Form

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 2006 Open to Public Inspection

A	For the	2006 calendar year, or tax year beginning 7/01/06, and end	ing 6/	30/	07		
В	Check if	applicable: Please use IRS C Name of organization				D	Employer identification number 62–1571573
	Name cl	nange print or ROCKETOWN OF MIDDLE TEN			D/avita	E	Telephone number 615-843-4001
	Initial ref	turn type. Number and street (or P.O. box if mail is not delivered to P.O. BOX 331129	street address	i)	Room/suite	F	Accounting method: Cash
Ī	Final ret	Specific F. O. BOX 331123					Accrual Other (specify)
	Amende	Instruc-	37203				/toolda: other (opeon)/
님		• Section 501(c)/3) organizations and 4947(a)/1) noneyempt ch		H and	are not applicable to sec	tion 52	7 organizations. I
Ш	Applicat	trusts must attach a completed Schedule A (Form 990 or 990			Is this a group return for		
G	Weheif	e: WWW.ROCKETOWN.COM			If "Yes," enter number o		L
		zation type			Are all affiliates included		Yes No
•	•	only one) ► X 501(c) ( 3 ) ◀ (insert no.) 4947(a)(1) or	527	, ,	(If "No," attach a list. See inst	ructions.	.)
	Check h	. 🗇	nss	H(d)	Is this a separate return	filed by	
K		are normally <b>not</b> more than \$25,000. A return is not required, but if the organization cho			organization covered by	a grou	p ruling? Yes X No
		return, be sure to file a complete return.	_	l	Group Exemption Nu	ımber	<b>&gt;</b>
	to ne a i			М	Check ▶ ☐ if the	e orga	nization is <b>not</b> required
L	Gross r	receipts: Add lines 6b, 8b, 9b, and 10b to line 12   1,32	0,237				), 990-EZ, or 990-PF).
P	art I	Revenue, Expenses, and Changes in Net Assets or	Fund Bala	ances	(See the instru	<u>ction</u>	S.)
	1	Contributions, gifts, grants, and similar amounts received:	ı				
	а	Contributions to donor advised funds		а	FOE EE	=	
	b	Direct public support (not included on line 1a)		b	525,55	<mark>의</mark>	
	С	Indirect public support (not included on line 1a)	<del>]</del>	С		$\dashv$	
	d	Government contributions (grants) (not included on line 1a)	.,,,,, <b></b>	d			525,550
	e	Total (add lines 1a through 1d) (cash \$ 525,550 nor	icash \$	20)	)	10	0=1 410
	2	Program service revenue including government fees and contracts (from P		<u> </u>			
	3	Membership dues and assessments					
	4	Interest on savings and temporary cash investments				5	
	5	Dividends and interest from securities	ء ا	a l	144,08	10000	
	6a	Gross rents				$\exists$	
	b	Less: rental expenses  Net rental income or (loss). Subtract line 6b from line 6a	L			6	c 144,088
	7	Other investment income (describe	)			7	7
ıne	8a	Gross amount from sales of assets other (A) Securiti	es		(B) Other		
Revenue	"	than inventory	8	Ba			
8	b	Less: cost or other basis and sales expenses	8	3b			
	C	Gain or (loss) (attach schedule)	8	3c			
	d	Net gain or (loss). Combine line 8c, columns (A) and (B)				. 8	d
	9	Special events and activities (attach schedule). If any amount is from gam	i <b>ng,</b> check h	ere 🕨			
	a	Gross revenue (not including \$ of	1	1	ö= 0.0	_	
		contributions reported on line 1b)		a	95,96		
	b	Less: direct expenses other than fundraising expenses		)b	1,02	1,10,10,12	94,944
	С	Net income or (loss) from special events. Subtract line 9b from line 9a $\dots$			202 45		94,944
	10a	Gross sales of inventory, less returns and allowances	· · · · · · · · · · · · · · · · · ·	Da	282,45 172,53		
	b	Less: cost of goods.sold	<i></i>	0b		10	109,923
	C	Gross profit or (loss) from sales of inventory (attach schedule). Subtract lin					1 18,037
	11	Other revenue (from Part VII, line 103)					2 1,146,684
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11					3 936,269
ģ	13	Program services (from line 44, column (B))  Management and general (from line 44, column (C))				· -	4 148,882
Expenses	14	Fundraising (from line 44, column (D))					119,879
xpe	16	Payments to affiliates (attach schedule)					6
ш	17	Total expenses. Add lines 16 and 44, column (A)					1,205,030
<u>0</u>	18	Excess or (deficit) for the year. Subtract line 17 from line 12					-58,346
Net Assets	19	Net assets or fund balances at beginning of year (from line 73, column (A)	)				3,617,640
ťĄ	20	Other changes in net assets or fund balances (attach explanation)	SEE	ST	ATEMENT 2	2	20 2
Š	24	Net assets or fund halances at end of year. Combine lines 18, 19, and 20				. 2	3,559,296

Form 990 (2006) All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) Part II Statement of 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 (C) Management (B) Program (D) Fundraising (A) Total services and general 6b, 8b, 9b, 10b, or 16 of Part I. 22a Grants paid from donor advised funds (attach schedule) 22a If this amount includes foreign grants, check here 22b Other grants and allocations (attach schedule) non-cash \$ 22b If this amount includes foreign grants, check here 23 Specific assistance to individuals (attach 23 24 Benefits paid to or for members (attach 24 schedule) 25a Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach 46,000 schedule) SEE STATEMENT 3 245,500 199,500 25a **b** Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach 25b schedule) c 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 26 Salaries and wages of employees not included 36,743 11,270 116,542 164,555 on lines 25a, b, and c 26 27 Pension plan contributions not included on lines 25a, b, and c 27 28 Employee benefits not included on lines 9,542 4,031 21,971 35,544 28 25a – 27 6,650 3,229 26,137 36,016 29 29 Payroll taxes Professional fundraising fees 31 Accounting fees 31 11,851 11,851 32 Legal fees 205 623 3,660 4,488 33 Supplies 10,865 866 15,859 4,128 34 34 Telephone 1,714 1,751 3,565 100 35 Postage and shipping ..... 3,428 1,039 19,805 24,272 36 Occupancy 37 Equipment rental and maintenance 37 3,176 2,843 1,340 7,359 Printing and publications ..... 38 38 631 10,340 11,014 Travel ..... Conferences, conventions, and meetings ..... 40 3,912 3,912 41 5,217 5,024 138,399 148,640 42 Depreciation, depletion, etc. (attach schedule) 42 43 Other expenses not covered above (itemize): 62,945 37,541 391,969 492,455 SEE STATEMENT 4 43a 43b 43c \_\_\_\_\_ 43d ..... 43e 43f 43g 44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 148,882 119,879 936,269 1,205,030 13-15) Joint Costs. Check ▶ | if you are following SOP 98-2. Yes X No Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ; (ii) the amount allocated to Program services \$ If "Yes," enter (i) the aggregate amount of these joint costs \$ : and (iv) the amount allocated to Fundraising \$ (iii) the amount allocated to Management and general \$

#### 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.

► All of c	What is the organization's primary exempt purpose?  ► SEE STATEMENT 5  Ill organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others	s.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
	a THE SIXTH AVENUE SKATEPARK		316,633
b	(Grants and allocations \$ ) If this amount includes foreign grants, cn  b THE ROCKTOWN MUSIC VENUE		
С	(Grants and allocations \$ ) If this amount includes foreign grants, ch	neck here	459,979
d	(Grants and allocations \$ ) If this amount includes foreign grants, charged AFTER SCHOOL PROGRAMS AND SUMMER CAMPS	neck here ▶	91,461
•			60 106
е	(Grants and allocations \$ ) If this amount includes foreign grants, cf  e Other program services (attach schedule)  (Grants and allocations \$ ) If this amount includes foreign grants, cf		68,196
f	f Total of Program Service Expenses (should equal line 44, column (B), Program services)	<b>&gt;</b>	936,269 Form <b>990</b> (2006)

Form 990 (2006)

