

Form **990-EZ**Department of the Treasury  
Internal Revenue Service**Short Form**  
**Return of Organization Exempt From Income Tax**

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

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

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

OMB No. 1545-1150

**2006****Open to Public  
Inspection**

<b>A</b> For the 2006 calendar year, or tax year beginning , 2006, and ending , 20		
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>Boxing Resource Center</b> Number and street (or P.O. box, if mail is not delivered to street address) Room/suite <b>707-B Main Street</b> City or town, state or country, and ZIP + 4 <b>Nashville, TN 37206</b>	<b>D</b> Employer identification number <b>75 : 3055338</b> <b>E</b> Telephone number <b>( 615) 256-9110</b> <b>F</b> Group Exemption Number . . . ► <b>n/a</b>

• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

**G** Accounting method: ☐ Cash ☒ Accrual  
Other (specify) ►

**I** Website: ► **www.BoxingResource.com**

**H** Check ☐ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**J** Organization type (check only one)—☒ 501(c) ( 3 ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally **not** more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ . . . ► \$

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 47 of the instructions.)

<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received . . . . .	<b>1</b> <b>69,814</b>
	<b>2</b> Program service revenue including government fees and contracts . . . . .	<b>2</b> <b>19,643</b>
	<b>3</b> Membership dues and assessments . . . . .	<b>3</b>
	<b>4</b> Investment income . . . . .	<b>4</b>
	<b>5a</b> Gross amount from sale of assets other than inventory . . . . . <b>5a</b>	
	<b>b</b> Less: cost or other basis and sales expenses . . . . . <b>5b</b>	
	<b>c</b> Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule). . . . . <b>5c</b>	
	<b>6</b> Special events and activities (attach schedule). If any amount is from <b>gaming</b> , check here <input type="checkbox"/>	
	<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1) . . . . . <b>6a</b>	
<b>b</b> Less: direct expenses other than fundraising expenses . . . . . <b>6b</b>		
<b>c</b> Net income or (loss) from special events and activities (line 6a less line 6b) . . . . . <b>6c</b>		
<b>7a</b> Gross sales of inventory, less returns and allowances . . . . . <b>7a</b>		
<b>b</b> Less: cost of goods sold . . . . . <b>7b</b>		
<b>c</b> Gross profit or (loss) from sales of inventory (line 7a less line 7b) . . . . . <b>7c</b>		
<b>8</b> Other revenue (describe ► _____) . . . . . <b>8</b>		
<b>9</b> <b>Total revenue</b> (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8). . . . . ► <b>9</b> <b>89,457</b>		
<b>Expenses</b>	<b>10</b> Grants and similar amounts paid (attach schedule) . . . . . <b>10</b>	
	<b>11</b> Benefits paid to or for members . . . . . <b>11</b>	
	<b>12</b> Salaries, other compensation, and employee benefits . . . . . <b>12</b>	
	<b>13</b> Professional fees and other payments to independent contractors . . . . . <b>13</b>	
	<b>14</b> Occupancy, rent, utilities, and maintenance . . . . . <b>14</b> <b>13,661</b>	
	<b>15</b> Printing, publications, postage, and shipping . . . . . <b>15</b> <b>84</b>	
	<b>16</b> Other expenses (describe ► <b>see attached</b> ) . . . . . <b>16</b> <b>53,989</b>	
<b>17</b> <b>Total expenses</b> (add lines 10 through 16) . . . . . ► <b>17</b> <b>67,734</b>		
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (line 9 less line 17) . . . . . <b>18</b> <b>21,723</b>	
	<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . . <b>19</b> <b>1,368</b>	
	<b>20</b> Other changes in net assets or fund balances (attach explanation) . . . . . <b>20</b> <b>1,673</b>	
	<b>21</b> Net assets or fund balances at end of year (combine lines 18 through 20) . . . . . ► <b>21</b> <b>24,764</b>	

**Part II Balance Sheets**—If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.

(See page 51 of the instructions.)

	(A) Beginning of year	(B) End of year
<b>22</b> Cash, savings, and investments . . . . .	<b>2,210</b>	<b>22</b> <b>2,988</b>
<b>23</b> Land and buildings . . . . .		<b>23</b>
<b>24</b> Other assets (describe ► <b>see attached</b> ) . . . . .	<b>11,798</b>	<b>24</b> <b>21,726</b>
<b>25</b> <b>Total assets</b> . . . . .	<b>14,008</b>	<b>25</b> <b>24,714</b>
<b>26</b> <b>Total liabilities</b> (describe ► _____) . . . . .	<b>12,640</b>	<b>26</b> <b>-50</b>
<b>27</b> <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21) . . . . .	<b>1,368</b>	<b>27</b> <b>24,764</b>

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

Cat. No. 106421

Form **990-EZ** (2006)**FILE**

**Part III Statement of Program Service Accomplishments** (See page 51 of the instructions.)**Expenses**

What is the organization's primary exempt purpose?

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)

28	See attached		
	(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	
29			
	(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30			
	(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31	Other program services (attach schedule)		
	(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32	Total program service expenses (add lines 28a through 31a)	32	59,865

**Part IV List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated. See page 52 of the instructions.)

(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	(E) Expense account and other allowances
	See attached			

**Part V Other Information** (Note the statement requirement in General Instruction V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. <b>37a</b>		
b Did the organization file Form 1120-POL for this year?	37b	X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	X
b If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved	38b	
39 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	

**Part V Other Information** (Note the statement requirement in General Instruction V.) (Continued)**40a** 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:

section 4911 ▶ -0- ; section 4912 ▶ -0- ; section 4955 ▶ -0-

**b** 501(c)(3) and (4) organizations. 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 an explanation

	Yes	No
<b>40b</b>		X

**c** Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ -0-**d** Enter amount of tax on line 40c reimbursed by the organization ▶ -0-**e** All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?

