

**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.

**2007****Open to Public  
Inspection**

**A** For the 2007 calendar year, or tax year beginning 7/1/2007, and ending 6/30/2008

**B** Check if applicable:  
☐ Address change  
☐ Name change  
☐ Initial return  
☐ Termination  
☐ Amended return  
☐ Application pending

**C** Name of organization  
**Tony Rice Center, Inc.**  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
1300 Railroad Avenue  
 City or town State or country ZIP + 4  
Shelbyville TN 37160

**D** Employer identification number  
64-1461832

**E** Telephone number  
931-695-0957

**F** Accounting method: ☐ Cash ☒ Accrual  
☐ Other (specify) ▶

**G** Website: ▶ N/A

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

**K** Check here ☐ if the organization is not a 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** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 809,883

**H and I** are not applicable to section 527 organizations.  
**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No  
**H(b)** If "Yes," enter number of affiliates ▶             
**H(c)** Are all affiliates included? ☐ Yes ☐ No  
 (If "No," attach a list. See instructions.)  
**H(d)** Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No  
**I** Group Exemption Number ▶           

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

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

<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received:				
	<b>a</b> Contributions to donor advised funds . . . . .	<b>1a</b>	<u>0</u>		
	<b>b</b> Direct public support (not included on line 1a) . . . . .	<b>1b</b>	<u>24,704</u>		
	<b>c</b> Indirect public support (not included on line 1a) . . . . .	<b>1c</b>	<u>6,000</u>		
	<b>d</b> Government contributions (grants) (not included on line 1a) . . . . .	<b>1d</b>	<u>474,760</u>		
	<b>e</b> <b>Total</b> (add lines 1a through 1d) (cash \$ <u>505,464</u> noncash \$ <u>0</u> ) . . . . .	<b>1e</b>	<u>505,464</u>		
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93) . . . . .	<b>2</b>	<u>303,370</u>		
	<b>3</b> Membership dues and assessments . . . . .	<b>3</b>	<u>0</u>		
	<b>4</b> Interest on savings and temporary cash investments . . . . .	<b>4</b>	<u>1,049</u>		
	<b>5</b> Dividends and interest from securities . . . . .	<b>5</b>	<u>0</u>		
	<b>6a</b> Gross rents . . . . .	<b>6a</b>			
	<b>b</b> Less: rental expenses . . . . .	<b>6b</b>			
<b>c</b> Net rental income or (loss). Subtract line 6b from line 6a . . . . .	<b>6c</b>	<u>0</u>			
<b>7</b> Other investment income (describe ▶ <u>          </u> ) . . . . .	<b>7</b>	<u>0</u>			
<b>Expenses</b>	<b>8a</b> Gross amount from sales of assets other than inventory . . . . .	(A) Securities	<u>0</u>	(B) Other	<u>0</u>
	<b>b</b> Less: cost or other basis and sales expenses . . . . .	<b>8a</b>	<u>0</u>	<b>8b</b>	<u>0</u>
	<b>c</b> Gain or (loss) (attach schedule) . . . . .	<b>8c</b>	<u>0</u>	<b>8d</b>	<u>0</u>
	<b>d</b> Net gain or (loss). Combine line 8c, columns (A) and (B) . . . . .				
	<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>				
	<b>a</b> Gross revenue (not including \$ <u>0</u> of contributions reported on line 1b) . . . . .	<b>9a</b>	<u>0</u>		
	<b>b</b> Less: direct expenses other than fundraising expenses . . . . .	<b>9b</b>	<u>0</u>		
	<b>c</b> Net income or (loss) from special events. Subtract line 9b from line 9a . . . . .	<b>9c</b>	<u>0</u>		
	<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>10a</b>	<u>0</u>		
	<b>b</b> Less: cost of goods sold . . . . .	<b>10b</b>	<u>0</u>		
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a . . . . .	<b>10c</b>	<u>0</u>		
	<b>11</b> Other revenue (from Part VII, line 103) . . . . .	<b>11</b>	<u>0</u>		
<b>12</b> <b>Total revenue.</b> Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 . . . . .	<b>12</b>	<u>809,883</u>			
<b>Net Assets</b>	<b>13</b> Program services (from line 44, column (B)) . . . . .	<b>13</b>	<u>875,378</u>		
	<b>14</b> Management and general (from line 44, column (C)) . . . . .	<b>14</b>	<u>0</u>		
	<b>15</b> Fundraising (from line 44, column (D)) . . . . .	<b>15</b>	<u>0</u>		
	<b>16</b> Payments to affiliates (attach schedule) . . . . .	<b>16</b>	<u>0</u>		
	<b>17</b> <b>Total expenses.</b> Add lines 16 and 44, column (A) . . . . .	<b>17</b>	<u>875,378</u>		
<b>18</b> Excess or (deficit) for the year. Subtract line 17 from line 12 . . . . .	<b>18</b>	<u>-65,495</u>			
<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A)) . . . . .	<b>19</b>	<u>863,482</u>			
<b>20</b> Other changes in net assets or fund balances (attach explanation) . . . . .	<b>20</b>	<u>0</u>			
<b>21</b> Net assets or fund balances at end of year. Combine lines 18, 19, and 20 . . . . .	<b>21</b>	<u>797,987</u>			