P	<u>art IV</u>	Balance Sheets (See the instructions.)					
	Note:	Where required, attached schedules and amounts with column should be for end-of-year amounts only.	in the de	scription	(A) Beginning of year		(B) End of year
	45	Cash-non-interest-bearing			92,557	45	21,616
	46	Savings and temporary cash investments			46		
	47a	Accounts receivable		3,522			2 500
	b	Less: allowance for doubtful accounts	47b		2,106	47c	3,522
	48a	Pledges receivable	48a 48b	66,803	116 100		66 003
	b	Less: allowance for doubtful accounts	116,193		66,803		
	49	Grants receivable				49	
	50a	Receivables from current and former officers, directors		50-			
						50a	
	b	Receivables from other disqualified persons (as defined					
		persons described in section 4958(c)(3)(B) (att. schedu	ıle)			50b	
	51a	Other notes and loans receivable (attach	1 1			(#16151)	
ίδ		schedule)	51a			F4.	
Assets	b	Less: allowance for doubtful accounts			31,664	51c	37,634
As	52	Inventories for sale or use			2,590		1,158
	53 54a	Prepaid expenses and deferred charges		. — — —	2,390	53 54a	1,130
	b	Investments—other securities (attach schedule)		Cost FMV		54b	
	55a	Investments-land, buildings, and	55a				
	١.	equipment: basis	33a				
	b	Less: accumulated depreciation (attach	55b			55c	
		schedule) Investments-other (attach schedule)				56	
	56	Land, buildings, and equipment: basis	57a	4,308,023			
	57a	Less: accumulated depreciation (attach	5, a				
	b	schedule) SEE STATEMENT 6	57b	706,163	3,725,962	57c	3,601,860
	58	Other assets, including program-related investments					
		(describe	0 071 070	58	2 722 502		
	59	Total assets (must equal line 74). Add lines 45 through			3,971,072		3,732,593 148,297
	60	Accounts payable and accrued expenses			93,432		140,291
	61	Grants payable				61	
	62	Deferred revenue				62	
es	63	Loans from officers, directors, trustees, and key emplo	yees (att	ach		60	
Ħ		schedule)				63 64a	
Liabilities	64a	Tax-exempt bond liabilities (attach schedule)  Mortgages and other notes payable (attach schedule)		EE MODKCHEET	260,000		25,000
_	b				200,000	65	20,000
	65	Other liabilities (describe				00	
		- 4 A Mark Wilder - A dal Barra CO therapy b CF			353,432	66	173,297
	66	Total liabilities. Add lines 60 through 65 anizations that follow SFAS 117, check here ► X	and com	nlate lines			
	Orga	67 through 69 and lines 73 and 74.	and com	Siete III les			
	67	-			3,501,447	67	3,492,493
ces	67	Unrestricted Temporarily restricted		,	116,193		66,803
lan	68					69	
B	03	Permanently restricted anizations that do not follow SFAS 117, check here	<b>▶</b>	and			
oun	Orga	complete lines 70 through 74.	، لسا ،				
F	70	-				70	
ts c	71	Paid-in or capital surplus, or land, building, and equipm				71	
SSe	72	Retained earnings, endowment, accumulated income,				72	
Net Assets or Fund Balances	73	Total net assets or fund balances (add lines 67 through					
ž	•	70 through 72. (Column (A) <b>must</b> equal line 19 and col					_
		equal line 21)			3,617,640		3,559,296
	۱	Tatal liabilities and not accepta/fund balances Add	and 73	3,971,072	74	3,732,593	

Forn	1 990 (2006) ROCKETOWN OF MIDDLE TENNESSEE	62-15	71573	Page <b>5</b>
P	art IV-A Reconciliation of Revenue per Audited Financial Staten instructions.)	nents Witl	h Revenue per Return	(See the
а	Total revenue, gains, and other support per audited financial statements		а	1,320,237
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1		
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify): SEE STATEMENT 7	b4	173,553	
	Add lines b1 through b4		b	173,553
С	Subtract line <b>b</b> from line <b>a</b>		<u>c  </u>	1,146,684
d	Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2		
	Add lines d1 and d2	<i>.</i>	d	
е	Total revenue (Part I, line 12). Add lines c and d		▶ e	1,146,684
Pa	art IV-B Reconciliation of Expenses per Audited Financial State	ements W	<u>/ith Expenses per Retu</u>	ırn
а	Total expenses and losses per audited financial statements		a	1,378,581
b .	Amounts included on line a but not Part I, line 17:	1 1		
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify): SEE STATEMENT 8	b4	173,553	
	Add lines b1 through b4		<u>b</u>	173,553
С	Subtract line <b>b</b> from line <b>a</b>		C	1,205,028
d	Amounts included on Part I, line 17, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	SEE STATEMENT 9	d2	2	_
	Add lines d1 and d2		d	2
е	Total expenses (Part I, line 17). Add lines c and d		▶   e	1,205,030
· Da	ort V-A Current Officers Directors Trustees and Key Employe	OC (liet par	ch nareon who was an officer	director trustee

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name a	nd address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
AUDRA DAVIS	NASHVILLE	DEV DIRECTOR			
401 6TH AVENUE SOUTH	TN 37203	40	46,000	0	0
MARY SETTLE	NASHVILLE	OPERATNS DIR	₹		
401 6TH AVENUE SOUTH	TN 37203	40	48,000	0	0
BENJAMIN CISSELL	NASHVILLE	OUTREACH DIR			
401 6TH AVENUE SOUTH	TN 37203	40	48,000	0	0
TODD EVANS	NASHVILLE	MARKETNG MGR			
401 6TH AVENUE SOUTH	TN 37203	40	25,000	0	0
KYLE SLOAN	NASHVILLE	SKATEPRK MGR			
401 6TH AVENUE SOUTH	TN 37203	40	25,000	0	. о
ALEX MCGLOTHLIN	NASHVILLE	SKATESHP MGR			
401 6TH AVENUE SOUTH	TN 37203	40	28,500	0	0
KENT MILLER	NASHVILLE	PROGRAM MGR			
401 6TH AVENUE SOUTH	TN 37203	40	25,000	0	0
.,					

orm	990 (2006) ROCKETOWN OF MIDDLE TENNESSEE	62-157				<u>Pa</u>	ige <b>6</b>
	rt V-A Current Officers, Directors, Trustees, and Key Emp				\	Yes	No
5a	Enter the total number of officers, directors, and trustees permitted to vote on organization						
	meetings	▶ 2					
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-		sated				
	employees listed in Schedule A, Part II, or highest compensated professional and						
	contractors listed in Schedule A, Part II-A or II-B, related to each other through far				75b	ATT	X
	relationships? If "Yes," attach a statement that identifies the individuals and explain	ris tile relationship(s)	'		705		
_	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A	or highest					
С	compensated employees listed in Schedule A, Part I, or highest compensated pro						
	independent contractors listed in Schedule A, Part II-A or II-B, receive compensat						
	organizations, whether tax exempt or taxable, that are related to the organization?		for				
	the definition of "related organization."				75c		<u>X</u>
	If "Yes," attach a statement that includes the information described in the instruction	ons.					
d	Does the organization have a written conflict of interest policy?		· · · · · · · · · · · · · · · · · · ·			X	
Pa	rt V-B Former Officers, Directors, Trustees, and Key Empl	oyees That Rec	eived Com	pensation or Oth	er Be	netit	.S
	(If any former officer, director, trustee, or key employee received com	pensation or other be	enetits (descri	ped below) during the	year, lis	ii inat	
	person below and enter the amount of compensation or other benefit	s in the appropriate c	(C) Compensation	(D) Contributions to employe	e (E)	Expen	
	(A) Name and address	(B) Loans and Advances	(if not paid,	benefit plans & deferred compensation plans	accou	nt and	other
(-			enter -0-)	compensation plans	- 411	Owanic	
Ņ/Ā							
					<del> </del>		
<del>v</del>							
• • •							
• • • •							
					+		
					1		
Pa	rt VI Other Information (See the instructions.)				Chall desire has 7	Yes	No_
6	Did the organization make a change in its activities or methods of conducting activities	vities? If "Yes," attach	n a				
	detailed statement of each change				76		$\frac{\mathbf{x}}{\mathbf{x}}$
7	Were any changes made in the organizing or governing documents but not report	ed to the IRS?			77		
	If "Yes," attach a conformed copy of the changes.		l b				
'8a	Did the organization have unrelated business gross income of \$1,000 or more du				78a		X
	this return?  If "Yes," has it filed a tax return on Form 990-T for this year?				78b		
b	Was there a liquidation, dissolution, termination, or substantial contraction during	the year? If "Yes " at					
'9					79		X
0a	a statement  Is the organization related (other than by association with a statewide or nationwith a statewide or nationwi	de organization) thro	ugh				e de la composition della comp
va	common membership, governing bodies, trustees, officers, etc., to any other exer		-				
	organization?				80a	200	X
b	If "Yes," enter the name of the organization						
	and check	whether it is e	xempt or	nonexempt			
11a	Enter direct and indirect political expenditures. (See line 81 instructions.)				041		X
b	Did the organization file Form 1120-POL for this year?	<u> </u>			81b Form	990	
					1 (111)		(5000)

