assets (must equal line 74). Add lines 45 th Accounts payable and accrued expenses			120,530		141,953
	61	Grants payable	2,923	60 61	3,879		
	62	Deferred revenue			62		
10	63	Loans from officers, directors, trustees, and key e				, 	
ities		schedule)			0	63	C
Liabili	64 a	Tax-exempt bond liabilities (attach schedule)				64a	0
Ï		Mortgages and other notes payable (attach sched				64b	C
	65	Other liabilities (describe			0	65	C
	66	Total liabilities. Add lines 60 through 65	<u> </u>		2,923	66	3,879
	Orga	nizations that follow SFAS 117, check here ▶	X and	d complete lines			
		67 through 69 and lines 73 and 74.	_				
88	67	Unrestricted			38,900		67,655
Ē	68	Temporarily restricted			78,707		70,419
aga	69	Permanently restricted				69	
ᄝ	Orga	nizations that do not follow SFAS 117, check h	ere	▶∐ and		`.,	
ᆵ		complete lines 70 through 74.				~	
or I	70	Capital stock, trust principal, or current funds .		P-		70	
Net Assets or Fund Balances	71	Paid-in or capital surplus, or land, building, and e			·····	71	
SS	72 73	Retained earnings, endowment, accumulated incommentation and the second		-		72	
	13	70 through 72. (Column (A) must equal line 19 ar	_	•			
Ź		equal line 21)			117,607	73	138,074
	74	Total liabilities and net assets/fund balances.			120,530		141,953

Part I	/-A Reconcilia			tatements With	-	urn (See the N/A
а	Total revenue, gain	ns, and other support pe	r audited financial state	ments		а	
b		on line a but not on Part				;	
1		ns on investments				- ` ` `	
2		and use of facilities				[`.	ļ
3		r year grants		— —	3	(2)	
4	Other (specify):					1.	
	A del Consultation					4	
_	Add lines by throu	gh b4	• • • • • • • •			<u>b</u> _	0
C		m line a				C	0
d 1		on Part I, line 12, but no ses not included on Part		1.	и	1	
2	O41 (: 6)			<u> </u>	<u> </u>	5.	
2	Other (specify).				12 0		
	Add lines d1 and d	i2		-		d	· 0
е	Total revenue (Pa	art I, line 12). Add lines c	and d		· · · · · · · · · •	e	0
Part I		ition of Expenses per					<u>' </u>
a		d losses per audited fina				a	1 10/2
b		on line a but not on Part				-	
1		and use of facilities	-		o1	ر پین	
2		ents reported on Part I, I				 	}
		n Part I, line 20				. ``	
						`.;	
				L	04		
	Add lines b1 throu	gh b4				b	О .
С	Subtract line b from	m line a				С	0
d	Amounts included	on Part I, line 17, but no	t on line a:				
1	Investment expens	ses not included on Part	I, line 6b	<u>c</u>	ı1 <u> </u>	13.	
2	Other (specify):					<u> </u>	
				l _	12 0	3	
		12				d	0
ее		Part I, line 17). Add lines				е	0
Part V	-A Current Of	ficers, Directors, Tru	stees, and Key Emp	oloyees (List ead	ch person who was ar	offic	er, director,
	trustee, or ke	ey employee at any time	during the year even if	they were not co	mpensated.) (See the	instr	uctions.)
	(A) Name ar	nd address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employments benefit plans & deferrence compensation plans	ed	(E) Expense account and other allowances
Name	Mary K Fleeman	Str PO Box 993	Title Director				
City	Columbia	ST TN ZIP 38402	Hr/WK40	27,125		0	0
Name	Bruce Scotten	Str PO Box 264	Title Chairperson				
City	Spring Hill	ST TN ZIP 37174	Hr/WK2	.l o		0	l o
	Paul Sands	Str 8158 Golf Club Lane					
City	Mt Pleasant	ST TN ZIP 38474	Hr/WK 1	O		0	0
	Sue Greenfield	Str 1701 Logan Drive	Title Secretary				
	Columbia	ST TN ZIP 38401	Hr/WK 1	l o		0	0
Name		Str	Title				
City		ST ZIP	Hr/WK	ĺ			
Name	N/A	Str	Title				
City		ST ZIP	Hr/WK	i			
Name	N/A	Str	Title				
City	: 2: :	ST ZIP	Hr/WK				
Name	N/A	Str	Title				
City	. 712	ST ZIP	Hr/WK])
Name	Ν/Δ		Title				
		Str ZIP	Hr/WK				
City Name			Title				
		Str 710	Hr/WK				
City		ST ZIP	111/441/	L			Form 990 (2006)
							1 0/111 2 2 2 (2000)

	wadiy County Selliol Citizens, Inc			62-1004235			Page b
Part	V-A Current Officers, Directors, Tru	stees, and Key Em	ployees (continu	red)		Yes	No
75 a	Enter the total number of officers, directors, an meetings	d trustees permitted to	vote on organizat	ion business at board			
ь	Are any officers, directors, trustees, or key emp	ployees listed in Form	990 Part V-A or h	nighest companyated		- 3	
_	employees listed in Schedule A, Part I, or high	est compensated profe	essional and other	independent			12.5
	contractors listed in Schedule A, Part II-A or II-	B. related to each other	er through family o	r business		· ·	1
	relationships? If "Yes," attach a statement that	identifies the individua	als and explains the	e relationship(s)	75b	and the same of	×
С	Do any officers, directors, trustees, or key emp				Jug€ -	,	200
	compensated employees listed in Schedule A,	Part I or highest com	nensated profession	anal and other			1
	independent contractors listed in Schedule A, I	Part II-A or II-B receive	e compensation fro	om any other			
	organizations, whether tax exempt or taxable, t	hat are related to the	organization? See	the instructions for	· -,	,	2.1
	the definition of "related organization."				75c	2	X
	If "Yes," attach a statement that includes the in	formation described in	the instructions.		,• •		7
d	Does the organization have a written conflict of	interest policy?			75d	X	
	V-B Former Officers, Directors, Trustees,	and Key Employees 1	hat Received Co	mpensation or Other Bene	fits (If	any for	mer
	officer, director, trustee, or key employee						
	person below and enter the amount of co						
			(C) Compensation	(D) Contributions to employee		Expens	
	(A) Name and address	(B) Loans and Advances	(if not paid,	benefit plans & deferred		int and o	
	N/A		enter -0-)	compensation plans	all	owances	<u>s</u>
	N/A Str			1			
City	ST ZIP						
City							
	N/A Str						
City							
Name	N/A Str						
City		_					
Name	N/A Str						
City							
Name	N/A Str			1			
City			<u>.</u>				<u> </u>
Name							
City Name							
City							
Name							
City							
	N/A Str				-		
City							
Part \	Other Information (See the instruction	ons.)				Yes	No
76	Did the organization make a change in its activi	ties or methods of con	ducting activities?	If "Yes," attach a		. , , ,,,	
	detailed statement of each change				76		Χ
77	Were any changes made in the organizing or go	overning documents b	ut not reported to	the IRS?	77		
	If "Yes," attach a conformed copy of the change	es.			1/3/12	* 4	400
78 a	Did the organization have unrelated business g					ار کرت الیست حددا	, 10
	this return?				78a		X
	If "Yes," has it filed a tax return on Form 990-T				78b	N/A	
79	Was there a liquidation, dissolution, termination	, or substantial contra	ction during the ye	ar? If "Yes," attach) '14 r (''')	1 }	ا عشد ما عشد
	a statement				79		X
	Is the organization related (other than by associ]		<i>;</i>
	common membership, governing bodies, truste				1		ا و ا پایجاد استها
	organization?				80a]	X
b	If "Yes," enter the name of the organization		<u></u>	<u></u>			٠, _
		and check whether	it is exempt of	or nonexempt		;	
31 a	Enter direct and indirect political expenditures. (See line 81 instruction	ns.)	81a 0	5		
	Did the organization file Form 1120-POL for this	•			81b		X