**Part II** **Statement of Functional Expenses**

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.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22 a</b>	Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> noncash \$ <u>0</u> ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22a</b> 0	0		
<b>22 b</b>	Other grants and allocations (attach schedule) (cash \$ <u>0</u> noncash \$ <u>0</u> ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22b</b> 0	0		
<b>23</b>	Specific assistance to individuals (attach schedule) . . . . .	<b>23</b> 0	0		
<b>24</b>	Benefits paid to or for members (attach schedule) . . . . .	<b>24</b> 0	0		
<b>25 a</b>	Compensation of current officers, directors, key employees, etc. listed in Part V-A . . . . .	<b>25a</b> 55,700	55,700	0	0
<b>b</b>	Compensation of former officers, directors, key employees, etc. listed in Part V-B . . . . .	<b>25b</b> 0	0	0	0
<b>c</b>	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) . . . . .	<b>25c</b> 0	0	0	0
<b>26</b>	Salaries and wages of employees not included on lines 25a, b, and c . . . . .	<b>26</b> 339,947	339,947		
<b>27</b>	Pension plan contributions not included on lines 25a, b, and c . . . . .	<b>27</b> 0			
<b>28</b>	Employee benefits not included on lines 25a – 27 . . . . .	<b>28</b> 55,909	55,909		
<b>29</b>	Payroll taxes . . . . .	<b>29</b> 34,486	34,486		
<b>30</b>	Professional fundraising fees . . . . .	<b>30</b> 0			
<b>31</b>	Accounting fees . . . . .	<b>31</b> 5,395	5,395		
<b>32</b>	Legal fees . . . . .	<b>32</b> 0			
<b>33</b>	Supplies . . . . .	<b>33</b> 96,578	96,578		
<b>34</b>	Telephone . . . . .	<b>34</b> 9,870	9,870		
<b>35</b>	Postage and shipping . . . . .	<b>35</b> 0			
<b>36</b>	Occupancy . . . . .	<b>36</b> 117,392	117,392		
<b>37</b>	Equipment rental and maintenance . . . . .	<b>37</b> 32,218	32,218		
<b>38</b>	Printing and publications . . . . .	<b>38</b> 155	155		
<b>39</b>	Travel . . . . .	<b>39</b> 130	130		
<b>40</b>	Conferences, conventions, and meetings . . . . .	<b>40</b> 1,209	1,209		
<b>41</b>	Interest . . . . .	<b>41</b> 29,143	29,143		
<b>42</b>	Depreciation, depletion, etc. (attach schedule) . . . . .	<b>42</b> 70,685	70,685	0	0
<b>43</b>	Other expenses not covered above (itemize):				
<b>a</b>	Professional fees . . . . .	<b>43a</b> 24,728	24,728	0	0
<b>b</b>	Advertising . . . . .	<b>43b</b> 1,833	1,833	0	0
<b>c</b>	. . . . .	<b>43c</b> 0	0	0	0
<b>d</b>	. . . . .	<b>43d</b> 0	0	0	0
<b>e</b>	. . . . .	<b>43e</b> 0	0	0	0
<b>f</b>	. . . . .	<b>43f</b> 0	0	0	0
<b>g</b>	. . . . .	<b>43g</b> 0	0	0	0
<b>44</b>	<b>Total functional expenses.</b> Add lines 22a through 43g. (Organizations completing columns (B)–(D), carry these totals to lines 13–15) . . . . .	<b>44</b> 875,378	875,378	0	0

**Joint Costs.** Check ☒ if you are following SOP 98-2.Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ NoIf "Yes," enter (i) the aggregate amount of these joint costs \$ 0; (ii) the amount allocated to Program services \$                     ; (iii) the amount allocated to Management and general \$                     ; and (iv) the amount allocated to Fundraising \$

**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.

What is the organization's primary exempt purpose? ▶ <u>Operate halfway house A&amp;D treatment</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All 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.)	
<b>a</b> <u>Halfway houses: The organization operates halfway houses for individuals recovering from drug and alcohol dependence. Services include living quarters, counseling, counseling, and job placement.</u>	
(Grants and allocations \$ <u>0</u> ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	875,378
<b>b</b>	
(Grants and allocations \$ <u>0</u> ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	0
<b>c</b>	
(Grants and allocations \$ <u>0</u> ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	0
<b>d</b>	
(Grants and allocations \$ <u>0</u> ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	0
<b>e</b> Other program services (attach schedule)	
(Grants and allocations \$ <u>0</u> ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	0
<b>f</b> <b>Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) ▶	875,378

**Part IV Balance Sheets** (See the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>45</b> Cash—non-interest-bearing . . . . .	114,944	<b>45</b>	63,598
	<b>46</b> Savings and temporary cash investments . . . . .	60,114	<b>46</b>	77,936
	<b>47 a</b> Accounts receivable . . . . .	<b>47a</b> 0		
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>47b</b> 0	<b>47c</b> 0	0
	<b>48 a</b> Pledges receivable . . . . .	<b>48a</b> 0		
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>48b</b> 0	<b>48c</b> 0	0
	<b>49</b> Grants receivable . . . . .	12,050	<b>49</b>	30,000
	<b>50 a</b> Receivables from current and former officers, directors, trustees, and key employees (attach schedule) . . . . .	0	<b>50a</b>	0
	<b>b</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule) . . . . .		<b>50b</b>	
	<b>51 a</b> Other notes and loans receivable (attach schedule) . . . . .	<b>51a</b> 0		
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>51b</b> 0	<b>51c</b> 0	0
	<b>52</b> Inventories for sale or use . . . . .	1,951	<b>52</b>	1,474
	<b>53</b> Prepaid expenses and deferred charges . . . . .	29,708	<b>53</b>	4,572
	<b>54 a</b> Investments—publicly-traded securities. . . . . <input type="checkbox"/> Cost <input type="checkbox"/> FMV	0	<b>54a</b>	0
	<b>b</b> Investments—other securities (attach schedule). . . . . <input type="checkbox"/> Cost <input type="checkbox"/> FMV	0	<b>54b</b>	0
<b>55 a</b> Investments—land, buildings, and equipment: basis . . . . .	<b>55a</b> 0			
<b>b</b> Less: accumulated depreciation (attach schedule) . . . . .	<b>55b</b> 0	<b>55c</b> 0	0	
<b>56</b> Investments—other (attach schedule) . . . . .	0	<b>56</b>	0	
<b>57 a</b> Land, buildings, and equipment: basis . . . . .	<b>57a</b> 2,080,817			
<b>b</b> Less: accumulated depreciation (attach schedule) . . . . .	<b>57b</b> 483,547	<b>57c</b>	1,597,270	
<b>58</b> Other assets, including program-related investments (describe <input type="checkbox"/> Utility deposits ) . . . . .	3,075	<b>58</b>	5,600	
<b>59</b> <b>Total assets</b> (must equal line 74). Add lines 45 through 58 . . . . .	1,688,047	<b>59</b>	1,780,450	
<b>Liabilities</b>	<b>60</b> Accounts payable and accrued expenses . . . . .	6,207	<b>60</b>	9,310
	<b>61</b> Grants payable . . . . .		<b>61</b>	
	<b>62</b> Deferred revenue . . . . .	2,500	<b>62</b>	11,415
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .	0	<b>63</b>	0
	<b>64 a</b> Tax-exempt bond liabilities (attach schedule) . . . . .	0	<b>64a</b>	0
	<b>b</b> Mortgages and other notes payable (attach schedule) . . . . .	815,858	<b>64b</b>	961,738
	<b>65</b> Other liabilities (describe <input type="checkbox"/> ) . . . . .	0	<b>65</b>	0
<b>66</b> <b>Total liabilities.</b> Add lines 60 through 65 . . . . .	824,565	<b>66</b>	982,463	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>			
	<b>67</b> Unrestricted . . . . .	863,482	<b>67</b>	797,987
	<b>68</b> Temporarily restricted . . . . .		<b>68</b>	
	<b>69</b> Permanently restricted . . . . .		<b>69</b>	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.</b>			
	<b>70</b> Capital stock, trust principal, or current funds . . . . .		<b>70</b>	
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund . . . . .		<b>71</b>	
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>72</b>	
<b>73</b> <b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) . . . . .	863,482	<b>73</b>	797,987	
<b>74</b> <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73. . . . .	1,688,047	<b>74</b>	1,780,450	

**Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** (See the instructions.)

<b>a</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>a</b>	809,883
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 12:		
1	Net unrealized gains on investments . . . . .	<b>b1</b>	
2	Donated services and use of facilities . . . . .	<b>b2</b>	
3	Recoveries of prior year grants . . . . .	<b>b3</b>	
4	Other (specify): . . . . .	<b>b4</b>	0
	Add lines <b>b1</b> through <b>b4</b> . . . . .	<b>b</b>	0
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .	<b>c</b>	809,883
<b>d</b>	Amounts included on Part I, line 12, but not on line <b>a</b> :		
1	Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>	
2	Other (specify): . . . . .	<b>d2</b>	0
	Add lines <b>d1</b> and <b>d2</b> . . . . .	<b>d</b>	0
<b>e</b>	<b>Total revenue</b> (Part I, line 12). Add lines <b>c</b> and <b>d</b> . . . . .	<b>e</b>	809,883

**Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>a</b>	Total expenses and losses per audited financial statements . . . . .	<b>a</b>	875,378
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 17:		
1	Donated services and use of facilities . . . . .	<b>b1</b>	
2	Prior year adjustments reported on Part I, line 20 . . . . .	<b>b2</b>	
3	Losses reported on Part I, line 20 . . . . .	<b>b3</b>	
4	Other (specify): . . . . .	<b>b4</b>	0
	Add lines <b>b1</b> through <b>b4</b> . . . . .	<b>b</b>	0
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .	<b>c</b>	875,378
<b>d</b>	Amounts included on Part I, line 17, but not on line <b>a</b> :		
1	Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>	
2	Other (specify): . . . . .	<b>d2</b>	0
	Add lines <b>d1</b> and <b>d2</b> . . . . .	<b>d</b>	0
<b>e</b>	<b>Total expenses</b> (Part I, line 17). Add lines <b>c</b> and <b>d</b> . . . . .	<b>e</b>	875,378

**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 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
Name <b>Cody Harris</b> Str <b>1300 Railroad Avenue</b> City <b>Shelbyville</b> ST <b>TN</b> ZIP <b>37160</b>	Title <b>Exec Dir</b> Hr/WK <b>40</b>	<b>55,700</b>	<b>0</b>	<b>0</b>
Name <b>Dr Marvin Koonce</b> Str <b>1037 Union Street</b> City <b>Shelbyville</b> ST <b>TN</b> ZIP <b>37160</b>	Title <b>Bd Member</b> Hr/WK <b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>
Name <b>Carter Clay</b> Str <b>508 Randolph Street</b> City <b>Shelbyville</b> ST <b>TN</b> ZIP <b>37160</b>	Title <b>Bd Member</b> Hr/WK <b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>
Name <b>Daymon Dye</b> Str <b>305 Jarrell Street</b> City <b>Shelbyville</b> ST <b>TN</b> ZIP <b>37160</b>	Title <b>Bd Member</b> Hr/WK <b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>
Name <b>Judy Hooker</b> Str <b>388 Pinkston Road</b> City <b>Shelbyville</b> ST <b>TN</b> ZIP <b>37160</b>	Title <b>Bd Member</b> Hr/WK <b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>
Name <b>Gar Manula</b> Str <b>PO Box 45</b> City <b>Shelbyville</b> ST <b>TN</b> ZIP <b>37160</b>	Title <b>Bd Member</b> Hr/WK <b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>
Name <b>N/A</b> Str City ST ZIP	Title Hr/WK			
Name <b>N/A</b> Str City ST ZIP	Title Hr/WK			
Name <b>N/A</b> Str City ST ZIP	Title Hr/WK			
Name <b>N/A</b> Str City ST ZIP	Title Hr/WK			

**Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)**

	Yes	No
<b>75 a</b> Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings . . . . . <b>5</b>		
<b>b</b> Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) . . . . . <b>75b</b>		X
<b>c</b> Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." . . . . <b>75c</b> If "Yes," attach a statement that includes the information described in the instructions.		X
<b>d</b> Does the organization have a written conflict of interest policy? . . . . . <b>75d</b>	X	

**Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)**

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Name <u>N/A</u> Str _____ City <u>ST</u> ZIP _____				
Name <u>N/A</u> Str _____ City <u>ST</u> ZIP _____				
Name <u>N/A</u> Str _____ City <u>ST</u> ZIP _____				
Name <u>N/A</u> Str _____ City <u>ST</u> ZIP _____				
Name <u>N/A</u> Str _____ City <u>ST</u> ZIP _____				
Name <u>N/A</u> Str _____ City <u>ST</u> ZIP _____				
Name <u>N/A</u> Str _____ City <u>ST</u> ZIP _____				
Name <u>N/A</u> Str _____ City <u>ST</u> ZIP _____				
Name <u>N/A</u> Str _____ City <u>ST</u> ZIP _____				
Name <u>N/A</u> Str _____ City <u>ST</u> ZIP _____				

**Part VI Other Information (See the instructions.)**

	Yes	No
<b>76</b> Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change . . . . . <b>76</b>		X
<b>77</b> Were any changes made in the organizing or governing documents but not reported to the IRS? . . . . . <b>77</b> If "Yes," attach a conformed copy of the changes.		
<b>78 a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . . <b>78a</b>		X
<b>b</b> If "Yes," has it filed a tax return on Form 990-T for this year? . . . . . <b>78b</b>	N/A	
<b>79</b> Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement . . . . . <b>79</b>		
<b>80 a</b> Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? . . . . . <b>80a</b>		X
<b>b</b> If "Yes," enter the name of the organization _____ _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
<b>81 a</b> Enter direct and indirect political expenditures. (See line 81 instructions.) . . . . . <b>81a</b> 0		
<b>b</b> Did the organization file Form 1120-POL for this year? . . . . . <b>81b</b>		X