Form	990 (2006) ROCKETOWN OF MIDDLE TENNESSEE 62-1571573		Р	age <b>7</b>
The same before a size	rt VI Other Information (continued)	г	Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge			
	or at substantially less than fair rental value?	82a		_X_
b	If "Yes," you may indicate the value of these items here. Do not include this			
	amount as revenue in Part I or as an expense in Part II.			
	(See instructions in Part III.)			MVS.
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b		
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	Sistemania.	<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	84b		
85	501(c)(4), (5), or (6) organizations. <b>a</b> Were substantially all dues nondeductible by members?	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  N/A	85b	W46-29	ALCONO.
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization			
	received a waiver for proxy tax owed for the prior year.			
С	Dues, assessments, and similar amounts from members	-		
d	Section 162(e) lobbying and political expenditures	-		
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	1		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)  85f  N/A	85g	1971 TAY 0.40	Page 440
g	Does the diganization elect to pay the section ecoe(e) tax on the amend on the section elect to pay the section ecoe(e) tax on the amend on the section elect to pay the section ecoe(e) tax on the amend on the section ecoe(e) tax on the amend on the section ecoe(e) tax on the section ecoe(e)	009	Su SK	W.
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f			
	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the	85h	Tariri ya i	9 No. 1 Nys 224
	Tollowing tax years			
86	301(c)(7) orgs. Enter: a mitation reco and copied contribution	1		
b	Gross receipts, monaded of time 12, for passes are	1		
87	501(c)(12) orgs. Enter. a Gross moonie from members of statements.	7		
b	Gross income from other sources. (Do not net amounts due or paid to other			
00-	sources against amounts due or received from them.)  At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or	7		
88a	partnership, or an entity disregarded as separate from the organization under Regulations sections			
	The state of the s	88a		X
<b>h</b>	301.7701-2 and 301.7701-3? If "Yes," complete Part IX  At any time during the year, did the organization, directly or indirectly, own a controlled entity within the			
þ	meaning of section 512(b)(13)? If "Yes," complete Part XI	88b		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:			
оза	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			
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	89b		X
С	Enter: Amount of tax imposed on the organization managers or disqualified			
•	U			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter	14		\$ 7 ± \$(
	transaction?	89e	ļ	X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		X
g	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			x
	at any time during the year?	89g		<u>_                                    </u>
90a	List the states with which a copy of this return is filed NONE			
b	Number of employees employed in the pay period that includes March 12, 2006 (See			27
	instructions.) 90b 615	-843	3 – 40	01
91a	instructions.)  The books are in care of ► LAUREN BROOKS  Telephone no. ► 615			:×:.
	ATT NIM AVE SOUTH			
	Located at ► NASHVILLE, TN ZIP+4 ► 37203			
b	At any time during the calendar year, did the organization have an interest in or a signature or other additionty		Yes	No
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	91b		X
	account)?	2000		
	If "Yes," enter the name of the foreign country			1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.	January (C)	- 00	<b>n</b> (2006

Form	990 (20			ESSEE	62-15	71573			Page 8
Pa	art VI	Other Information (con	tinued)						Yes No
С	At any t	ime during the calendar year, did th	e organization maintai	n an office out	side of the United Sta	ites?		91c	X
	If "Yes,	enter the name of the foreign coun	try <b>&gt;</b>						. –
92	Section	enter the name of the foreign coun 4947(a)(1) nonexempt charitable tr er the amount of tax-exempt interes	usts filing Form 990 in	lieu of Form 1	1041- Check here				▶ ∟
	and ent						▶ 92		
Pa	art VII	Analysis of Income-Pro	oducing Activitie	s (See the	instructions.)				
Note	: Enter g	ross amounts unless otherwise		Unrelate	d business income	Excluded	by section 512, 513, or 514	Rei	(E) ated or
ndic	ated.			(A) Business code	(B) Amount	(C) Exclusion	( <b>D)</b> Amount		ated of ot function
93	Progran	n service revenue:		Dusiness code	Amount	code	Amount		come
а	PRO	GRAM SERVICE REVI	ENUE					2	54,142
b									
C									
d									·
е									
f	Medicar	e/Medicaid payments							·····
g	Fees ar	d contracts from government agen	cies						
94	Member	ship dues and assessments							
95	Interest	on savings and temporary cash inv	estments						
96	Dividen	ds and interest from securities	,						
97	Net rent	al income or (loss) from real estate							
а	debt-fina	anced property	,,				111 000		
b		-financed property				16	144,088		
98	Net rent	al income or (loss) from personal p	roperty						
99	Other in	vestment income							
100	Gain or	(loss) from sales of assets other that	an inventory						04 044
101		me or (loss) from special events							94,944
102	Gross p	rofit or (loss) from sales of inventor	y <sub></sub>						09,923
103		evenue: a							10 027
b	OTE	IER REVENUE							18,037
C									
d									
е				75.00		0	144,088		77,046
104	Subtota	(add columns (B), (D), and (E))				- applement of the party of the			21,134
		dd line 104, columns (B), (D), and (					··········· — ——		21,137
	Market and the Control of the Contro	plus line 1e, Part I, should equal to	ne amount on line 12,	Part I.	-f Francis Direct	/9	oo the instruction	- 1	
Pa	irt VIII	Relationship of Activit							
Li		Explain how each activity for w of the organization's exempt pu	hich income is reporte irnoses (other than by	ea in column (E r providina func	=) of Part VII contribut ds for such purposes\	tea importa ).	filly to trie accomplishin	iciit	
	<u> </u>	SEE STATEMENT 10		Pro training tank					
		SEE STATEMENT TO							
Dء	rt IX	Information Regarding	Taxable Subsid	iaries and	Disregarded En	tities (S	ee the instructions	3.)	
		(A)	(B)		(C)	1	(D) Total income	(	E)
١	lame, ad	dress, and ÉIN of corporation, ship, or disregarded entity	Percentage of ownership interest		Nature of activities		rotal income		of-year sets
	N/A		Ottioion Interes	%					
	-1/ 4			%					
				%					
				%					
D-	ırt X	Information Regarding	Transfers Associated		Personal Bene	fit Contr	acts (See the ins	truction	ıs.)
(	a) Did th	e organization, during the year, receive organization, during the year, pay	eive any funds, directl	y or indirectly,	to pay premiums on	a personal		Н ў	es X No
		e organization, during the year, pay es" to <b>(b)</b> , file Form 8870 <b>and</b> Form							<b>_</b>
<u></u>	TOLES, II T	to (b), me i oniii ooro and i on	25 (555 1/10/145/16)	::/:				For	m <b>990</b> (2006