b Gross receipts, included on line 12, for public use of club facilities 875 501(c)(12) orgs. Enter: a Gross income from members or shareholders b Gross income from other sources. (Do not net al emounts due or paid to other sources against amounts due or received from them.) 888 at any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part IX b At any time during the year, did the organization of tax imposed on the organization during the year under: section 4911 ▶ IN/A is section 4912 ▶ IN/A is section 4915 ▶ IN/A b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ IN/A d Enter: Amount of tax imposed on the organization in a party to a prohibited tax shelter transaction? f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? 89e	_		Wilder County Serior Citizens, Inc. 62-1004235			Page /	
or at substantially less than fair rental value? b if Yes, 'you may indicate the value of these items here. Do not include this amount s revenue in Part I or as an expense in Part II. (See instructions in Part III) 33 a Did the organization comply with the disclosive requirements for returns and exemption applications? 53 bid the organization comply with the disclosive requirements retains to quit any quo contributions? 54 a Did the organization solicit any contributions or grifts that were not tax deductible? 54 bid Yes, and the organization include with every solicitation an express statament that such contributions or grifts were not tax deductible? 5501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? 5501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? 5501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? 5501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? 5501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? 5501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? 5501(c)(4), (5), or (6) organizations. a Were substantially all dues nondecides be seen organization received a wavelier for proxy tax owed for the prior year c Dues, assessments, and similar amounts from members 6501(c)(2) orgas, assessments, and similar amounts from members 6501(c)(2) orgas, and any opticitical expenditures (in ebd. sign.) 6501(c)(2) orgas, and any opticitical expenditures (in ebd. sign.) 6501(c)(2) orgas, and any opticitical expenditures (in ebd. sign.) 6501(c)(2) orgas, and any opticitical expenditures (in ebd. sign.) 6501(c)(2) orgas, and any opticitical expenditures (in ebd. sign.) 6501(c)(2) orgas, and any opticitical expenditures (in ebd. sign.) 6501(c)(3) and 501(c)(4) orgas, and capital contributions included on line 12. 6501(c)(3) and 501(c)(4) orgas, a	<u>'a</u>	3	Other Information (continued)		Yes	No	
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501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12. B6a B6ross receipts, included on line 12, by public use of club facilities. B6b B73 S01(c)(12) orgs. Enter: a Gross income from members or shareholders. B7a B7b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.). B7b				85h	N/A		
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b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or ceived from them.) 87b 88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX. b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI. b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI. b 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction and a statement explaining each transaction and 4958 ▶ N/A d Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ N/A d Enter: Amount of tax on line 89c, above, reimbursed by the organization a party to a prohibited tax shelter transaction? 7 All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? 89f X 9 For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.) 1		b		\$ 5 1 35	1.7		
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88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI. b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI. b 39 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ N/A. section 4912 ▶ N/A. section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction. c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ N/A d Enter: Amount of tax imposed on the organization and 4958 ▶ N/A d Enter: Amount of tax on line 89c, above, reimbursed by the organization a party to a prohibited tax shelter transaction? e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? 9 For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.). 15 The books are in care of ▶ Name A Plus Bookkeeping & Payroll Services LLc Telephone no. ▶ (931) 840-5500 Located at ▶ 10.4 W 5th St. City Columbia STIN ZIP + 4 ▶ 38401 b At any time during the calendar year,		b		÷1.	3		
At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-3 and 301.7701-32 if "Yes," complete Part IX. b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI. b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI. b 361(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ N/A				17.00		(33.5)	
partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX 88a X b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI 88b N/A 89 a \$01(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 N/A section 4955 N/A 501(c)(3) and \$01(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax on line 89c, above, reimbursed by the organization a party to a prohibited tax shelter transaction? f All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 10 a List the states with which a copy of this return is filed TN b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.). 11 a The books are in care of Name A Plus Bookkeeping & Payroll Services Ltc. Telephone no. (931) 840-5500 Located at 104 W 5th St. City Columbia STTN ZIP + 4 38401 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of	88	а	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or	, 33,	,		
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9 For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?				
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at any time during the year?							
b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)			at any time during the year?	89g	N/A	· ·	
instructions.). 15 16 17 18 19 18 19 19 19 19 19 19 19	90 :		List the states with which a conv of this return is filed. TN				
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over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?							
account)?	ı			ſ	Vac	No	
If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank					162		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			reme in a company of the company of	910		×	
				- ,	,	: : -	
			and Financial Accounts.	· 1	<u>,</u>	. ` '	

	Other Information (continued)			- 1 - 645 - 11-4	01-10	Yes No
С	At any time during the calendar year, did the o If "Yes," enter the name of the foreign country					Ic X
-92				4044 Objects	_	
92	Section-4947(a)(1) nonexempt charitable trust					▶ ∟
) 4 N	and enter the amount of tax-exempt interest re			year	.▶ 92 N/A	
art \						/E)
	Enter gross amounts unless otherwise	Unrelated busin	ess income	Excluded by section	n 512, 513, or 514	(E) Related or
ndica		(A)	(B)	(C)	(D)	exempt function
93	Program service revenue	Business code	Amount	Exclusion code	Amount	income
	Van fares			ļ		20,18
b	Contract van fares			ļ		112,84
C	Special meals and other center fees			-		99
d				ļ		_
e	Adadasa (Madisarda arraga)	-				
1	Medicare/Medicaid payments					
g o4	0 101					
94 05	Membership dues and assessments			14	4.405	
95 06	Interest on savings and temporary cash investments .			14	1,185	
96 97	Dividends and interest from securities	1 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		A. 3.3	3. 44.	7.00
	Net rental income or (loss) from real estate:	Share the state of the	数1/ ぎゃ 1/2 1/2 1/2	(Approved to the first of the	ि द्वित्र शुक्तः १८५	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	debt-financed property			<u> </u>		
98	not debt-financed property		-			
90 99	Net rental income or (loss) from personal property Other investment income			 	<u> </u>	
99 00				40	0.444	
00 01	Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events			18	8,114	
02	Gross profit or (loss) from sales of inventory			12	4,453	
03					0	
b	Other revenue. a		0		0	
C			0		0	
d			0	 	0	
e			0		0	
04	Subtotal (add columns (B), (D), and (E))				13,752	
05	_			•		147,77
	Line 105 plus line 1e, Part I, should equal the ai					141,11
art V				irnosas (Saa th	e instructions	1
ine N						
♥	of the organization's exempt purposes (other	· ·	•	•	to the accomplish	ment
3a	Income from program services essential to					
	and to provide services to indigent persons.	oo vor experience no	paid by grant	dria domanono		
3b	See explanation for line 93a					
c	See explanation for line 93a	···· - · · · · · · · · · · · · · · · ·				
art I)		bsidiaries and D	isregarded F	Entities (See th	e instructions)	
	(A)	(B)	10.034.404	1		(E)
	Name, address, and EIN of corporation,	Percentage o	f	(C)	(D)	End-of-year
	partnership, or disregarded entity	ownership inter	l Matui	e of activities	Total income	assets
A			%		0	
			%		0	
			%		0	
		· · · · · · · · · · · · · · · · · · ·	%		0	
irt X	Information Regarding Transfers A	ssociated with I		nefit Contracts	(See the instru	
	<u> </u>					Yes X N
	d the organization, during the year, receive any funds, direct		•		7	= =
	d the organization, during the year, pay premiur	ns, directly or indire	ctiv. on a pers	onal benefit cont	ract? I	Yes X N

	$\Delta \Delta \Delta \Delta$	(2006)
-nm	4411	1/(1115)

Maury County Senior Citizens, Inc.