**Part VI Other Information (continued)**

		Yes	No
<b>82 a</b>	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? . . . . .		X
<b>b</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.) . . . . .		
	<b>82b</b> N/A		
<b>83 a</b>	Did the organization comply with the public inspection requirements for returns and exemption applications? . . . . .	X	
<b>b</b>	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions? . . . . .	X	
<b>84 a</b>	Did the organization solicit any contributions or gifts that were not tax deductible? . . . . .		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	N/A	
<b>85</b>	<b>501(c)(4), (5), or (6).</b> Were substantially all dues nondeductible by members? . . . . .	N/A	
<b>b</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less? . . . . .	X	
	If "Yes" was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
<b>c</b>	Dues, assessments, and similar amounts from members . . . . .	N/A	
<b>d</b>	Section 162(e) lobbying and political expenditures . . . . .	N/A	
<b>e</b>	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices . . . . .	N/A	
<b>f</b>	Taxable amount of lobbying and political expenditures (line 85d less 85e) . . . . .	N/A	
<b>g</b>	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? . . . . .	N/A	
<b>h</b>	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 following tax year? . . . . .	N/A	
<b>86</b>	<b>501(c)(7) orgs.</b> Enter: a Initiation fees and capital contributions included on line 12 . . . . .		
<b>b</b>	Gross receipts, included on line 12, for public use of club facilities . . . . .		
<b>87</b>	<b>501(c)(12) orgs.</b> Enter: a Gross income from members or shareholders . . . . .		
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .		
<b>88 a</b>	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 . . . . .		X
<b>b</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 . . . . .		X
<b>89 a</b>	<b>501(c)(3) organizations.</b> 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>b</b>	<b>501(c)(3) and 501(c)(4) orgs.</b> 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 . . . . .		X
<b>c</b>	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . .	N/A	
<b>d</b>	Enter: Amount of tax on line 89c, above, reimbursed by the organization . . . . .	N/A	
<b>e</b>	<b>All organizations.</b> At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? . . . . .		X
<b>f</b>	<b>All organizations.</b> Did the organization acquire a direct or indirect interest in any applicable insurance contract? . . . . .		X
<b>g</b>	<b>For supporting organizations and sponsoring organizations maintaining donor advised funds.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	N/A	
<b>90 a</b>	List the states with which a copy of this return is filed ▶ TN . . . . .		
<b>b</b>	Number of employees employed in the pay period that includes March 12, 2007 (See instructions.) . . . . .	90b	12
<b>91 a</b>	The books are in care of ▶ Name Judy Smith Telephone no. ▶ 931-685-0957 Located at ▶ 1300 Railroad Avenue City Shelbyville ST TN ZIP + 4 ▶ 37160 . . . . .		
<b>b</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)? . . . . .		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, Report of Foreign Bank and Financial Accounts.		

**Part VI Other Information (continued)**

Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c**

X

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

**92** Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of **Form 1041**—Check here . . . . . ▶ ☐and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ **92** N/A**Part VII Analysis of Income-Producing Activities (See the instructions.)****Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
<b>93</b> Program service revenue:					
<b>a</b> Participant fees			16		303,370
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> Medicare/Medicaid payments . . . . .					
<b>g</b> Fees and contracts from government agencies . . . . .					
<b>94</b> Membership dues and assessments . . . . .					
<b>95</b> Interest on savings and temporary cash investments . . . . .			14	1,049	
<b>96</b> Dividends and interest from securities . . . . .					
<b>97</b> Net rental income or (loss) from real estate:					
<b>a</b> debt-financed property . . . . .					
<b>b</b> not debt-financed property . . . . .					
<b>98</b> Net rental income or (loss) from personal property . . . . .					
<b>99</b> Other investment income . . . . .					
<b>100</b> Gain or (loss) from sales of assets other than inventory . . . . .					
<b>101</b> Net income or (loss) from special events . . . . .			12		
<b>102</b> Gross profit or (loss) from sales of inventory . . . . .					
<b>103</b> Other revenue: <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>104</b> Subtotal (add columns (B), (D), and (E)) . . . . .		0		1,049	303,370
<b>105</b> Total (add line 104, columns (B), (D), and (E)) . . . . . ▶					304,419

**Note:** Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)**

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
<b>93a</b>	Participant fees are charged to those who pay them to offset expenses not covered by grants and donations
	Also the fees assist the individuals in the transition from detoxification to independent living by making them partially responsible for their living expenses.

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)**

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%		0	0
	%		0	0
	%		0	0
	%		0	0

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)**(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . . ☐ Yes ☒ No(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . . ☐ Yes ☒ No**Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).



Form 990 (2007)

Tony Rice Center, Inc.

64-1461832

Page 9

**Part XI**

**Information Regarding Transfers To and From Controlled Entities.** Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106	Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	Yes	No
			X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				0

107	Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	Yes	No
			X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				0

108	Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?	Yes	No
			X

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.

Please Sign Here

Signature of officer: Cody L. Harris Date: 9-3-2008

Type or print name and title: Cody L Harris Exec Director

Paid Preparer's Use Only

Preparer's signature: Joe Osterfeld Date: 9/3/2008 Check if self-employed: ☒ Preparer's SSN or PTIN (See Gen. Inst. X): 269-52-8534

Firm's name (or yours if self-employed): Joe Osterfeld CPA EIN: 62-1763210

address, and ZIP + 4: PO Box 807, Columbia, TN 38402-0807 Phone no.: 931-388-7144

Form 990 (2007)

**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

**2007**

Name of the organization

Tony Rice Center, Inc.