Form	990 (2006) R	OCKETOWN OF MIDDLE T	ENNESSEE	62-1571573			Page 9
	而 <b>X</b> 沙漠 Info	ormation Regarding Transfers T			te only if the org	anization	
	is_a	controlling organization as defin	ned in section 512(b	)(13).		Yes	No No
106	Did the reportir	ng organization make any transfers to a c	ontrolled entity as defined	in section 512(b)(13) of		100	110
	•	es," complete the schedule below for eac				<del>,                                     </del>	X
		(A)	(B)	(C)	- #	(D)	
	ļ	Name, address, of each controlled entity	Employer ID Number	Description transfer		Amount of t	transfer
+-						<del></del> -	
а							
b .							
c .	• • • • • • • • • • • • • • • • • • • •						
		Totals					
						Yes	No No
107	·	ng organization receive any transfers from ne Code? If "Yes," complete the schedule					x
Τ	512(b)(15) 61 8	(A)	(B)	(C)	<del></del>	(2)	
	ı	Name, address, of each	Employer ID	Description		(D) Amount of	transfer
+		controlled entity	Number	transfer		-	
a .							
b .							
+				· · · · · · · · · · · · · · · · · · ·		1	
c .							
		Totals			3 2 2 F		
						Ye	s No
108	Did the organiz	ation have a binding written contract in ef	fect on August 17, 2006, o	overing the interest,		<u></u>	1
	rents, royalties	and annuities described in question 107	above?				
	Under p	enalties of perjury, I declare that I have examine ef, it is true, correct, and complete_Declaration	ed this return, including accom of preparer (other than officer)	panying schedules and stateme is based on all information of w	ints, and to the best of n hich preparer has any k	ny knowledge Inowledge.	
Plea	ase	thaten Da			2	14/08	
Sign	1 / 54	gnature of officer	<del></del>		Date		
Her	-	Hudra, Dai	us Deve	lopment L	RECTOR		
	Ту	pe or print name and title		Date	Check if	Preparer's SSN	
Paid	- Johnson		Wilson, CP	10-24-07	setf- employed	(See Gen. Instr. 412-78-	
	parer's Firm's n	ame (or yours BEANKENSHI		PLLC	EIN	▶ 45-049	
use	if self-er	mployed), 109 WESTPA			Phone	615_272	2771
	address	, and ZIP+4 BRENTWOOD,	TN 37027-5	U32	no.	615-373-	3 / / <u>1</u>
							- (2000)

 <u> </u>	 

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

Department of the Treasury Internal Revenue Service

#### **Organization Exempt Under Section 501(c)(3)**

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

Supplementary Information-(See separate instructions.)

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

OMB No. 1545-0047

Employer identification number

2006

Name of the orga		F MIDDLE TENNESSE	E	62-157	1573
Part I	Compensation of the Five Highest Paid Employees	Other Than Officers,	Directors, a	nd Truste	es
	(See page 2 of the instructions. List each one. If the	re are none, enter "No	ne.")		
	(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	( <b>c)</b> Comp.	(d) Contrib empl. ben. & deferred	plans account & other
NONE					
Total number o	f other employees paid over \$50,000	0			
Part II-A	Compensation of the Five Highest Paid Independer (See page 2 of the instructions. List each one (whet	nt Contractors for Pro	fessional Se	rvices e none. e	enter "None.")
	(a) Name and address of each independent contractor paid more than \$50		(b) Type of		(c) Compensation
NONE					
					_
Total number o	f others receiving over \$50,000 for	0		and the collection of the coll	
Part II-B	Compensation of the Five Highest Paid Independent (List each contractor who performed services other firms. If there are none, enter "None." See page 2 cm.	than professional serv	her Service ices, whethe	s ər individu ————	uals or
	(a) Name and address of each independent contractor paid more than \$50		(b) Type of	service	(c) Compensation
NONE					
Total number o \$50,000 for oth	f other contractors receiving over	0			
	Partices Act Notice and the Instructions for Form 990 and Fr	<u> </u>	Sched	ule A (Form	1 990 or 990-EZ) 200

Sche	edule A (Form 990 or 990-EZ) 2006 ROCKETOWN OF MIDDLE TENNESSEE 62-1571573		P	age 2
Pa	art III 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		х
	Organizations that made an election under section 501(h) by filling 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.			
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
С	Furnishing of goods, services, or facilities?	2c		х
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990	2d	Х	
е	Transfer of any part of its income or assets?	2e		Х
3a	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		X
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		х
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g  Did the organization make any taxable distributions under section 4966?	4a 4b		х
b c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		
d	Enter the total number of donor advised funds owned at the end of the tax year			
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	<del></del>	······································	
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		C	)

Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year \_\_\_\_\_\_\_

Schedule A (Form 990 or 990-EZ) 2006

Pi	art l	Reason for Non-Private Founda	tion Status (See p	ages 4 through 7 c	or the Instruc	cuons.)	
l cer <b>5</b>	tify th	at the organization is not a private foundation bed A church, convention of churches, or association			ox.)		
6		A school. Section 170(b)(1)(A)(ii). (Also complete	e Part V.)				
7		A hospital or a cooperative hospital service orga	nization. Section 170(b)(	(1)(A)(iii).			
8		A federal, state, or local government or government	ental unit. Section 170(b	o)(1)(A)(v).			
9		A medical research organization operated in cor	njunction with a hospital.	Section 170(b)(1)(A)(iii)	. Enter the hos	pital's name, c	ity,
		and state ▶					
10		An organization operated for the benefit of a coll (Also complete the <b>Support Schedule</b> in Part IV		or operated by a govern	nmental unit. Se	ction 170(b)(1)(	(A)(iv).
11a	X	An organization that normally receives a substart 170(b)(1)(A)(vi). (Also complete the <b>Support Sc</b>		om a governmental unit	or from the gen	eral public. Sec	tion
11b		A community trust. Section 170(b)(1)(A)(vi). (Als	o complete the Support	: <b>Schedule</b> in Part IV-A.	)		
12		An organization that normally receives: (1) more from activities related to its charitable, etc., funct from gross investment income and unrelated but organization after June 30, 1975. See section 50	tions-subject to certain e siness taxable income (k	xceptions, and <b>(2) no m</b> ess section 511 tax) fror	ore than 33 1/3 n businesses a	3% of its suppor	eceipts rt
13		An organization that is not controlled by any discrequirements of section 509(a)(3). Check the bo	qualified persons (other t	e of supporting organization	tion:	se meets the	
		Type I Type II	Type III-Functionally Int		e III-Other		
Provide the following inform: (a) Name(s) of supported organization(s)		(a)	ation about the suppor (b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	e page 7 of the (d Is the su organizatio the sup organiz governing d	pported on listed in porting ation's	(e) Amount of support
					Yes	No	
Tota	ıl <u></u> .					<b>&gt;</b>	
4.4		An organization organized and operated to test	for public safety. Section	1509(a)(4), (See page 7	of the instruction	ons.)	

_	
Page	- 4

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. (d) 2002 (e) Total (b) 2004 (c) 2003 (a) 2005 Calendar year (or fiscal year beginning in) Gifts, grants, and contributions received. (Do 3,254,767 309,688 538,192 1,348,851 1,058,036 not include unusual grants. See line 28.) Membership fees received . 16 Gross receipts from admissions, merchandise 17 sold or services performed, or furnishing of facilities in any activity that is related to the 226,823 1,411,930 349,963 523,969 311,175 organization's charitable, etc., purpose 18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired 59,112 474,126 127,360 168,355 119,299 by the organization after June 30, 1975 Net income from unrelated business 19 activities not included in line 18 Tax revenues levied for the organization's 20 benefit and either paid to it or expended on 0 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 0 public without charge . Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets . . . . 2,052 39,442 1,243 4,704 31,443 1,061,214 5,180,265 597,675 2,001,423 1,519,953 23 Total of lines 15 through 22 3,768,335 370,852 1,477,454 1,208,778 711,251 Line 23 minus line 17 24 977 5. 15,200 10,612 Enter 1% of line 23 75,367 26a Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26 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 947,015 amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts 26b 3,768,335 26c Total support for section 509(a)(1) test: Enter line 24, column (e) 18 \_\_\_\_\_**474**,**126** Add: Amounts from column (e) for lines: 1,460,583 26d 26b 2,307,752 26e e Public support (line 26c minus line 26d total) 61.2406% 26f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) a For amounts included in lines 15, 16, and 17 that were received from a "disqualified Organizations described on line 12: person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." N/ADo not file this list with your return. Enter the sum of such amounts for each year: (2004) 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 N/A amounts) for each year: (2002) c Add: Amounts from column (e) for lines: 27c 27d and line 27b total d Add: Line 27a total 27e Public support (line 27c total minus line 27d total) ..... Total support for section 509(a)(2) test: Enter amount from line 23, column (e) % 27g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27h % Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 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. Schedule A (Form 990 or 990-EZ) 2006