32-1	იი	42	35

Page 9

Part	Information Regarding is a controlling organizat	Transfers To and From ion as defined in section	Controlled Entities. C	omplete only if the o	rganiz	ation
106	Did the reporting organization ma the Code? If "Yes," complete the	ike any transfers to a contr	olled entity as defined in se	ection 512(b)(13) of	Yes	No X
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	Amount	(D) of trans	
а		-				
b						
С		-				
	Totals					0
107	Did the reporting organization rec 512(b)(13) of the Code? If "Yes,"				Yes	No X
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	Amount	(D) of trans	ifer
a						
b			1000			
С						
	Totals	Change Statem Lingson		Control of the second	Tv	0
108	Did the organization have a bindir rents, royalties, and annuities des			ng the interest,	Yes	No X
Pleas Sign Here	Under penalties of penjury, I declare that I h and belief, it is true, correct, and complete	ave examined this return, including	accompanying schedules and state	of which preparer has any kr	nowledge	dge
Paid Prepare	Preparer's signature	Sotofle	Date Check if self- 10/22/2007 employed	Preparer's SSN or ≥ 269-52-8534		en Inst X)
Use On	ly if self-employed),	rfeld CPA 307, Columbia, TN 38402-0	807	EIN ► 62-1763 Phone no ► 931-388		
			· · · · · · · · · · · · · · · · · · ·		om 990	(SUDE)

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information—(See separate instructions.)

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

OMB No 1545-0047

Maury Coun	ty Senior Citizens, Inc.			62-1004235	<u> </u>
Part I	Compensation of the Five High (See page 2 of the instructions.				and Trustees
(a) Name	and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None					
Total number	of other employees paid over \$50,000	None	EV MARKET		(\$P) 网络克尔斯克
	Compensation of the Five High				
	(See page 2 of the instructions. I				
(a) Nar	ne and address of each independent contractor i		T .	e of service	(c) Compensation
None	and date address of death mapperson contractory		(b) Typ	e di Scivice	(c) compensation
Total number professional se	of others receiving over \$50,000 for ervices	None		All Marie Control	
Part II-B	Compensation of the Five High (List each contractor who perform firms. If there are none, enter "No	ned services other that	n professional se		
(a) Nan	ne and address of each independent contractor p	paid more than \$50,000	(b) Type	e of service	(c) Compensation
None					
Total number \$50,000 for oth	of other contractors receiving over her services .	None	3 12 12	and the second	

Par	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities (Must equal amounts on line 38,			
	Part VI-A, or line i of Part VI-B.)	1		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、		
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
а	Sale, exchange, or leasing of property?	2a	_	X
b	Lending of money or other extension of credit?	2b	_	X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part V Form 990	2d	X	
е	Transfer of any part of its income or assets?	2e		X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation			
	of how the organization determines that recipients qualify to receive payments.)	3a		<u> </u>
b	Did the organization have a section 403(b) annuity plan for its employees?	3b	_	X
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3с		Х
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		X
b	Did the organization make any taxable distributions under section 4966?	4b		X
С	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		<u> </u>
đ	Enter the total number of donor advised funds owned at the end of the tax year			
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			
9	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year			

requirements of section 509(a)(3). Check the box that describes the type of supporting organization Type I Type II Type III-Functionally Integrated Type III-Other Provide the following information about the supported organizations. (See page 7 of the instructions.) (a) (b) (c) Type of Is the supported organization organization (described in lines 5 through 12 above or IRC section) Yes No Total	Part IV	Reason for Non-Private	Foundation S	Status (See pages 4 th	rough 7 of the	e instructions	.)
A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. A morganization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.) 11 a X an organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) 11 b A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) 12 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 chantable, etc., 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). (Also complete the Support Schedule in Part IV-A.) 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization. Type II	1 1					ox.)	
A Federal, state, or local government or governmental unit: Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(wi). Enter the hospital's name, city, and state City. ST. Country. An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) 11 a	6	A school. Section 170(b)(1)(A)(ii)	. (Also complete P	Part V.)			
A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state City ST Country An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.) 11 a X An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.) 11 b A community trust. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.) 12 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 charitable, etc., 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). (Also complete the Support Schedule in Part IV-A.) 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization Type II Type II Type III Type III-Functionally Integrated Type III-Other Provide the following information about the supported organizations. (See page 7 of the instructions.) (a) (b) Employer Information about the supported organization (secribed in lines 5 through 12 above or IRC section) Yes No No Total	7	A hospital or a cooperative hospit	tal service organiz	ation. Section 170(b)(1)(A)(ii	i).		
name, city, and state City ST Country	8	A Federal, state, or local government	nent or governmer	ntal unit Section 170(b)(1)(A)(v).		
(Also complete the Support Schedule in Part IV-A.) 11 a X An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) 11 b A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) 12 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 charitable, etc., 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). (Also complete the Support Schedule in Part IV-A.) 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization Type II	9	~			า 170(b)(1)(A)(เม		
170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) 11 b					rated by a goven	nmental unit Se	ction 170(b)(1)(A)(iv).
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 chantable, etc., 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). (Also complete the Support Schedule in Part IV-A.) 13	_				ovemmental unit	or from the gen	eral public. Section
receipts from activities related to its charitable, etc., 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). (Also complete the Support Schedule in Part IV-A.) An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization. Type II Type III Type IIII-Functionally Integrated Type III-Other Provide the following information about the supported organizations. (See page 7 of the instructions.) (a) (b) (c) (d) (e) Name(s) of supported organization(s) (b) (c) (d) (e) Is the supported organization listed in of support the supporting organization listed in the supporting organization is governing documents? Yes No Total • 0	11 b	A community trust. Section 170(b)(1)(A)(vi). (Also c	complete the Support Sched	lule in Part IV-A	.)	
requirements of section 509(a)(3). Check the box that describes the type of supporting organization Type II Type III Type III Type IIII-Functionally Integrated Type III-Other Provide the following information about the supported organizations. (See page 7 of the instructions.) (a) (b) (c) Type of organization (described in lines 5 through 12 above or IRC section) The supporting organization's governing documents? Yes No Total	_	receipts from activities related to of its support from gross investme	its charitable, etc. ent income and un	, functions—subject to certai irelated business taxable inc	n exceptions, ar ome (less section	nd (2) no more ton 511 tax) from	han 33 1/3% businesses
(a) Name(s) of supported organization(s) Remployer identification number (EIN) (EIN) (EIN) (EIN) (EIN) (Described in lines 5 through 12 above or IRC section) (Described in line		requirements of section 509(a)(3)	. Check the box th	nat describes the type of sup	porting organiza	tion	se meets the
Name(s) of supported organization(s) Employer identification number (EIN) Section Section Name(s) of supported organization(s) Employer identification number (EIN) Section Type of organization (described in lines 5 through 12 above or IRC section) Yes No Total.		Provide the following infe	ormation about	the supported organiza	ations. (See p	age 7 of the in	structions.)
Total	Name(s) o	• •	Employer identification	Type of organization (described in lines 5 through 12 above or IRC	is the su organization the sup organiz	upported on listed in oporting cation's	Amount
					Yes	No	
						ļ	
					-		
	Total		, , , , , ,			<u> </u>	0
		An organization organized and op	erated to test for p	oublic safety. Section 509(a)	(4). (See page 7	of the instruction	ns.)

Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Part IV-A Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. Calendar year (or fiscal year beginning in) (a) 2005 (b) 2004 (c) 2003(e) Total Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) 412,466 320,633 261.016 292,927 1,287,042 16 Membership fees received 0 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's chantable, etc., purpose . . . 16,340 16,340 Gross income from interest, dividends. amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 305 593 144 1.685 643 19 Net income from unrelated business activities not included in line 18 . 0 20 Tax revenues levied for the organization's benefit and either paid to it or expended on 0 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge . . , 8,301 30.717 7,135 6,796 8.485 22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets 23 Total of lines 15 through 22 436,246 268,455 301,821 329,262 1,335,784 419,906 329,262 1,319,444 24 Line 23 minus line 17 268,455 301,821 3,293 25 Enter 1% of line 23 . 4,362 2.685 3.018 26a 26,389 26 Organizations described on lines 10 or 11: Enter 2% of amount in column (e), line 24 Ź4, b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts 26b 319,444 c Total support for section 509(a)(1) test Enter line 24, column (e) 26c d Add Amounts from column (e) for lines. 18 26d 1,685 1,317,759 e Public support (line 26c minus line 26d total) . . . 26e f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26f Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2004) (2003) (2002) b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2003) (2002) (2005)(2004) c Add. Amounts from column (e) for lines: 27d 0 d Add: Line 27a total and line 27b total . . 0 e Public support (line 27c total minus line 27d total) 27e . . ▶ 27f f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) 0.00% g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) . . . 27g 0.00% h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 27h Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare

a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of

the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

Par	t V Private School Questionnaire (See page 9 of the instructions.)			age e
	(To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	7.55	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		-
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	7		*4)
32 a b	Does the organization maintain the following: Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	ýs	
С	basis?	32b		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	1 · ·	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.)			,
33	Does the organization discriminate by race in any way with respect to:	,		,
a	Students' rights or privileges?	33a		1.00m at 2.00m
D C	Admissions policies?	33b 33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs? Other extracurricular activities?	33g 33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			,
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			

4 05 of Rev. Proc. 75-50, 1975-2 C B. 587, covering racial nondiscrimination? If "No," attach an explanation

Pa	Lobbying Expenditures by Electi (To be completed ONLY by an eligi	ng Public Chari	ities (See page	10 of the instr	ructions.)	rage_
Chec	k ▶a ☐ if the organization belongs to an affiliated g			•	ited control" provi	sions apply.
	Limits on Lobbying	Expenditures			(a) Affiliated group totals	(b) To be completed for all electing
26	(The term "expenditures" means					organizations
36 37	Total lobbying expenditures to influence public opinion (36		
38	Total lobbying expenditures to influence a legislative both Total lobbying expenditures (add lines 36 and 37)			. 37		
39	Other exempt purpose expenditures			38	0	
40	Total exempt purpose expenditures (add lines 38 and 39			39	0	
41	Lobbying nontaxable amount Enter the amount from the			. 40	V	_ `` `` `` `` `` `` `` `` `` ``
71		bbying nontaxable	omount in	1		
		the amount on line		1 6.23		12 Company
		00 plus 15% of the		nn ``		
	Over \$1,000,000 but not over \$1,500,000 . \$175,0					
		00 plus 5% of the ex				h , 30
		,000				*
42	Grassroots nontaxable amount (enter 25% of line 41) .			42	0	C
43	Subtract line 42 from line 36 Enter -0- if line 42 is more			43	0	0
44	Subtract line 41 from line 38 Enter -0- if line 41 is more			44	0	0
				وْسور ا	化 银一树	
	Caution: If there is an amount on either line 43 or line 4	4, you must file Forr	n 4720.			
	4-Year Avera	aging Period Ur	nder Section 5	01(h)		
	(Some organizations that made a section	501(h) election do i	not have to comple	te all of the five co	olumns below.	
	See the instructions for	lines 45 through 50	on page 13 of the	instructions.)		
		Lobby	ing Expenditur	es During 4-Ye	ar Averaging P	eriod
	Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45	Lobbying nontaxable amount					0
46	Lobbying ceiling amount (150% of line 45(e))	这么么	The state of the s			0
47	Total lobbying expenditures					0
48	Grassroots nontaxable amount					0
40	Consequence - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				1. 26. Sec. 2. (1)	
49	Grassroots ceiling amount (150% of line 48(e)) .		· · · · · · · · · · · · · · · · · · ·	<u> </u>		0
50	Grassroots lobbying expenditures					0
Par	VI-B Lobbying Activity by Nonelecting	Public Charitie	 S			
	(For reporting only by organizations t	that did not comp	olete Part VI-A)	(See page 13	of the instruct	ions.)
During	the year, did the organization attempt to influence nation	nal. state or local led	islation, including	anv		_
	of to influence public opinion on a legislative matter or ref	_	_	,	Yes No	Amount
а	Volunteers				X	
b	Paid staff or management (Include compensation in expe	enses reported on lu	nes c through h.)		X	
С	Media advertisements				X	
d	Mailings to members, legislators, or the public				X	
е	Publications, or published or broadcast statements .				X	
f	Grants to other organizations for lobbying purposes			•	Х	
g						
	Direct contact with legislators, their staffs, government of		re body .		X	
h		fficials, or a legislativ			X	
	Direct contact with legislators, their staffs, government of	fficials, or a legislatives, lectures, or any o	other means		-	0

Part				page 13 of the instruction	าร and Relationships With Noncha ;.)	ritable		
51	Did th				ring with any other organization described in s	ection		
					527, relating to political organizations?	COBOII		
а				noncharitable exempt organiza			Yes	No
						51a(i)		X
	(ii)	Other assets				a(ii)		X
b		transactions:						
	(i)	Sales or exchanges of	of assets with a no	onchantable exempt organization	1	b(i)		×
						b(ii)		X
						b(iii)		X
						b(iv)		X
						b(v)		Х
						b(vi)		Х
С						С		X
d	of the	goods, other assets,	or services given	by the reporting organization. If	Column (b) should always show the fair marke the organization received less than fair marke e goods, other assets, or services received.	t value t value		
(a)	(b)		(c)	(d)			
Line	e no	Amount involved	Name of non	chantable exempt organization	Description of transfers, transactions, and sha	nng arrang	jement	s
			Not applicable					
	-							
				· · · · · · · · · · · · · · · · · · ·				
				- -				
	•	-						
								
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				·				
	descri	organization directly of bed in section 501(c) s," complete the follow	of the Code (othe	ed with, or related to, one or mo r than section 501(c)(3)) or in se		☐ Yes	X	No
		(a)		(b)	(c)			
		Name of organization) 	Type of organization	Description of relationship			
Not ap	oplicat	ole						
								
			 					
								

Form 4562

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

Attachment

See separate instructions. Sequence No 67 Attach to your tax return. Name(s) shown on return Business or activity to which this form relates Identifying number 990 Maury County Senior Citizens, Inc. 62-1004235 Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount. See the instructions for a higher limit for certain businesses 108,000 2 Total cost of section 179 property placed in service (see instructions). 3 Threshold cost of section 179 property before reduction in limitation . . . 3 430,000 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . 108,000 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 0 10 Carryover of disallowed deduction from line 13 of your 2005 Form 4562. 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2007. Add lines 9 and 10, less line 12 . . . Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed 14 15 16 Other depreciation (including ACRS). MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2006 18 If you are electing to group any assets placed in service during the tax year into one or more Section B - Assets Placed in Service During 2006 Tax Year Using the General Depreciation System (b) Month and (d) Recovery (c) Basis for (e) **(f)** (g) (a) Classification of property year placed depreciation Convention Method Depreciation in service (business/investment) deduction 3-year property **b** 5-year property 1,137 HY 200DB c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs h Residential rental MM S/L 27.5 yrs. property 27.5 vrs. MM S/L i Nonresidential real 39 vrs. MM S/L S/L property MM Section C - Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System 20 a Class life 739 HY S/L 7 b 12-year HY S/L 12 yrs c 40-year MM S/L 40 yrs. Part IV Summary (see instructions) 21 Listed property. Enter amount from line 28 . . . 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 2,934 Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

Line 1 (990) - Public Support and Contributions

Line 1a - Contributions to Donor Advised Funds	Cash	Non Cash
Line 1b - Direct public support 1 Contributions		1
10 Total	18,656	90
Line 1c - Indirect public support	7,667	
Line 1d - Government contributions (grants)	282,163	

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					i				Depreciation	30.198																					
other	expenses	0	0	0	Expense	of sale and	cost of	improve-	ments																						
Cost, other	basis and expenses					ner basis	field only)	Donated	value	30.198	1						_														
SS	SS	0	0	8,114		Cost or other basis	(Enter one field only)		Cost									-	_												
Gross	sales					_		Gross sales	price	8.114								-			_										
Totals:		Public Securities	Non-Public Securities	Other sales					pjos	6/30/2007								-							•						
		Public	Non-Public					Acquisition	method	donation																					
								Date	acquired	various																					
									Purchaser	Private individuals																					
						Check if	purchaser	is a	business																						
						gain/loss is	from sale of	non public	securities						·															_	
					Check If	gain/loss is	from sale	of public	secunties																						
									Description	Vehicles																					
									Index	_	2	~	٦	4	2	ď	7	æ	0	,	2	11	12	13	14	15	19	17	- 8	9	2 6