Employer identification number

64-1461832

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(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 ▶		0		

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services . . . . . ▶		0

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**  
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over \$50,000 for other services . . . . . ▶		0

**For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.**

**Schedule A (Form 990 or 990-EZ) 2007**

(HTA)

**Part III** **Statements About Activities** (See page 2 of the instructions.)

Yes No

<b>1</b> 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 1 of Part VI-B.) . . . . .	<b>1</b>		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.			
<b>2</b> 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.)			
<b>a</b> Sale, exchange, or leasing of property? . . . . .	<b>2a</b>		X
<b>b</b> Lending of money or other extension of credit? . . . . .	<b>2b</b>		X
<b>c</b> Furnishing of goods, services, or facilities? . . . . .	<b>2c</b>		X
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? . . . See Part V of 990	<b>2d</b>	X	
<b>e</b> Transfer of any part of its income or assets? . . . . .	<b>2e</b>		X
<b>3 a</b> Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.) . . . . .	<b>3a</b>		X
<b>b</b> Did the organization have a section 403(b) annuity plan for its employees? . . . . .	<b>3b</b>		X
<b>c</b> 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 . . . . .	<b>3c</b>		X
<b>d</b> Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? . . . . .	<b>3d</b>		X
<b>4 a</b> Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g . . . . .	<b>4a</b>		X
<b>b</b> Did the organization make any taxable distributions under section 4966? . . . . .	<b>4b</b>		X
<b>c</b> Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	<b>4c</b>		X
<b>d</b> Enter the total number of donor advised funds owned at the end of the tax year . . . . . ►			
<b>e</b> Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year . . . . . ►			
<b>f</b> 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 . . . . . ►			
<b>g</b> Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year . . . . . ►			

**Part IV Reason for Non-Private Foundation Status** (See pages 4 through 8 of the instructions.)I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ☐ City ☐ ST ☐ Country
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11 a ☒ 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 I ☐ Type II ☐ Type III-Functionally Integrated ☐ Type III-Other

**Provide the following information about the supported organizations.** (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
					0
					0
					0
					0
					0
					0
<b>Total</b>					0

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

**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.

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
<b>15</b> Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) . . . . .	505,289	526,828	518,358	531,743	2,082,218
<b>16</b> Membership fees received . . . . .					0
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose . . . . .	215,692	232,282	293,167	296,337	1,037,478
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 . . . . .	2,291	1,003	592	426	4,312
<b>19</b> Net income from unrelated business activities not included in line 18 . . . . .					0
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf . . . . .					0
<b>21</b> 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 . . . . .					0
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets . . . . .					0
<b>23</b> Total of lines 15 through 22 . . . . .	723,272	760,113	812,117	828,506	3,124,008
<b>24</b> Line 23 minus line 17 . . . . .	507,580	527,831	518,950	532,169	2,086,530
<b>25</b> Enter 1% of line 23 . . . . .	7,233	7,601	8,121	8,285	
<b>26 Organizations described on lines 10 or 11:</b> <b>a</b> Enter 2% of amount in column (e), line 24 . . . . .					26a 41,731
<b>b</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 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts . . . . .					26b
<b>c</b> Total support for section 509(a)(1) test: Enter line 24, column (e) . . . . .					26c 2,086,530
<b>d</b> Add: Amounts from column (e) for lines: 18 4,312 19 . . . . .					26d 4,312
22 . . . . . 26b . . . . .					26e 2,082,218
<b>e</b> Public support (line 26c minus line 26d total) . . . . .					26f 99.79%
<b>f</b> Public support percentage (line 26e (numerator) divided by line 26c (denominator)) . . . . .					
<b>27 Organizations described on line 12:</b> <b>a</b> 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: (2006) . . . . . (2005) . . . . . (2004) . . . . . (2003) . . . . .					
<b>b</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: (2006) . . . . . (2005) . . . . . (2004) . . . . . (2003) . . . . .					
<b>c</b> Add: Amounts from column (e) for lines: 15 . . . . . 16 . . . . .					27c 0
17 . . . . . 20 . . . . . 21 . . . . .					27d 0
<b>d</b> Add: Line 27a total . . . . . and line 27b total . . . . .					27e 0
<b>e</b> Public support (line 27c total minus line 27d total) . . . . .					27f
<b>f</b> Total support for section 509(a)(2) test: Enter amount from line 23, column (e) . . . . .					27g 0.00%
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator)) . . . . .					27h 0.00%
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) . . . . .					
<b>28 Unusual Grants:</b> For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, 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.					

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

	Yes	No
<b>29</b> 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? . . . . .	<b>29</b>	
<b>30</b> 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? . . . . .	<b>30</b>	
<b>31</b> 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? . . . . . If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ----- ----- -----	<b>31</b>	
<b>32</b> Does the organization maintain the following:		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . .	<b>32a</b>	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .	<b>32b</b>	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .	<b>32c</b>	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions? . . . . .  If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----	<b>32d</b>	
<b>33</b> Does the organization discriminate by race in any way with respect to:		
<b>a</b> Students' rights or privileges? . . . . .	<b>33a</b>	
<b>b</b> Admissions policies? . . . . .	<b>33b</b>	
<b>c</b> Employment of faculty or administrative staff? . . . . .	<b>33c</b>	
<b>d</b> Scholarships or other financial assistance? . . . . .	<b>33d</b>	
<b>e</b> Educational policies? . . . . .	<b>33e</b>	
<b>f</b> Use of facilities? . . . . .	<b>33f</b>	
<b>g</b> Athletic programs? . . . . .	<b>33g</b>	
<b>h</b> Other extracurricular activities? . . . . .  If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- ----- -----	<b>33h</b>	
<b>34 a</b> Does the organization receive any financial aid or assistance from a governmental agency? . . . . .	<b>34a</b>	
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? . . . . . If you answered "Yes" to either 34a or b, please explain using an attached statement.	<b>34b</b>	
<b>35</b> 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 . . . . .	<b>35</b>	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 11 of the instructions.)(To be completed **ONLY** by an eligible organization that filed Form 5768)Check **a** ☐ if the organization belongs to an affiliated group. Check **b** ☐ if you checked "a" and "limited control" provisions apply.**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred.)