	CKTOW	60 455				
A STATE OF THE PARTY.	n 990 (2006) ROCKETOWN OF MIDDLE TENNESSEE art IV-A Reconciliation of Revenue per Audited Financial S	62-157: tatements With		eturn	(See the	Page 5
	instructions.)	tatomonto min	roronao por re	•••••	(555 1	
a	Total revenue, gains, and other support per audited financial statements			а	1,	320,237
b	Amounts included on line a but not on Part I, line 12:				•	
1	Net unrealized gains on investments	b1				
2	Donated services and use of facilities	b2				
3		b3				
4	Other (specify):					
	Other (specify): SEE STATEMENT	b4	173,553			
	Add lines <b>b1</b> through <b>b4</b>			b		173,553
С	Subtract line <b>b</b> from line <b>a</b>			С	1,	146,684
d	Amounts included on Part I, line 12, but not on line a:					
1	Investment expenses not included on Part I, line 6b	d1				
2	Other (specify):					
		1 10				
	Add lines d1 and d2			d		
е	Total revenue (Part I, line 12). Add lines c and d			е	1,	146,684
Pa	art IV-B Reconciliation of Expenses per Audited Financial	Statements Wit	h Expenses pe	r Ret	urn	
а	Total expenses and losses per audited financial statements			а	1,	378,581
b	Amounts included on line <b>a</b> but not Part I, line 17:					
1	Donated services and use of facilities	b1				
2		b2				
3		b3				
4	Other (specify):					
	SEE STATEMENT		173,553			
	Add lines b1 through b4			b		173,553
С	Subtract line <b>b</b> from line <b>a</b>			С	1,	205,028
d	Amounts included on Part I, line 17, but not on line a:					
1	Investment expenses not included on Part I, line 6b	d1				
2	Other (specify):					
	SEE STATEMENT	d2	2			
	Add lines d1 and d2			d		2
е	Total expenses (Part I, line 17). Add lines c and d		<b>&gt;</b>	е	1,	205,030
Pa	irt V-A Current Officers, Directors, Trustees, and Key Emporkey employee at any time during the year even if they were not co	oloyees (List each	person who was an	officer	, director, tr	ustee,
				(D)C	ontributions to e benefit plans & d compensation	(E) Expense account and other
	(A) Name and address	(B) Title and average hours pe week devoted to position	(ii not paid, enter -0)	deferre	d compensation plans	account and other allowances
AU	DRA DAVIS NASHVILLE	DEV DIRECTOR				
		1 .	1	1	_	1

	(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
AUDRA DAVIS	NASHVILLE	DEV DIRECTOR		·	
401 6TH AVENUE SOUTH	TN 37203	40	46,000	0	0
MARY SETTLE	NASHVILLE	OPERATNS DIR			
401 6TH AVENUE SOUTH	TN 37203	40	48,000	0	0
BENJAMIN CISSELL	NASHVILLE	OUTREACH DIR			
401 6TH AVENUE SOUTH	TN 37203	40	48,000	0	0
TODD EVANS	NASHVILLE	MARKETNG MGR			
401 6TH AVENUE SOUTH	TN 37203	40	25,000	0	0
KYLE SLOAN	NASHVILLE	SKATEPRK MGR			
401 6TH AVENUE SOUTH	TN 37203	40	25,000	0	0
ALEX MCGLOTHLIN	NASHVILLE	SKATESHP MGR			
401 6TH AVENUE SOUTH	TN 37203	40	28,500	0	. 0
KENT MILLER	NASHVILLE	PROGRAM MGR			
401 6TH AVENUE SOUTH	TN 37203	40	25,000	0	- 0
					·

	(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,	7	Yes	No
	other governing instrument, or in a resolution of its governing body?	29	Lat. 1996/1986	26/25/27 NOT NOT
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	28 PH 3 S 10 L	845555
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	\$ 121A.196	200 E.
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:	220		
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	<del> </del>	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	32b		
	basis?	320	-	<del>                                     </del>
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	32c		
	with student admissions, programs, and scholarships?	32d	<b></b> -	<del> </del>
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32u	t.Viet	
	A MALLIN CHARLES AND A CONTROL OF THE CONTROL OF TH			
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
	Do the second of a disciplinate by some in any unity properties			
33	Does the organization discriminate by race in any way with respect to:			
_	Chudontal rights or privilagos?	33a	POST PROGRAM	1.1 T1578279470E.An
а	Students' rights or privileges?		ļ	
b	Admissions policies?	33b		
D	Autiliaajona politica:			
С	Employment of faculty or administrative staff?	33c		
·	Employment of labeling of automatical and a state of the			
d	Scholarships or other financial assistance?	33d		
•				
е	Educational policies?	33e		
•				
f	Use of facilities?	33f		<u> </u>
g	Athletic programs?	33g		
_				
h	Other extracurricular activities?	33h		a seessen
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
		8.00		
				5 (449.40)
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	+-	<del> </del>
		34b	1	
b	Has the organization's right to such aid ever been revoked or suspended?	375		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05			
35	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	ou starre ir inidile	4-14-5789999
	DI Key. Floc. 15-50, 1915-2 C.D. 501, Covering racial horidiscinnination: in 140, attach an explanation			

Page	ĸ

200000000000000000000000000000000000000		ROCKETOWN OF litures by Electing ONLY by an eligib	<b>Public Charities</b>	(See pag	e 10	of the ins	struction N/A		<b>3</b> Page 6
Ch		ngs to an affiliated group						d cont	rol" provisions apply.
CIR		Lobbying Expend		<u>~ 1 1 11 11 11 11 11 11 11 11 11 11 11 1</u>	, ou oil	Affilia	(a) ted group otals		(b)  To be completed for all electing organizations
	(The term "expendi	tures" means amounts p	oaid or incurred.)						organizations
36	Total lobbying expenditures to influence	public opinion (grassro	ots lobbying)		36				
	Total lobbying expenditures to influence				37				
38	Total lobbying expenditures (add lines 3	66 and 37)			38				
	Other exempt purpose expenditures			1	39				
	Total exempt purpose expenditures (ad				40				
	Lobbying nontaxable amount. Enter the								
	If the amount on line 40 is-		ntaxable amount is-						
	Not over \$500,000	20% of the amount of	on line 40	7					600
	Over \$500,000 but not over \$1,000,000		of the excess over \$500,0	1 1					
	Over \$1,000,000 but not over \$1,500,000		of the excess over \$1,000	,000	41				
	Over \$1,500,000 but not over \$17,000,000		f the excess over \$1,500,0						
	Over \$17,000,000								
42	Grassroots nontaxable amount (enter 2			- 1	42				
	Subtract line 42 from line 36. Enter -0- it			1	43				
	Subtract line 41 from line 38. Enter -0- it			1	44				
•									
	Caution: If there is an amount on either	line 43 or line 44, you n	nust file Form 4720.				-9		
			ging Period Und	er Sectior	า 501	(h)			
	(Some organization	ons that made a section	501(h) election do not	have to com	plete a	all of the five	columns	below	<i>i</i> .
	, ,	See the instructions for							
			Lobbying Expe	nditures Du	ring 4	-Year Aver	aging Pe	riod	
	Calendar year (or	(a)	(b)	(c)	)		(d)		(e)
	fiscal year beginning in)	2006	2005	200	4		2003		Total
-	Lobbying nontaxable amount								
46	Lobbying ceiling amount (150% of								
	line 45(e))								
<u>47</u>	Total lobbying expenditures								
48	Grassroots nontaxable amount				annona l'Albana arana			Contract to the	
49	Grassroots ceiling amount (150% of								
	line 48(e))								
and 2.44 (\$2.44.0)	Grassroots lobbying expenditures	by Nonelecting P	Public Charities			, <b>L</b>			L
98.0	Part VI-B Lobbying Activity	y by organizations	that did not come	olete Part	\/I_A	) (See na	nge 13 (	of the	e instructions.) N/A
	ing the year, did the organization attemp	to influence national o	toto or local logislation	including at	<u> </u>	<i>)</i> (000 pc	igo io		
Dur	ing the year, did the organization attemp	t to influence national, s	tate of local legislation	, including at	ıy		Yes	No	Amount
	empt to influence public opinion on a legis								
a			roported on lines ath	rough <b>h</b> \	<i>.</i>				
b							1		<ul> <li>consequences a consequence of the cons</li></ul>
С.									
d	-								
e	• •								
f	m' to a start with to sintate and their of								
g								<b>-</b>	
h	•						12588883		
i	Total lobbying expenditures (Add lines			the labbuing	 activit			wante Collabor	1
	If "Yes" to any of the above, also attac	ni a staternerit giving a t	Jeranea aescription of	are roppying	GOUVIL				Earm 000 or 000 EZ\ 2006