Line 9 (990) - Special Events and Activities

1 Special event name	Event A Trips	Event B Fashion Show	Event C Mule Day	All others Yard Sale		Totals
1a Number of special events	11	1	1	Spag Din Newsl 3		
2 Gross receipts 3 Less contributions	82,896	1,714	2,981	2,918	² —	90,509
4 Gross revenue	82,896	1,714	2,981	2,918	4	90,509
5 Less direct expenses	82,415	510	2,357	774	5	86,056
6 Net income or (loss)	481	1,204	624	2,144	6	4,453

<u>မ</u>
Citizens,
Senior
County
Maury

•	Relationshin	1								1											
5,539	Amoint away	5,539																			
	Foreign	7																			
	Zin code	38401																			
	S																				
	<u>2</u>	Columbia																			
	Address	1224 Trotwood Avenue																			
chedule	Grantee's name	otial																			
Line 22 (990) - Cash Grants Paid Schedule	Class of activity	Charitable																			
- Cas	Other grants and allocations	×																			
066)											-						-		-	_	
ne 22	Check box if grantee is a business	\dashv													$\frac{1}{2}$		_		$\frac{1}{2}$	\dashv	-
֓֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֡		-	7	ო	4	2	9	7	æ	6	10	11	12	13	4	15	16		8	9	2

<u>Li</u>	ne 23 (990) - Specific Assistance to Individuals	5,663
	Class of Activity	Amount
1	Specific assistance to low income elderly individuals with medical and dental expenses	3,374
2	Specific assistance to low income elderly individuals with air conditioners and fans	2,289
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		

Li	ne 57 (990) - Land, Buildings, and Ec	uipment				
	Land (net of any amortization)				Land (net of any	amortization)
•					Beginning	End
1				1 [L
2				2		
3				3		
4				4		
5				5		
6	Total land (net of any amortization)			6	0	0
	Buildings and equipment	Buildings and	equipment	Т	Accumulated of	lepreciation
		Beginning	End		Beginning	End
7	Leasehold improvements 7	47,899	47,899		41,192	42,309
8	Furniture and fixtures 8	21,714	33,182		19,572	21,389
9	9	21,117	00,102		10,072	1 .,000
10	10					
11	11					
12	12					
13	13					
14	14					
15	15		†			
16	16					
17	Total buildings and equipment 17	69,613	81,081		60,764	63,698
	Buildings and equipment (less accumulated depred			18	8,849	17,383
19	Total land, buildings and equipment	<u> </u>		19	8,849	17,383
				ĺ	Accumulated	
	Category or Item		Cost/Other Basis		Depreciation	Book Value
1	5 ,	1				
2		2				
3						
4		4				
5		5				
6						
7		7		1		
8						
9		9				
10						<u> </u>
11	Total	<u> . 11</u>	0		0	0