		(a) Affiliated group totals	(b) To be completed for all electing organizations
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .	<b>36</b>		
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	<b>37</b>		
<b>38</b> Total lobbying expenditures (add lines 36 and 37) . . . . .	<b>38</b>	0	0
<b>39</b> Other exempt purpose expenditures . . . . .	<b>39</b>		
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39) . . . . .	<b>40</b>	0	0
<b>41</b> Lobbying nontaxable amount. Enter the amount from the following table—			
If the amount on line 40 is—	The lobbying nontaxable amount is—		
Not over \$500,000 . . . . .	20% of the amount on line 40 . . . . .		
Over \$500,000 but not over \$1,000,000 . . . . .	\$100,000 plus 15% of the excess over \$500,000 . . . . .		
Over \$1,000,000 but not over \$1,500,000 . . . . .	\$175,000 plus 10% of the excess over \$1,000,000 . . . . .	<b>41</b>	
Over \$1,500,000 but not over \$17,000,000 . . . . .	\$225,000 plus 5% of the excess over \$1,500,000 . . . . .		
Over \$17,000,000 . . . . .	\$1,000,000 . . . . .		
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41) . . . . .	<b>42</b>	0	0
<b>43</b> Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 . . . . .	<b>43</b>	0	0
<b>44</b> Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 . . . . .	<b>44</b>	0	0

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.)

See the instructions for lines 45 through 50 on page 13 of the instructions.)

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
<b>45</b> Lobbying nontaxable amount . . . . .					0
<b>46</b> Lobbying ceiling amount (150% of line 45(e)) . . . . .					0
<b>47</b> Total lobbying expenditures . . . . .					0
<b>48</b> Grassroots nontaxable amount . . . . .					0
<b>49</b> Grassroots ceiling amount (150% of line 48(e)) . . . . .					0
<b>50</b> Grassroots lobbying expenditures . . . . .					0

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a** Volunteers . . . . .
- b** Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.) . . . . .
- c** Media advertisements . . . . .
- d** Mailings to members, legislators, or the public . . . . .
- e** Publications, or published or broadcast statements . . . . .
- f** Grants to other organizations for lobbying purposes . . . . .
- g** Direct contact with legislators, their staffs, government officials, or a legislative body . . . . .
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means . . . . .
- i** Total lobbying expenditures (Add lines **c** through **h**.) . . . . .

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Yes	No	Amount
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
		0





**Line 1 (990) - Public Support and Contributions**

	Cash	Non Cash
<b>Line 1a - Contributions to Donor Advised Funds . . . . .</b>		
<b>Line 1b - Direct public support</b>		
1 Contributions . . . . .	24,704	1
2 Membership dues and assessments (contributions from the public) . . . . .		2
3 Commercial co-venture . . . . .		3
4 Special events contributions (Line 9 - Special Events) . . . . .	0	4
5		5
6		6
7		7
8		8
9		9
10 Total . . . . .	24,704	10 0
<b>Line 1c - Indirect public support . . . . .</b>	6,000	
<b>Line 1d - Government contributions (grants) . . . . .</b>	474,760	

Part II, Line 42 (990) - Depreciation, Depletion, etc.

		70,685	70,685	0	0
		(A)	(B)	(C)	(D)
Description		Total	Program services	Management and general	Fundraising
1	Depreciation straight line	70,685	70,685		
2		0			
3		0			
4		0			
5		0			
6		0			
7		0			
8		0			
9		0			
10		0			
11		0			
12		0			
13		0			
14		0			
15		0			
16		0			
17		0			
18		0			
19		0			
20		0			

Part IV, Line 58 (990) - Other Assets		3,075	5,600
Description		Beginning	End
1	Utility deposits	3,075	5,600
2			
3			
4			
5			
6			
7			
8			
9			
10			

Part IV, Line 64b (990) - Mortgages and Other Notes Payable

1,075,000815,858961,738

	Lender's name	Check if lender is a business	Security provided	Original amount	Balance due beginning of year	Balance due end of year	Date of note	Maturity date
1	Rural Development Association	X	Real estate	170,000	111,905	105,429	2/11/2000	3/17/2020
2	Regions Bank	X	Real estate	905,000	703,953	856,309	8/17/2007	9/17/2012
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								

[illegible]

Part VII, Line 93 (990) - Program Service Revenue

		Unrelated business income		Excluded by section 512, 513, or 514		
		(A)	(B)	(C)	(D)	(E)
		Business code	Amount	Exclusion code	Amount	Related or exempt function income
a	Participant fees			16		303,370
b						
c						
d						
e						
f						
g						
h						
i						
j						
k						
l						
m						
n						
o						
p						
q						
r						
s						
t						
u						
v						
w						
x						
y						
z						

Part VIII (990) - Relationship of Activities to the Accomplishment of Exempt Purposes

	Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
1	93a	Participant fees are charged to those who pay them to offset expenses not covered by grants and donations
2		Also the fees assist the individuals in the transition from detoxification to independent living by making them
3		partially responsible for their living expenses.
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		

Tony Rice Center, Inc.  
Summary of Fixed Assets  
June 30, 2008.

	<b>1300</b> <b><u>Railroad</u></b>	<b>1290</b> <b><u>Railroad</u></b>	<b>1286</b> <b><u>Railroad</u></b>	<b>2316</b> <b><u>Hwy 41A</u></b>	<b><u>Total</u></b>
Land	72,640.48				72,640.48
Land Improvements	32,062.43	13,000.00			45,062.43
Buildings	462,562.53	922,129.60	93,829.66	270,366.50	1,748,888.29
Vehicles	51,881.17	20,198.00		-	72,079.17
Furniture & Equipment	114,156.90	12,779.42	15,212.00	-	142,148.32
Construction in Progress	-	-	-	-	-
	<u>733,303.51</u>	<u>968,107.02</u>	<u>109,041.66</u>	<u>270,366.50</u>	<u>2,080,818.69</u>
<b><u>Accumulated Depreciation</u></b>					
Land Improvements	30,417.00	2,387.00			32,804.00
Buildings	114,260.96	28,171.00	23,436.00	90,544.00	256,411.96
Vehicles	50,446.00	20,198.00			70,644.00
Furniture & Equipment	104,823.48	3,652.00	15,212.00		123,687.48
	<u>299,947.44</u>	<u>54,408.00</u>	<u>38,648.00</u>	<u>90,544.00</u>	<u>483,547.44</u>
Net	<u>433,356.07</u>	<u>913,699.02</u>	<u>70,393.66</u>	<u>179,822.50</u>	<u>1,597,271.25</u>

F

(P)