Daga	7
rade	•

-				nsfers To and Transaction e page 13 of the instruction	s and Relationships With Noncharitable	9		
51	Did the reno				ith any other organization described in section			
51				organizations) or in section 527, re				
_				oncharitable exempt organization of			Yes	No
а						51a(i)	100	X
						a(ii)	l	X
						μ(11)		<del></del>
b	Other transa					b(i)		X
						b(i)	<u> </u>	v
						b(ii)	<u> </u>	X X X X
	(iii) Renta	I of facilities, equipment	t, or other as	sets		b(iii)		<u>A</u>
	(iv) Reimb	oursement arrangement	is			b(iv)		X
						b(v)		X
	(vi) Perfor	rmance of services or m	nembership o	or fundraising solicitations		b(vi)		X
С						С		X
d					n (b) should always show the fair market value of the			
u					tion received less than fair market value in any			
				umn (d) the value of the goods, oth				
			, SHOW III COI		(d)			
	(a) Line no.	(b) Amount involved	Name of	(c) f noncharitable exempt organization	Description of transfers, transactions, and sharing	arrangem	ents	
	Enic no.	, undant involved						
N,	/A							
							·	
52a b	described in		ode (other th	T	527?	►	es 2	X No
		(a) Name of organization		(b) Type of organization	(c) Description of relationship			
	N/A							
								·
	·							
DAA	>				Schedule A (Form	1 990 or	990-E	Z) 2006

ROCKTOW								
			S	pecial Event	s Schedule			2006
Form 99	90	For calenda	r year 2006, or tax year be	-ainnina	7/01/06	, and ending	6/30/07	2006
Vame		1 of calcilidat	year 2000, or tax year be	,gni mig		, and onenig		tification Number
ROCKETO	WN O	F MIDDI	LE TENNESSEE				62-1571	.573
			(A)	(B)	(C)		Others	Total
Gross receipts Less contrib Gross revenue Less direct e Net income (lo	utions e expenses		95,965 0 95,965 1,021 94,944	0 0 0 0		0 0 0 0 0	0 0 0 0 0	95,965 0 95,965 1,021 94,944
Description:	(A)	<u> </u>			<del></del>			
	(B)				<del></del>			
	(C)							
	Others				History			
					<del></del>			
		<del></del>						

Forms 990 / 990-PF

# Mortgages and Other Notes Payable

7/01/06 , and ending

6/30/07

2006

Name

Employer Identification Number

ROCKETOWN	OF	MIDDLE	TENNESSEE

For calendar year 2006, or tax year beginning

62-1571573

			- ADDITION				
	Name	e of lender		Relationship to disqualified person			
1) <b>F</b>	'IFTH THIRD BAI	NK		NONE			
2)							
3)							
4)							
5)							
6)							
7)							
(8)							
9)							
10)							
	0	Т	Moturity		Interest		
	Original amount borrowed	Date of loan	Maturity date	Repayment terms	rate		
4)	350,000	1/01/06	1/01/07	AT MATURITY	5.750		
1)	330,000	1,02,00					
2) 3)							
4)							
5)							
6)							
7)							
8)							
9)							
10)							
	Security p	rovided by borrower		Purpose of learning REVOLVING LINE OF CE			
2)							
3)							
<u>4)</u>							
5)							
6)							
フ\							
				1			
7) 8) 9)							
7) 8) 9) 10)							
	Consideration for	urnished by lender		Balance due at beginning of year	Balance due at end of year		
8) 9) 10)	Consideration for	urnished by lender			Balance due at end of year 25,000		
8) 9) 10)	Consideration for	urnished by lender		beginning of year	end of year		
8) 9) 10)	Consideration for	urnished by lender		beginning of year	end of year		
8) 9) 10)	Consideration for	urnished by lender		beginning of year	end of year		
8) 9) 10)	Consideration for	urnished by lender		beginning of year	end of year		
8) 9) 10)	Consideration for	urnished by lender		beginning of year	end of year		
8) 9) 10)	Consideration for	urnished by lender		beginning of year	end of year		
8) 9) 10)	Consideration for	urnished by lender		beginning of year	end of year		
	Consideration for	urnished by lender		beginning of year	end of year		

# ROCKTOW ROCKETOWN OF MIDDLE TENNESSEE

62-1571573

# **Federal Statements**

FYE: 6/30/2007

#### Statement 1 - Form 990, Line 10c - Sales of Inventory

Description	Gross Sales	cogs	Gross Profit		
COFFEE SUPPLIES AND SKATE P	\$ 282,455	\$ <u>172,532</u>	\$ <u>109,923</u>		
TOTAL	\$ 282,455	\$ 172,532	\$ 109,923		

# Statement 2 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

Description		Amount	
BOOK / TAX DEPRECIATION DIFFERENCE	\$	2	
TOTAL	\$	2	

# Statement 3 - Form 990, Part II, Line 25a - Compensation of Current Officers

Name	Program Services	Management & General	Fundraising
EXPENSES	\$	\$	\$
OFFICER COMPENSATION COMPENSATION	199,500		46,000
TOTAL	\$ 199,500	\$ 0	\$ 46,000

# Statement 4 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
OTHER EXPENSES	\$ 25,229	\$	\$	\$ 25,229
OTHER EXTENDED				
EXPENSES				
ENTERTAINMENT	15,874	15,874		
AUTOMOBILE	2,961	2,813	138	10
BANK FEES	3,024		3,024	
BOARD EXPENSE	247		247	
CASH OVER (SHORT)	-738		-738	
COMPUTER SOFTWARE/HARDWARE	851	65	786	
DUES & SUBSCRIPTIONS	3,422	1,175	1,173	1,074
FOOD AND ENTERTAINMENT	12,730	8,415	4,003	312
GIFTS	4,659	465	2,881	1,313
INSURANCE	72,635	57,340	15,295	
JANITORIAL	11,127	11,127		
MARKETING AND ADVERTISING	21,302	16,359	2,460	2,483
MEETINGS	879	118	598	163
MISCELLANEOUS	714	594	120	
OUTREACH	386	386		
PURCHASED SERVICES OTHER	19,530	10,783	5,913	2,834
PURCHASED SERVICES PERSONNEL	112,082	107,457	3,325	1,300
REPAIRS AND MAINTENANCE	44,494	42,070	2,424	
OTHER SUPPLIES	26,281	18,222	7,796	263

#### ROCKTOW ROCKETOWN OF MIDDLE TENNESSEE

62-1571573

# **Federal Statements**

FYE: 6/30/2007

#### Statement 4 - Form 990, Part II, Line 43 - Other Functional Expenses (continued)

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
TAXES AND LICENSES TUITION AND TRAINING	\$ 42,649 3,321	623	\$ 9,132 2,253	\$ 445
UNIFORMS UTILITIES	151 68,645	151 64,415	2,115	2,115
TOTAL	\$ 492,455	\$ 391,969	\$ 62,945	\$ 37,541

#### Statement 5 - Form 990, Part III - Organization's Primary Exempt Purpose

ROCKETOWN'S MISSION IS TO CREATE CULTURALLY RELEVANT ENVIRONMENTS THAT FOSTER VITAL RELATIONSHIPS BETWEEN DISENFRANCHISED ADOLESCENTS AND CHRISTIAN MENTORS IN ORDER TO MEET THE SOCIAL, SPIRITUAL, AND PHYSICAL NEEDS OF THE TEENS. IN 2007, ROCKETOWN HAD OVER 115,000 VISITS REPRESENTING EVERY SOCIAL DEMOGRAPHIC OF THE GREATER NASHVILLE AREA AND SURROUNDING COUNTIES.