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Page-princh	Detail Report Next Year		6/30/2007		ury County S	Maury County Senior Citizens, Inc.	s, Inc.	62-1004235	4235							
Operation of the control of						81,082	0	0	81.082					60 764	2 934	63 69R
Table Tabl	Description	Date	Asset	Activity	Bus	一	$\overline{}$	Special	Recovery	\vdash	Į	Method	Con	Prior Accum	2006	2006
1291/1978 R.2 990 100.00% 2,150 0 2,150 10 SL HY 2,150 0 0 0 0 0 0 0 0 0	or Property	Service	8 8 9		Use %			Allowance	_		Period Wears)		Vention	Deprec , 179. Bonus	Current	Accum
difficulty (221/1979) R.2. 999 (100.00%) 31,477 (0 0 0 2142) 5 S. HY 31,479 (0 0 0 14)400 (1 1,221/1979) R.2. 999 (100.00%) 1,500 (0 0 150 14)70 (1 1,500 14) (1	ing Imp	12/31/1978	R-2		100.00%		0	0	ł			S	Ì	2.150	0	2.150
Validações Val	Additions	12/31/1979	R-2		100 00%	31,470	0	0	31,470			S	¥	31,470	0	31,470
March Marc	age Building	12/31/1980	R-2		100.00%	2,112	0	0	2,112			SL	¥	2,112	0	2,112
14/30/2002 R. 2 999	ehold Improvements	7/1/1992	R-2		100.00%	1,500	0	0	1,500			SL	¥	1,500	0	1.500
4/30/2003 R-2 990 100 00% 500 0 500 5 H 317 100 sk Oth Fum 12/31/1978 F-11 990 100 00% 426 0 5 H 317 100 sk Oth Fum 12/31/1978 F-11 990 100 00% 426 0 426 10 SL HY 375 0 stading 1/23/1981 F-11 990 100 00% 436 0 375 10 SL HY 375 0 rem 7/1/1882 F-11 990 100 00% 315 0 0 375 10 SL HY 375 0 rem 7/1/1882 F-11 990 100 00% 315 0 0 375 10 SL HY 375 0 see 61/1000 100 0 315 10 31 HY 375 0 see 61/1000 10	ing Lot Paving	11/30/2002	R-2		100.00%	10,167	0	0	10,167			รเ	¥	3,643	1,017	4,660
Starting by the model 123/11/1979 F-11 990 100.00% 426 0 426 10 SL HY 426 0 Starting by the model 113/21/1979 F-11 990 100.00% 436 0 6 436 10 SL HY 436 0 citable 123/11/1980 F-11 990 100.00% 436 0 0 3673 10 SL HY 436 0 citable 123/11/1980 F-11 990 100.00% 367 0 0 367 10 SL HY 436 0 claim 123/11/1980 F-11 990 100.00% 136 0 0 367 0 137 0 0 367 0 0 367 0 0 367 0 0 367 0 0 367 0 0 367 0 0 367 0 0 367 0 0 367 0 0 367 0 0 367 0 0	9 2	4/30/2003	R-2		100.00%	200	0	0	200			S	¥	317	100	417
sk Cult Fum 1221/1939 F-11 990 100.00% 778 0 0 785 10 SL HY 785 0 0 10.00% 12.0	e Equip	12/31/1978	F.1		100 00%	426	0	0	426			St	¥	426	0	426
12/31/1981 F-11 990 100.00% 436 0 436 10 SL HY 436 0 cquip 12/31/1981 F-11 990 100.00% 3573 0 0 3573 10 SL HY 3573 0 cquip 12/31/1982 F-11 990 100.00% 3573 0 0 3573 10 SL HY 3573 0 first 17/1982 F-11 990 100.00% 1344 0 1344 5 SL HY 3573 0 s 61/1984 F-5 990 100.00% 1344 0 1344 5 SL HY 1344 0 s 61/192001 F-5 990 100.00% 290 0 200 0 200 1 1 1 1 344 0 s 61/192001 F-5 990 100.00% 1 0 1	Desk Oth Furn	12/31/1979	F-1		100.00%	785	0	0	785			ß	¥	785	0	785
1231/1881 F-11 990 100.00% 3,573 0 0 3,573 10 SL HY 3,573 0 tem 7/1/1882 F-11 990 100.00% 315 0 0 3673 10 SL HY 3573 0 fer-Center 7/1/1982 F-11 990 100.00% 396 0 0 306 1 985 0 0 0 306 1 985 0 0 0 306 1 0 1 985 0 0 0 306 1 1 314 315 0 0 306 0 0 306 0 0 306 0 0 306 0 0 306 0 0 306 0 0 306 0 0 306 0 0 306 0 0 306 0 0 306 0 0 306 0 0	e Equip	12/31/1980	F-1	066	100.00%	436	0	0	436			ร	¥	436	0	436
1/2/3/1983 F-1 990 100.00% 315 0 315 10 SL HY 315 0 tem 7/2/1982 F-1 990 100.00% 315 0 0 314 0 SL HY 306 0 fem 7/2/1982 F-1 990 100.00% 1344 0 0 1344 5 SL HY 306 0 s 6/1/1994 F-5 990 100.00% 290 0 0 2081 5 SL HY 1344 0 ter 2/1/5/2001 F-5 990 100.00% 209 0 0 2081 HY 1344 0 ter 2/1/1994 F-5 990 100.00% 209 0 0 2081 HY 1344 0 ter 1/1/1994 F-5 990 100.00% 2081 0 0 2081 HY 2081 0	se Equip	12/31/1981	F-11	066	100.00%	3,573	0	0	3,573			S	¥	3,573	0	3,573
tem 7/1/1989 F-11 990 100 000% 300 0 300 10 SL HY 300 0 fer - Center 8/3/1994 F-5 990 100.00% 1,345 0 1,985 10 3L HY 1,985 0 fer - Center 8/3/1994 F-5 990 100.00% 1,344 0 290 5 SL HY 1,395 0 ter 2/15/2001 F-5 990 100.00% 290 0 0 2,981 5 SL HY 290 0 ter 2/15/2001 F-5 990 100.00% 100 0 1,000 5 SL HY 290 0 ters etc 2/28/2006 F-5 990 100.00% 371 0 1,000 4 36 SL HY 360 0 0 1,000 SL HY 360 0 0 1,000 SL 1,100	e Equip	12/31/1983	<u>F</u> .	066	100.00%	315	0	0	315			ร	¥	315	0	315
Fire-Center 7/2/1982 F-1 990 100.00% 1,985 0 1,985 10 SL HY 1,985 0 ster-Center 8/3/1994 F-5 990 100.00% 290 0 290 1 344 5 SL HY 1,344 0 ter 2/15/2001 F-5 990 100.00% 2081 0 2,081 5 SL HY 2,081 0 ter 2/15/2001 F-5 990 100.00% 2,081 0 0 2,081 5 SL HY 2,081 0 ter 2/15/2001 F-5 990 100.00% 3/1 0 1,767 5 SL HY 2,081 0 tert 7/1/1982 F-3 990 100.00% 3/1 0 0 1,767 5 SL HY 2,081 0 tert 7/1/1982 F-3 990 100.00% 3/1 0 </td <td>System</td> <td>7/1/1989</td> <td><u>+</u></td> <td>066</td> <td>100 00%</td> <td>300</td> <td>0</td> <td>0</td> <td>300</td> <td></td> <td></td> <td>S</td> <td>숲</td> <td>300</td> <td>0</td> <td>300</td>	System	7/1/1989	<u>+</u>	066	100 00%	300	0	0	300			S	숲	300	0	300
8/3/1994 F-5 990 100.00% 1,344 0 1,344 5 SL HY 1,344 0 2/1/1994 F-5 990 100.00% 290 0 290 5 SL HY 220 0 2/1/2001 F-5 990 100.00% 290 0 0 2084 5 SL HY 220 0 2/1/2001 F-5 990 100.00% 1,000 0 0 1,000 5 SL HY 200 0 2/1/2001 F-5 990 100.00% 1,767 0 0 1,000 0	ēr	7/2/1982	F.1	066	100.00%	1,985	0	0	1,985			ร	¥	1,985	0	1,985
6/1/1984 F-3 990 100,00% 290 0 290 5 SL HY 290 0 3/15/2001 F-5 990 100,00% 2,081 5 SL HY 2,081 0 3/15/2001 F-5 990 100,00% 1,090 0 0 1,090 5 SL HY 2,081 0 2/28/2006 F-5 990 100,00% 1,767 0 0 1,767 5 SL HY 920 0 2/28/2006 F-5 990 100,00% 371 0 0 1,767 5 SL HY 492 0 7/1/1927 F-3 990 100,00% 371 0 0 1,767 5 SL HY 468 0 7/1/1928 F-3 990 100,00% 313 0 0 663 5 SL HY 468 0 7/1/1928 F-3	nputer - Center	8/3/1994	r. S	066	100.00%	1,344	0	0	1,344		5	S	¥	1,344	0	1,344
2/15/2001 F-5 990 100 00% 2,081 0 2,081 5 SL HY 2,081 0 3/15/2001 F-5 990 100,00% 999 0 0 999 5 SL HY 1,000 0 3/15/2001 F-5 990 100,00% 1,767 0 1,767 5 SL HY 1,000 0 2/28/2006 F-5 990 100,00% 371 0 0 1,767 5 SL HY 357 5 7/1/1984 F-3 990 100,00% 643 0 648 5 SL HY 648 0 7/1/1984 F-3 990 100,00% 313 0 0 790 HY 648 0 7/1/1984 F-3 990 100,00% 313 0 0 790 HY 648 0 0 1199 0 1199 0 1199 <	airs	6/1/1984	т. С.	066	100.00%	290	0	0	290		5	S	È	290	0	290
3/16/2001 F-5 990 100.00% 999 0 999 5 SL HY 920 0 2/28/2006 F-5 990 100.00% 1,000 0 1,000 5 SL HY 1,000 0 2/28/2006 F-5 990 100.00% 1,767 0 0 1,767 5 SL HY 353 565 7/1/1979 F-3 990 100.00% 648 0 648 5 SL HY 371 0 7/1/1979 F-3 990 100.00% 663 0 663 5 SL HY 648 0 7/1/1984 F-3 990 100.00% 333 0 0 0 663 5 SL HY 373 0 7/1/1986 F-3 990 100.00% 333 0 0 0 1,199 5 SL HY 379 0 3/31/19	nputer	2/15/2001	F-5	066	100 00%	2,081	0	0	2,081		2	S	È	2,081	0	2,081
3/15/2001 F-5 990 100.00% 1,000 0 1,000 5 SL HY 1,000 0 2/2/2006 F-5 990 100.00% 1,767 0 0 1,767 5 200DB HY 373 0 7/1/1972 F-3 990 100.00% 371 0 0 663 5 SL HY 648 0 7/1/1982 F-3 990 100.00% 663 0 663 5 SL HY 648 0 7/1/1982 F-3 990 100.00% 313 0 0 7 10 0 7 10 0 663 5 L HY 663 0 0 663 5 L HY 648 0 0 663 5 L HY 663 0 0 663 5 L HY 663 0 0 663 5 L HY </td <td>nputer</td> <td>3/16/2001</td> <td>т. С</td> <td>066</td> <td>100.00%</td> <td>666</td> <td>0</td> <td>0</td> <td>666</td> <td></td> <td>5</td> <td>Si</td> <td>¥</td> <td>920</td> <td>0</td> <td>920</td>	nputer	3/16/2001	т. С	066	100.00%	666	0	0	666		5	Si	¥	920	0	920