F-1

8/25/08

2/1/08



TONY RICE CENTER  
1300 RAILROAD AVENUE  
ANNUAL DEPRECIATION REPORTS  
FOR THE FISCAL YEAR ENDED JUNE 30,2008

Page 1

Description	ASSETS				ACCUMULATED DEPRECIATION			
	Beginning Cost	06/30/08 Additions	06/30/08 Retirmts	Ending Balance	Beginning Balance	06/30/08 Expense	06/30/08 Retirmts	Ending Balance
<b>Buildings</b>								
<b>TRC</b>								
Mobile Classrooms	8,500	0	0	8,500	2,830	180	0	3,010
Deck & Wheelchair Ramp	750	0	0	750	602	48	0	650
New Building	380,100	0	0	380,100	82,368	9,504	0	91,872
Mobile Classroom--Plbg	3,380	0	0	3,380	721	84	0	805
Mobile Classroom--Porch	653	0	0	653	101	12	0	113
Dumpster Enclosure	1,279	0	0	1,279	300	36	0	336
Dumpster Enclosure	348	0	0	348	99	12	0	111
Dumpster Enclosure	1,008	0	0	1,008	196	24	0	220
Pole Barn	3,666	0	0	3,666	624	96	0	720
Pole Barn (ins. collected.)	14,217	0	0	14,217	2,160	360	0	2,520
Storage Barn	4,408	0	0	4,408	2,146	444	0	2,590
Mobile Classroom--Renov.	6,114	0	0	6,114	2,856	612	0	3,468
Gas Heater for Shop	1,142	0	0	1,142	1,045	97	0	1,142
Kitchen Fan	1,206	0	0	1,206	1,200	6	0	1,206
Gazeboo	4,135	0	0	4,135	1,960	588	0	2,548
Roof vents & louvers	4,571	0	0	4,571	912	456	0	1,368
(2) 5 ton AC units		27,086	0	27,086	0	1,582	0	1,582
Total Buildings--TRC	435,477	27,086	0	462,563	100,120	14,141	0	114,261
<b>Women's Center</b>								
R Baker-H&S	8,000	0	0	8,000	4,195	264	0	4,459
R Baker-H&S	8,000	0	0	8,000	4,195	264	0	4,459
Bob Gordon	80	0	0	80	80	0	0	80
Fire Alarm	500	0	0	500	500	0	0	500
R. Baker-H&S	16,000	0	0	16,000	8,385	528	0	8,913
Pavilion	1,566	0	0	1,566	1,566	0	0	1,566
Additon	3,600	0	0	3,600	1,520	120	0	1,640
Shed	2,245	0	0	2,245	1,043	84	0	1,127
Fireworks Stand	2,850	0	0	2,850	2,850	0	0	2,850
Bldg purch from Bob Baker	89,834	0	0	89,834	18,700	2,244	0	20,944
Remodeling	80,194	0	0	80,194	20,979	2,664	0	23,643
Remodeling	186	0	0	186	94	12	0	106
Sign	200	0	0	200	200	0	0	200
Water Tap	2,000	0	0	2,000	516	72	0	588
Sprinkler System	39,384	0	0	39,384	9,439	1,308	0	10,747
Fire Equipment	825	0	0	825	170	24	0	194
Fire Equipment	2,465	0	0	2,465	583	96	0	679
5Ton gas package	3,850	0	0	3,850	2,112	384	0	2,496
A/C Repair	1,500	0	0	1,500	793	156	0	949
3Ton gas package	5,597	0	0	5,597	2,350	564	0	2,914
S. Roof repairs	1,490	0	0	1,490	1,150	340	0	1,490
Total Buildings--Women's Ctr	270,366	0	0	270,366	81,420	9,124	0	90,544
<b>Hawkins House</b>								
Farmhouse	42,000	0	0	42,000	7,744	1,056	0	8,800
Remodeling	50,734	0	0	50,734	12,408	1,692	0	14,100
Remodeling	595	0	0	595	176	24	0	200
Roof Repair	500	0	0	500	288	48	0	336
Total Buildings--Hawkins Hse	93,829	0	0	93,829	20,616	2,820	0	23,436
<b>1290 Railroad Ave.</b>								
New Building	0	922,130	0	922,130		28,171	0	28,171
Total Buildings--1290 RR Ave.	0	922,130	0	922,130	0	28,171	0	28,171
<b>TOT BUILDINGS</b>	<b>799,672</b>	<b>949,216</b>	<b>0</b>	<b>1,748,888</b>	<b>202,156</b>	<b>54,256</b>	<b>0</b>	<b>256,412</b>

F-2-1

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F-2

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8/25/08

Improvements  
Building Site  
Walking Track  
Walking Track

19,462	0	0	0	19,462	16,848	1,944	0	18,792
6,600	0	0	0	6,600	5,665	660	0	6,325
6,000	0	0	0	6,000	4,700	600	0	5,300
32,062	0	0	0	32,062	27,213	3,204	0	30,417

OT LAND IMPR

Furn & Equip  
Furn (2 desks/41a)  
Copier  
Computer & Stand  
Copier & FAX  
New Building--Furn & Equip  
Computer  
Computer Desk  
Kitchen Equipment  
Lawnmower  
Computer, Desk, Chair  
FAX  
Walk-in Cooler  
Kubota Tractor 12350F s/n 10318  
Moving Deck  
Copier/FAX/Scanner  
GMD Computer  
GMD Computer  
6' Finishing Mower-Bushhog  
Dell Laptop Computer  
New Phone Sys.  
Ice Maker  
Lobby Furniture  
Security System  
3 Door Refrigerator

108,241	5,217	0	114,158	102,066	2,759	0	104,825
0	3,755	0	3,755	0	315	0	315
0	1,462	0	1,462	0	180	0	180
4,400	0	0	4,400	1,022	876	0	1,898
2,045	0	0	2,045	578	408	0	986
2,130	0	0	2,130	648	432	0	1,080
1,234	0	0	1,234	1,020	214	0	1,234
1,650	0	0	1,650	1,316	334	0	1,650
1,121	0	0	1,121	1,121	0	0	1,121
1,190	0	0	1,190	1,190	0	0	1,190
998	0	0	998	998	0	0	998
1,400	0	0	1,400	1,400	0	0	1,400
6,250	0	0	6,250	6,250	0	0	6,250
750	0	0	750	750	0	0	750
775	0	0	775	775	0	0	775
1,931	0	0	1,931	1,931	0	0	1,931
6,775	0	0	6,775	6,775	0	0	6,775
1,259	0	0	1,259	1,259	0	0	1,259
855	0	0	855	855	0	0	855
1,898	0	0	1,898	1,898	0	0	1,898
63,580	0	0	63,580	63,580	0	0	63,580
3,300	0	0	3,300	3,300	0	0	3,300
2,950	0	0	2,950	2,950	0	0	2,950
1,750	0	0	1,750	1,750	0	0	1,750
700	0	0	700	700	0	0	700