<b>40e</b>		X
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**41** List the states with which a copy of this return is filed. ▶ TN**42a** The books are in care of ▶ Christy Halbert Telephone no. ▶ (615) 256-9110  
Located at ▶ 707-B Main Street, Nashville, TN ZIP + 4 ▶ 37206**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)?

	Yes	No
<b>42b</b>		X

If "Yes," enter the name of the foreign country: ▶

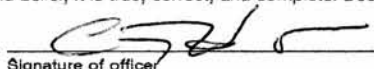
See the instructions for exceptions and filing requirements for **Form TD F 90-22.1**.**c** At any time during the calendar year, did the organization maintain an office outside of the U.S.?

<b>42c</b>		X
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If "Yes," enter the name of the foreign country: ▶

**43** Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here ▶ ☐  
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43Please  
Sign  
Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer   
Christy Halbert, President

Date 5/23/08

Type or print name and title.

Paid  
Preparer's  
Use OnlyPreparer's  
signature

Date 5/23/08

Check if  
self-  
employed ▶ ☐

Preparer's SSN or PTIN (See Gen. Inst. X)

P00563890

Firm's name (or yours  
if self-employed),  
address, and ZIP + 4

Acc-Tax Foundation, 2000 Mallory Lane, Suite 130-603, Franklin, TN 37067

Phone no. (877) 463-3660

Form 990-EZ (2006)



Printed on Recycled Paper

Boxing Resource Center  
Attachment to Form 990-EZ  
Year Ended 12/31/2006

FEIN 75-3055338

Part I, Line 16 Other Expenses

Leaps Program expenses not included elsewhere	27,421
Outreach program expenses not included elsewhere	15,802
Depreciation	3,276
Marketing & advertising	2,124
Supplies	1,955
Telephone	1,049
Equipment rental and maintenance	822
Travel	467
Dues & Subscriptions	449
Other	624
	<u>53,989</u>

Part I, Line 20 Other changes in Net Assets or Fund Balances

Prior year's depreciation expense not booked	(1,179)
Prior year's gifts in-kind booked as payables	2,852
	<u>1,673</u>

Part II, Line 24 Other Assets

	Beg of Year	End of Year
Grant Reimbursement Receivable		584
Prepaid Expenses		4,641
Vehicles, net accum deprec		3,719
Furn., Fix, & Equipment	11,798	12,782
	<u>11,798</u>	<u>21,726</u>

Part III, Statement of Program Service Accomplishments

The purpose of Boxing Resource Center is to foster health and fitness among youth and young adults through teaching the art and science of Olympic-style (amateur) boxing, including the coordination of recreational and competitive amateur boxing opportunities for boxers, coaches, and officials. We strive to enable all young people, especially those at risk for dropping out of school, to reach their full potential as productive, caring, and responsible citizens. We strive to enhance self-esteem, character, and courage, and instill positive values through educational programs, including boxing.

Program Name and Description	Expenses
28. Hit the Books afterschool program -- Academic leadership and academic resources to support student progress toward school success, including boxing instruction, monitoring educational efforts, mentoring, homework assistance, group educational projects, and incentives. There is no expectation to compete, and the results have been youth making new friends and improving in their school work. Grant received \$30,584 (80 students)	\$32,598
29. Olympic Hopefuls/Nashville Boxing Club -- Daily physical exercise that consists of workouts scheduled by coaching staff who are USAB certified. Assist in the participation of youth and young adults in athletic competition. Train coaches/officials for participation in competitive boxing on local, regional, national and international levels. (80 students)	\$5,178
30. Outreach -- Boxing training and physical exercises consisting of lessons and workouts scheduled by coaching staff who are certified by USA Boxing. Lessons and workouts are designed to make boxing accessible to individuals not otherwise engaged in the sport, including events, special presentations, and clinics. Clinics and lessons for coaches and officials engaged in the sport on the local, regional, national, and international level. (400 students)	\$22,089



Boxing Resource Center  
Form 990-EZ Attachment  
For The Year Ended 12/31/2006

FEIN 75-3055338

**Part IV, List of Officers, Directors, Trustees, and Key Employees**

<u>Name and Address</u>	<u>Title, Avg Hrs Devoted to Position</u>	<u>Compensation</u>	<u>Contrib to benefit Plan &amp; Deferred Comp</u>	<u>Expense Account</u>
Christy Halbert, Ph.D. P.O. Box 694 Brentwood, TN 37024	President 35 hours	-0-	-0-	-0-
Yvonne Simerman 504 Minerva LaVergne, TN 37086	Vice President 25 hours	-0-	-0-	-0-
Chalene Helmuth, Ph.D. 313 Leopole Rd. Nashville, TN 37211	Secretary 2 hours	-0-	-0-	-0-
Tom Brown 2067 Taylor Lane Eagleville, TN 37060	Director 2 hours	-0-	-0-	-0-
Nicole Gordon, MSW 5212 Village Trace Nashville, TN 37211	Director 2 hours	-0-	-0-	-0-
Keri Rains 3009 Ballenger Dr. Nolensville, TN 37135	Director 2 hours	-0-	-0-	-0-

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