2/28/2006 F-5 990 100 00% 1,767 0 1,767 5 200DB HY 353 565 7/1/1978 F-3 990 100 00% 371 6 371 5 SL HY 648 0 7/1/1972 F-3 990 100 00% 648 0 0 648 5 SL HY 648 0 7/1/1982 F-3 990 100 00% 663 0 0 663 5 L HY 648 0 7/1/1984 F-3 990 100 00% 663 0 0 790 5 SL HY 648 0 3/3/1/988 F-3 990 100 00% 0 0 1,199 5 SL HY 790 0 3/3/1/988 F-3 990 100 00% 0 0 1,199 5 SL HY 7,199 0 3/3/1/2003 F-1	nputer	3/15/2001	F-5	066	100.00%	1,000	0	0	1,000		2	જ	£	1,000	0	1,000
7/1/1978 F-3 990 100 00% 371 0 371 5 SL HY 371 0 7/1/1972 F-3 990 100.00% 648 0 648 5 SL HY 648 0 7/1/1982 F-3 990 100.00% 313 0 313 5 SL HY 648 0 7/1/1985 F-3 990 100.00% 790 0 790 5 SL HY 790 0 3/31/1988 F-3 990 100.00% 790 0 790 5 SL HY 790 0 3/31/1988 F-6 990 100.00% 1,199 0 0 1,199 5 SL HY 1,199 0 3/31/2006 F-11 990 100.00% 1,000 0 1,199 5 SL HY 7,199 0 3/24/2006 F-11 990 100.00%	puters etc	2/28/2006	F-5	066	100 00%	1,767	0	0	1,767		2	200DB	È	353	565	918
7/1/1979 F-3 990 100.00% 648 0 648 5 SL HY 648 0 7/1/1982 F-3 990 100.00% 663 0 663 5 SL HY 663 0 7/1/1984 F-3 990 100.00% 730 0 790 5 SL HY 663 0 3/31/1985 F-3 990 100.00% 790 0 790 5 SL HY 790 0 3/31/1986 F-3 990 100.00% 1,199 0 0 1,199 5 SL HY 7,199 0 3/31/1988 F-6 990 100.00% 1,990 0 0 1,199 5 SL HY 1,199 0 3/31/2003 F-7 990 100.00% 1,000 0 1,000 5 SL HY 650 200 3/31/2005 F-1 990	pment	7/1/1978	F.3	066	100 00%	371	0	0	371		2	SL	¥	371	0	371
7/1/1982 F-3 990 100.00% 663 0 663 5 LHY 663 0 7/1/1984 F-3 990 100.00% 313 0 0 313 5 SL HY 663 0 7/1/1984 F-3 990 100.00% 790 0 0 790 5 SL HY 790 0 3/31/1988 F-3 990 100.00% 1,199 0 0 1,199 5 SL HY 7199 0 3/31/1989 F-6 990 100.00% 1,199 0 1,199 5 SL HY 1,199 0 0 3/31/1989 F-6 990 100.00% 1,000 0 0 1,199 5 SL HY 650 200 3/31/2006 F-11 990 100.00% 4,295 0 1,137 5 200DB HY 0 103 3/34/2007	ipment	7/1/1979	£	066	100.00%	648	0	0	648		2	ટા	¥	648	0	648
7/1/1984 F-3 990 100.00% 313 0 313 5 SL HY 313 0 7/1/1985 F-3 990 100.00% 790 0 790 5 SL HY 790 0 3/3/1/1988 F-3 990 100.00% 1,199 0 0 1,199 5 SL HY 790 0 3/3/1/1988 F-6 990 100.00% 1,199 0 0 1,199 5 SL HY 7,199 0 3/3/1/2003 F-7 990 100.00% 1,000 0 1,000 5 SL HY 650 200 3/3/1/2003 F-11 990 100.00% 4,295 0 0 4,295 7 SL HY 6 0 307 3/24/2007 F-11 990 100.00% 1,435 0 0 1,435 7 SL HY 0 227	pment	7/1/1982	F-3	066	100.00%	663	0	0	663		5	SI	È	663	0	663
7/1/1985 F-3 990 100.00% 790 0 790 5 SL HY 790 0 3/31/1988 F-3 990 100.00% 1,199 0 0 1,199 5 SL HY 790 0 3/31/1989 F-3 990 100.00% 1,199 0 0 1,199 5 SL HY 1,199 0 3/31/1989 F-6 990 100.00% 1,000 0 0 1,199 5 SL HY 650 200 3/31/2005 F-11 990 100.00% 4,295 0 0 4,295 7 SL HY 650 200 3/32/2006 F-11 990 100.00% 1,137 0 0 1,137 5 200DB HY 0 227 3/30/2007 F-11 990 100.00% 1,435 0 0 1,435 7 SL HY 0 103	ipment	7/1/1984	F.3	066	100.00%	313	0	0	313			SL	¥	313	0	313
3/31/1988 F-3 990 100.00% 800 0 0 800 5 SL HY 800 0 0 0 3/31/1989 F-3 990 100.00% 1,199 0 0 1,199 5 SL HY 1,199 0 0 1,199 0 0 3/31/1988 F-6 990 100.00% 1,000 0 0 1,000 5 SL HY 1,199 0 0 3/31/1988 F-6 990 100.00% 1,000 0 0 1,000 5 SL HY 650 200 3/31/2006 F-11 990 100.00% 1,255 0 0 0 4,295 7 SL HY 50 86 3/31/2007 F-11 990 100.00% 1,256 0 0 1,256 7 SL HY 0 10.3 3/31/2007 F-11 990 100.00% 1,256 0 0 1,256 7 SL HY 0 10.3 3/31/2007 F-11 990 100.00% 1,415 0 0 1,256 7 SL HY 0 10.3 3/31/2006 F-11 990 100.00% 1,415 0 0 1,415 7 SL HY 0 10.3 3/31/2006 F-11 990 100.00% 1,415 0 0 1,930 7 SL HY 0 138	ipment	7/1/1985	F.3	066	100.00%	790	0	0	790			S	¥	790	0	790
3/31/1989 F-3 990 100.00% 1,199 0 0 1,199 5 SL HY 1,199 0 1 1 1 1 1 1,199 0	idare Freezer	3/31/1988	E,	066	100.00%	800	0	0	800			รเ	₹	800	0	800
3/31/1988 F-6 990 100 00% 280 0 0 280 5 SL HY 280 0 0 3/31/1988 F-6 990 100 00% 1,000 0 0 1,000 5 SL HY 650 200 3/31/2003 F-3 990 100 00% 350 0 0 350 7 200DB HY 650 200 307 3/23/2006 F-11 990 100 00% 4,295 0 0 4,295 7 SL HY 0 307 3/24/2007 F-5 990 100 00% 1,137 0 0 1,137 5 200DB HY 0 227 3/30/2007 F-11 990 100 00% 1,435 0 0 1,435 7 SL HY 0 103 5/24/2007 F-11 990 100 00% 1,415 0 0 1,256 7 SL HY 0 90 101 3 6/15/2007 F-10 990 100 00% 1,415 0 0 1,415 7 SL HY 0 101 3 6/15/2007 F-10 990 100 00% 1,415 0 0 1,415 7 SL HY 0 101 3 6/15/2007 F-11 990 100 00% 1,930 0 0 1,930 7 SL HY 0 138	у Vасиит	3/31/1989	F-3	066	100.00%	1,199	0	0	1,199			SF	¥	1,199	0	1,199
3/31/2003 F-3 990 100.00% 1,000 0 0 1,000 5 SL HY 650 200 3/23/2006 F-11 990 100.00% 350 0 0 350 7 200DB HY 50 86 7/13/2006 F-11 990 100.00% 4,295 0 0 4,295 7 SL HY 0 307 3/24/2007 F-5 990 100.00% 1,137 0 0 1,137 5 200DB HY 0 227 3/30/2007 F-11 990 100.00% 1,435 0 0 1,435 7 SL HY 0 103 5/24/2007 F-11 990 100.00% 1,256 0 0 1,256 7 SL HY 0 90 6/15/2007 F-10 990 100.00% 1,415 0 0 1,415 7 SL HY 0 101 12/31/2006 F-11 990 100.00% 1,930 0 0 1,930 7 SL HY 0 138	ith TV & Vcr	3/31/1988	F-6	066	100 00%	280	0	0	280		5	SL	¥	280	0	280
3/23/2006 F-11 990 100.00% 350 0 0 350 7 200DB HY 50 86 7/13/2006 F-11 990 100.00% 4,295 0 0 4,295 7 SL HY 0 307 3/24/2007 F-5 990 100.00% 1,137 0 0 1,137 5 200DB HY 0 227 3/30/2007 F-11 990 100.00% 1,435 0 0 1,435 7 SL HY 0 103 5/24/2007 F-11 990 100.00% 1,256 0 0 1,256 7 SL HY 0 90 6/15/2007 F-10 990 100.00% 1,415 0 0 1,415 7 SL HY 0 101 12/31/2006 F-11 990 100.00% 1,930 0 0 1,930 7 SL HY 0 138	liances	3/31/2003	F-3	066	100.00%	1,000	0	0	1,000		5	ર્જ	¥	650	200	820
7/13/2006 F-11 990 100 00% 4,295 0 0 4,295 7 SL HY 0 307 3/24/2007 F-5 990 100 00% 1,137 0 0 1,137 5 200DB HY 0 227 3/30/2007 F-11 990 100 00% 1,435 0 0 1,435 7 SL HY 0 103 5/24/2007 F-11 990 100 00% 1,256 0 0 1,256 7 SL HY 0 90 6/15/2007 F-10 990 100 00% 1,415 0 0 1,415 7 SL HY 0 101 12/31/2006 F-11 990 100 00% 1,930 0 0 1,930 7 SL HY 0 138	rlpool Refrig Local	3/23/2006	F-11	066	100.00%	350	0	0	320		_	200DB	Ŧ	20	98	136
3/24/2007 F-5 990 100 00% 1,137 0 0 1,137 5 200DB HY 0 227 3/30/2007 F-11 990 100 00% 1,435 0 0 1,435 7 SL HY 0 103 5/24/2007 F-11 990 100 00% 1,256 0 0 1,256 7 SL HY 0 90 6/15/2007 F-10 990 100 00% 1,415 0 0 1,415 7 SL HY 0 101 12/31/2006 F-11 990 100 00% 1,930 0 0 1,930 7 SL HY 0 138	P Ice Machine	7/13/2006	F-11	066	100 00%	4,295	0	0	4,295		7	SF	¥	0	307	307
3/30/2007 F-11 990 100 00% 1,435 0 0 1,435 7 SL HY 0 103 5/24/2007 F-11 990 100 00% 1,256 0 0 1,256 7 SL HY 0 90 6/15/2007 F-10 990 100 00% 1,415 0 0 1,415 7 SL HY 0 101 12/31/2006 F-11 990 100 00% 1,930 0 0 1,930 7 SL HY 0 138	nputer Transp	3/24/2007	F-5	066	100 00%	1,137	0	0	1,137		2	200DB	¥	0	227	227
5/24/2007 F-11 990 100 00% 1,256 0 0 1,256 7 SL HY 0 90 90 6/15/2007 F-10 990 100 00% 1,415 0 0 1,415 7 SL HY 0 101 101 12/31/2006 F-11 990 100 00% 1,930 0 0 1,930 7 SL HY 0 138	Round Tables Loc	3/30/2007	F-11	066	100 00%	1,435	0	0	1,435		_	S	¥	0	103	103
6/15/2007 F-10 990 100 00% 1,415 0 0 1,415 7 SL HY 0 101 101 12/31/2006 F-11 990 100 00% 1,930 0 0 1,930 7 SL HY 0 138	added Fold Chairs	5/24/2007	F-11	066	100 00%	1,256	0	0	1,256		7	Sľ	¥	0	06	06
12/31/2006 F-11 990 100 00% 1,930 0 0 1,930 7 SL HY 0 138	eater Mobile Radio	6/15/2007	F-10	066	100 00%	1,415	0	0	1,415		7	S	¥	0	101	101
	: Equip	12/31/2006	F.1	066	100 00%	1,930	0	0	1,930		7	જ	¥	0	138	138