# Statement 6 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description				
	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
	\$ 3,725,962 \$	5	\$ 3,258,023	\$ 706,163
TOTAL	\$ 3,725,962 \$	3 (	\$ 3,258,023	\$ 706,163

### Statement 7 - Form 990, Part IV-A - Other Revenue Included on Financial Statements

Description	Amount
COST OF GOOD SOLD SPECIAL EVENTS EXPENSES	\$ 172,532 1,021
TOTAL	\$ <u>173,553</u>

### Statement 8 - Form 990, Part IV-B - Other Expenses included on Financial Statements

Description		Amount
COST OF GOODS SOLD SPECIAL EVENT EXPENSES	\$	172,532 1,021
TOTAL	\$ \$	173,553

### ROCKTOW ROCKETOWN OF MIDDLE TENNESSEE

62-1571573

**Federal Statements** 

FYE: 6/30/2007

# Statement 9 - Form 990, Part IV-B - Other Expenses included on Return

Description		ount
BOOK / TAX DEPREC DIFFERENCE	\$	2
TOTAL	\$	2

#### Statement 10 - Form 990, Part VIII - Relationship of Activities

Line No.	Description							
93A	THE ROCKET TOWN MUSIC VENUE: ROCKETOWN'S NIGHT CLUB							
93A	OFFERS TEENAGERS A SAFE ALTERNATIVE TO ILLEGAL ACTIVITIES							
93A	AND UNSAFE PARTIES							
102	INCOME FROM SALES OF GOODS AT THE SKATEPARK AND THE							
102	EMPYREAN COFFEE BAR							
103A	OTHER PROGRAMS							

#### Statement 11 - Schedule A, Part IV-A, Line 22 - Other Income

Description		2005	 2004	_	2003	_	2002
MISCELLANEOUS REVENUE	\$	31,443	\$ 4,704	\$_	1,243	\$_	2,052
TOTAL	\$ _	31,443	\$ 4,704	\$	1,243	\$	2,052

Department of the Treasury

#### **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No. 1545-0172

Identifying number Name(s) shown on return 62-1571573 ROCKETOWN OF MIDDLE TENNESSEE Business or activity to which this form relates INDIRECT DEPRECIATION 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. 108,000 Maximum amount. See the instructions for a higher limit for certain businesses 2 Total cost of section 179 property placed in service (see instructions) 2 430,000 3 Threshold cost of section 179 property before reduction in limitation 3 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 ...... (b) Cost (business use only) (a) Description of property 6 Listed property. Enter the amount from line 29 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2005 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 ..... 12 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. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed 14 property) placed in service during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 148,638 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A 0 17 MACRS deductions for assets placed in service in tax years beginning before 2006 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here 18 Section B-Assets Placed in Service During 2006 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and (d) Recovery (f) Method (g) Depreciation deduction year placed in (e) Convention (a) Classification of property period only-see instructions) 3-year property 19a 5-year property 7-year property d 10-year property 15-year property 20-year property S/L 25 yrs. 25-year property S/L 27.5 yrs. MM Residential rental 27.5 yrs. S/L property MM MM S/L 39 yrs. Nonresidential real MM property Section C-Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System S/L 20a Class life S/I 12 yrs. **b** 12-year S/L MM 40 yrs. 40-year Summary (see instructions) 21 Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 22 148,638 Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instru For assets shown above and placed in service during the current year, 23 enter the portion of the basis attributable to section 263A costs