Detail Report Next Year

Detail	Detail Report Next Year	4											. · · •
}			3,407	67,105									
E :	Description	Date	2002		Disposition Information	Information							
o Ž	of Property	Placed in Service	Current	Accum	Date	Date	Business	Selling	Selling	Basis	Gain or	Type of	Holding
ď	Building Imp	12/31/1978		2 450	nalina	Sold	Ose %	Price	Expense	Adjustment	Loss	Disposition	Period
ã	Bldg Additions	12/31/1979	o c	21,130									•
ช	Storage Building	12/31/1980	0 0	2,170									
, ה	Leasehold Improvements	7/1/1992	0	1,500									
מׁ נ	Parking Lot Paving	11/30/2002	1,017	5,677									
ĭč	rence Sfr :	4/30/2003	20	467									
ΞĊ	Office Equip	12/31/1978	,0	426									
čõ	Ody Desk Our Fully	12/31/19/9	0	785									
ŏ	Office Equip	12/31/1980	0 0	436									
Ö	Office Equip	12/31/1981	.	5,573									
P.	PA System	7/1/1989	o c	2 C C									
ರ	Copier	7/2/1982	0	1 985									
ರ	Computer - Center	8/3/1994	0	1.344									
7	7 Chairs	6/1/1984	0	290									
ರ	Computer	2/15/2001	0	2.081									
ŏ	Computer	3/16/2001	0	920									
ರ	Computer	3/15/2001	0	1.000									
ರ	Computers etc	2/28/2006	339	1.257									
ញីរ	Equipment	7/1/1978	0	371									7 ,,
ភ្នំ	Equipment	7/1/1979	0	648									
ត្ត ជួ	Equipment Fallioment	7/1/1982	0	663									. •
1 [Equipment	7/1/1984	0 0	313									*
Ē	Frigidare Freezer	3/31/1988	-	08/									
Σ	Kirby Vacuum	3/31/1989	o c	100									
Zei	Zenith TV & Vcr	3/31/1988	o c	280									
Ap	Appliances	3/31/2003	100	950									
≷	Whirlpool Refrig Local	3/23/2006	61	197									
<u>~</u>	B & P Ice Machine	7/13/2006	614	921									
රි	Computer Transp	3/24/2007	364	591									
9	60" Round Tables Loc	3/30/2007	205	308									
€ (40 Padded Fold Chairs	5/24/2007	179	269									
e Y	Repeater Mobile Radio	6/15/2007	202	303									
Ź	wise Equip	12/31/2006	276	414									

Maury County Senior Citizens, Inc. Board of Directors for 2006-2007

First District **Nancy Thomas** 1005 Hillcrest Ave. Columbia, Tn. 38401 388-3750

Second District Barbara McIntyre - Vice Chair Eula Whittaker 2051 Union Place Columbia, Tn 38401 388-8901

Third District 601 Mooresville Pike Columbia, Tn 38401 388-1270

Fourth District Dr. Porter King 414 Woods Dr. Columbia, TN. 38401 381-7154

Fifth District Whitney Seaton 111 W. Hardin Dr. Columbia, TN, 38401 388-9319

Sixth District Jo Ann McClellan 5621 Gaskill Branch Rd. Sante Fe. Tn. 38482 682-3755

Seventh District Juanita Boshers 1735 Cross Bridges Mt. Pleasant, TN 38474-2935 388-6171 (H)

Eighth District Billy Frank Jett 2491 Culleoka Hwy Culleoka, Tn. 38451 987-2529

Ninth District Homer Martin 606 Old Sunnyside Ln. Columbia, TN. 38401 388-9696

Tenth District Lonnie Daniels 1042 Massey Ln. Mt. Pleasant, Tn 38474 379-3153

Eleventh District Betty Boyd - Secretary P O. Box 91 Springhill, TN. 37174 931-486-2648

At Large Member Charles Sanders - Chairman 1011 Sunnyside Ln Columbia, Tn 38401 388-2482

Ex-Officio Member Executive Director Mary K. Fleeman 1955 Union Place D79 Columbia, Tn. 38401 388-9595 (W) 388-5506 FAX Mcsc2@cpws.net

At Large Member Jim York 5009 Hayes Dr. Columbia, TN. 38401 388-2006 (H) ivork@bellSouth.net

At Large Member-TO BE FILLED

At Large Member Edward A. Cox - Finance Chair 502 Oakwood Drive Columbia, TN 38401-2520 388-7703 (H)

Social Agency Eric Cox 110 Polk St Columbia, TN. 38401 City of Columbia Bill Gentner 707 N Main St Columbia, TN 38401-5169 388-0057 381-3833 (W)

City of Spring Hill-Phil Stack 3343 Taylorwood Lane Springhill, TN. 37174-2442 City of Mt. Pleasant TO BE FILLED

Maury County Member Jim Bailey Courthouse, 41 Public Square Columbia, TN 38401-3386 379-7934 (H) 381-3690 ext. 304 (W) 381-3984 Fax jbailey@mauryco.org