FYE: 6/30/2007

# ROCKTOW ROCKETOWN OF MIDDLE TENNESSEE 62-1571573 Federal Asset Report Form 990, Page 1

Asset	Description	Date I <u>n Service</u>	Cost	Bus Sec Bas % 179Bonus for D		Prior	Current
Other 1	<u>Depreciation:</u> ARCHITECTURE	6/30/02	25,115	2	5,115 15 MO S/L	6,697	1,675
2	SECURITY SYSTEM INSULATION AND SOUND ABATEMEN	1/10/03 1/10/03	34,419 2,376		4,419 5 MO S/L 2,376 10 MO S/L	24,093 832	6,884 237
3 4	LOW VOLATE WIRING AND LADDER I	1/10/03	20,780	2	0,780 39 MO S/L	1,865	533
5	MINI BLINDS THROUGHOUT FACILITY	2/18/03 1/06/03	1,885 2,117,690		1,885 10 MO S/L 7,690 39 MO S/L	628 190,049	189 54,300
6 7	CONSTRUCTIONS COSTS CONSULTANTS	1/10/03	91,179	9	1,179 39 MO S/L	8,183	2,338
8 9	OUTDOOR SIGN FOR BLDG PARTY ROOM CARPET	3/01/03 8/31/03	3,000 1,579		3,000 10 MO S/L 1,579 10 MO S/L	1,000 447	300 158
10	BUILDING 401 6TH AVE SO	10/15/03	275,167	27	5,167 40 MO S/L	18,918	6,879
11 12	CONCRETE SIDEWALK NEAR OFFICE POS TERMINALS	12/10/04 1/10/03	1,000 28,569		1,000 15 MO S/L 8,569 5 MO S/L	106 19,998	66 5,714
13	3ID CARD SYSTEMS	1/10/03	18,586	1	8,586 5 MO S/L	13,010	3,718 0
14 15	DELL POWER EDGE 2600 SERVER 17 INCH LCD FLAT PANEL MONITOR	1/10/03 1/30/03	4,830 599		4,830 3 MO S/L 599 3 MO S/L	4,830 599	Ö
16	2 DELL DIMENSION COMPUTERS	9/25/02	2,412		2,412 3 MO S/L 1,180 3 MO S/L	2,412 1,180	0 0
	DELL DIMENSION COMPUTERS ADMIN SERVER	12/05/02 6/30/03	1,180 5,193		5,193 5 MO S/L	3,116	1,038
19	DELL DESKTOPS - CYBER CAFE	11/19/03	1,328		1,328 5 MO S/L 1,174 3 MO S/L	686 848	266 326
	HP LASERJET 2300 PRINTER VIDEO EDITING EQUIPMENT	5/01/04 7/15/04	1,174 2,232		2,232 5 MO S/L	893	446
22	SONY DIGITAL CAMCORDER	8/10/04 6/09/05	1,240 5,439		1,240 5 MO S/L 5,439 3 MO S/L	475 1,964	248 1,813
23 24	G5 1.8GHz IMAC COMPUTER OFFICE FURNITURE	12/01/01	500		500 5 MO S/L	458	42
	OFFICE FURNITURE OFFICE FURNITURE	1/07/02 1/07/02	1,082 740		1,082 5 MO S/L 740 5 MO S/L	974 666	108 74
27	DRY DISPLAY CASE	1/10/03	1,000		1,000 5 MO S/L	700	200
28 29	REFRIGERATED DISPLAY CASE 33 CUSTOM CAFE TABLES	1/10/03 1/10/03	2,500 2,550		2,500 5 MO S/L 2,550 5 MO S/L	1,750 1,785	500 510
30	60 USED BALCK CHAIRS	1/10/03	2,398		2,398 5 MO S/L	1,679 434	479 124
31 32	18 CAFE TABLE BASES SKATE PARK RETAIL FIXTURES	1/10/03 1/06/03	869 2,820		2,820 5 MO S/L	1,974	564
33	VINTAGE STORE RETAIL FIXTURES	1/01/03	1,838		1,838 5 MO S/L 400 10 MO S/L	1,287 140	367 40
34 35	2 STAINLESS STEEL TABLES 24 SWIVLE BAR STOOLS	1/10/03 1/10/03	400 1,199		1,199 5 MO S/L	839	240
36	5 COMPARTMENT FILE CABINET	2/05/03 2/05/03	607 495		607 10 MO S/L 495 5 MO S/L	207 338	61 99
37 38	3 ROLLING OFFICE CHAIRS GREEN ROOM FURNITURE	1/10/03	1,411		1,411 10 MO S/L	494	141
39	OFFICE FURNITURE	2/05/03 1/10/03	1,779 5,147		1,779 5 MO S/L 5,147 7 MO S/L	1,215 2,574	356 735
40 41	8 SOFAS 29 CHAIRS	1/10/03	10,242		0,242 7 MO S/L	5,121	1,463
42 43	SKATEPARK LOCKERS LAND	3/14/05 10/15/03	1,450 1,050,000		1,450 7 MO S/L 50,000 0 Land	276 0	207 0
44	HWS TELEVISION	8/09/94	1,712	,,,,	1,712 7 MO S/L	1,712 4,400	0
	STAGE LIGHTING SYSTEM SOUND GEAR CAPSTONE MUSIC	8/12/95 11/09/95	4,400 5,075		4,400 10 MO S/L 5,075 10 MO S/L	5,075	0
47	SOUND EQUIP NASH CARTAGE	11/21/95	1,068		1,068 10 MO S/L 667 10 MO S/L	1,068 667	0
	VOCAL PROCESSING UNIT CORD WRAPS	1/09/96 4/25/96	667 229		229 10 MO S/L	229	0
50	MONITOR MIXING BOARD	3/01/96	499 735		499 5 MO S/L 735 5 MO S/L	499 735	0 0
51 52	SNAKE STAGE STUDIO LASER LIGHTS	2/11/97 3/13/97	747		747 5 MO S/L	747	0
53	SOUND/LIGHTS EQUIPMENT	6/24/99 8/05/00	1,000 1,489		1,000 5 MO S/L 1,489 3 MO S/L	1,000 1,489	0
55	COMPUTER - SHAWN 2 TECHNIC 1200'S	8/07/00	1,000		1,000 5 MO S/L	1,000	0
56	AMERICAN MUSIC SUPPLY CANON 2020 COPY MACHINE	8/17/00 8/24/00	2,980 869		2,980 5 MO S/L 869 3 MO S/L	2,980 869	0
58	TENT	5/07/01	3,270		3,270 5 MO S/L	3,270	0 115
59 60	HP COMPUTER PALM PILOTS	12/05/01 6/19/02	1,375 5,374		1,375 5 MO S/L 5,374 5 MO S/L	1,260 4,299	1,075
61	COMPUTER FOR OUTREACH	9/19/01	3,236		3,236 5 MO S/L	3,074 3,518	162 251
	DIGITAL MOVIE CAMERA LIGHTING	10/30/01 7/23/01	3,769 4,500		4,500 5 MO S/L	4,425	, 75
64	SKATE PARK RAMPS	1/06/03	200,662 6,400	20	00,662 10 MO S/L 6,400 10 MO S/L	70,232 2,240	20,066 640
65 66	RANCILIO ESPRESSO MACHINE LARGE RANCHILIO COFFEE GRINDER	1/10/03 1/10/03	700		700 7 MO S/L	350	100
67	3 COMPARTMENT SINK	1/10/03 1/10/03	796 1,236		796 10 MO S/L 1,236 5 MO S/L	279 865	79 247
80	2 GRINDERS	1/10/03	1,230				

FYE: 6/30/2007

ROCKTOW ROCKETOWN OF MIDDLE TENNESSEE
62-1571573 Federal Asset Report Form 990, Page 1

		Date		Bus	Sec	Basis			
Asset	Description	In Service	Cost_	_%	<u>179</u> B <u>onu</u> s_		PerConv Meth	Prior	Current
69	2 COFFEE BREWERS	1/10/03	1,099			1,099	5 MO S/L	769	220
70	16 MOTOROLA WALKIE TALKIES	1/10/03	2,364			2,364	3 MO S/L	2,364	0
71	SOUND & LIGHTS SYSTEM	1/10/03	223,308			223,308	10 MO S/L	78,158	22,331
72	USED SCISSOR LIFT	1/10/03	1,500			1,500	2 MO S/L	1,500	0
73	PROTECTIVE PADS FOR THE PAD REN		1,840			1,840	2 MO S/L	1,840	0
74	WASHER & DRYER	1/06/03	570			570	5 MO S/L	399	114
75	COPY MACHINE FOR SKATE PARK	1/06/03	908			908	3 MO S/L	908	0
76	GREEN ROOM TV/VCR	1/10/03	513			513	5 MO S/L	359	103
77	60" TV (DONATED)	2/01/03	2,000			2,000	5 MO S/L	1,367	400
78	PHONE SYSTEM	1/01/03	11,000			11,000	7 MO S/L	5,500	1,571
79	LOUDSPEAKERS & MONITOR	9/10/03	2,006			2,006	5 MO S/L	1,137 439	401
80	STAGE CURTAIN	9/10/03	775			775	5 MO S/L	439 354	155 176
81	2 EV MTS-1FULL RANGE CABS	6/17/04	884			884	5 MO S/L 5 MO S/L	4,267	1,600
82	NFORMUS TECHNOLOGY	11/01/03	8,000			8,000 4,147	10 MO S/L	864	415
83	SKATE PARK RAMP IMPROVEMENTS	5/20/04	4,147			6,368	5 MO S/L	1,274	1,273
84	RAMP IMPROVEMENTS	6/30/05 9/30/04	6,368 1,298			1,298	5 MO S/L	454	260
85	MICROPHONES (6) CABLES COPY MACHINE SKATE PARK	10/09/04	534			534	5 MO S/L	187	107
86	MICROSOFT XP	1/11/02	974			974	5 MO S/L	877	97
87 88	FUNDRAISING SOFTWARE	11/05/01	2,443			2,443	5 MO S/L	2,280	163
89	FUNDRAISING SOFTWARE	12/21/01	2,227			2,227	5 MO S/L	2,004	223
90	MICROSOFT RETAIL MGMT SOFTWAR		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	0
92	QUICKBOOS PROFESSIONAL 2003	9/10/02	459			459	3 MO S/L	459	0
93	NSPIRE SOFTWARE	1/01/03	500			500		350	100
94	NON PROFIT BOOKS	6/02/05	1,311			1,311	3 MO S/L	473	437
95	MAC COMPUTER	11/09/05	1,222			1,222	5 MO S/L	163	244
96	DELL LAPTOP	6/20/06	855			855	5 MO S/L	0	171
97	SKATE PARK IMPROVEMENTS	8/31/05	1,154			1,154		192	231
98	BOX TRUCK	5/01/06	2,500			2,500		83	500
99	BOX TRUCK	6/01/06	2,500			2,500		42	500
100	BOX TRUCK	6/30/06	2,000			2,000		0	400 198
101	AIRCONDITIONING UNIT SKATEPARK		23,809			23,809		0	198
102	NEW COUNTERS	6/30/07	728			728	5 MO S/L		
	<b>Total Other Depreciation</b>		4,308,023			4,308,023		557,525	148,638
								EEO E0 E	140 (20
	Total ACRS and Other Deprec	ciation	4,308,023		;	4,308,023		557,525	148,638
			4 200 003			4 200 022		557,525	148,638
	Grand Totals		4,308,023			4,308,023		0 7,525	140,030
	Less: Dispositions					<u>.</u>			
	Net Grand Totals		4,308,023			4,308,023		557,525	148,638