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F-2-3

TOT FURN & EQUIP

14,250	0	0	0	14,250	14,250	0	0	14,250
16,316	0	0	0	16,316	16,316	0	0	16,316
21,315	0	0	0	21,315	15,620	4,260	0	19,880
51,881	0	0	0	51,881	46,186	4,260	0	50,446

TOT AUTOMOTIVE

991,856	954,433	0	1,946,989	377,621	64,479	0	442,100
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TOTALS

TONY RICE CENTER  
1300 RAILROAD AVENUE  
ANNUAL DEPRECIATION REPORTS  
FOR THE FISCAL YEAR ENDED 06/30/08

REPORT TOTALS BY DESCR  
Description  
Cost  
Forward Accum Dep  
Yr Dep  
Current Annual Dep  
Net Book Per Mo  
06/30/08 06/30/08 06/30/09

BUILDINGS	1,748,888	202,156	54,256	1,492,476	4,792
LAND IMPR	32,062	27,213	3,204	1,645	235
FURN & EQUIP	114,158	102,066	2,759	9,333	203
AUTOMOTIVE	51,881	46,186	4,260	1,435	120

Description	ASSETS				ACCUMULATED DEPRECIATION			
	Beginning Cost	06/30/08 Additions	06/30/08 Retirmts	Ending Balance	Beginning Balance	06/30/08 Expense	06/30/08 Retirmts	Ending Balance
Equipment & Furniture								
Captain Beds (16)	0	10,734	0	10,734	0	3,278	0	3,278
Ice Maker	0	2,045	0	2,045	0	374	0	374
	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0
TOT EQUIP & FURN	0	12,779	0	12,779	0	3,652	0	3,652
Land Improvements								
Landscaping	0	13,000	0	13,000	0	2,387	0	2,387
TOT LAND IMPR	0	13,000	0	13,000	0	2,387	0	2,387
Automotive								
2001 3500 Chevy van	20,198	0	0	20,198	20,198	0	0	20,198
TOT AUTOMOTIVE	20,198	0	0	20,198	20,198	0	0	20,198
TOTALS	20,198	25,779	0	45,977	20,198	6,039	0	26,237

TONY RICE CENTER  
1290 RAILROAD AVENUE  
ANNUAL DEPRECIATION REPORTS  
FOR THE YEAR ENDING JUNE 30, 2008

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REPORT TOTALS BY DESCR

Description	Cost	07/01/07 Forward Accum Dep	06/30/08 Current Yr Depr	06/30/08 Annual Net Book	06/30/09 Depr Per Mo
EQUIP & FURN	12,779	0	3,652	9,127	332
TOT LAND IMPR	13,000	0	2,387	10,613	217
AUTOMOBILES	20,198	20,198	0	0	0
TOTALS	45,977	20,198	6,039	19,740	549

TONY RICE CENTER  
1290 RAILROAD AVENUE  
ANNUAL DEPRECIATION REPORTS  
FOR THE YEAR ENDING JUNE 30, 2008

Page 3

FURNITURE & EQUIPMENT

Description	Purchase Date	Method	Life	Cost	07/01/07 Forward Accum Dep	06/30/08 Current Yr Depr	06/30/08 Annual Net Book	06/30/09 Depr Per Mo
Captain Beds (16)	08/14/07	S/L	3	10,734	0	3,278	7,456	298
Ice Maker	08/23/07	S/L	5	2,045	0	374	1,671	34
		S/L			0	0	0	0
		S/L			0	0	0	0
		S/L			0	0	0	0
		S/L			0	0	0	0
		S/L			0	0	0	0
TOT EQUIP & FURN				12,779	0	3,652	9,127	332

TONY RICE CENTER  
1290 RAILROAD AVENUE  
ANNUAL DEPRECIATION REPORTS

Page 4

0.00 \*

10,734 ÷  
36 =  
298.17 \*

298.17 ×  
11 =

3,279.87 \*

0.00 \*

2,045 ÷  
60 =  
34.08 \*

34.08 ×  
11 =

374.88 \*

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8/25/08

Description	ASSETS				ACCUMULATED DEPRECIATION			
	Beginning Cost	06/30/08 Additions	06/30/08 Retirmts	Ending Balance	Beginning Balance	06/30/08 Expense	06/30/08 Retirmts	Ending Balance
Equipment & Furniture								
2 Washers (from 41A)	400	0		400	400	0	0	400
Phone Sys & FAX (from 41A)	1,000	0	0	1,000	1,000	0	0	1,000
Phone Sys & FAX (from 41A)	127	0	0	127	127	0	0	127
Gas Dryer (from 41A)	510	0	0	510	510	0	0	510
Dryer (from 41A)	546	0	0	546	546	0	0	546
Remodeling Project Furn & Equip	11,629	0	0	11,629	11,629	0	0	11,629
Amana Ref. BR22VC	1,000	0	0	1,000	832	168	0	1,000
TOT EQUIP & FURN	15,212	0	0	15,212	15,044	168	0	15,212
TOTALS	15,212	0	0	15,212	15,044	168	0	15,212

REPORT TOTALS BY DESCR

Description	Cost	07/01/07 Forward Accum Dep	06/30/08 Current Yr Depr	06/30/08 Annual Net Book	06/30/09 Depr Per Mo
EQUIP & FURN	15,212	15,044	168	0	0
TOTALS	15,212	15,044	168	0	0

FURNITURE & EQUIPMENT

Description	Purchase Date	Method	Life	Cost	07/01/07 Forward Accum Dep	06/30/08 Current Yr Depr	06/30/08 Annual Net Book	06/30/09 Depr Per Mo
2 Washers (from 41A)	09/30/94	S/L	7	400	400	0	0	0
Phone Sys & FAX (from 41A)	10/31/94	S/L	7	1,000	1,000	0	0	0
Phone Sys & FAX (from 41A)	11/30/94	S/L	7	127	127	0	0	0
Gas Dryer (from 41A)	07/10/95	S/L	7	510	510	0	0	0
Dryer (from 41A)	11/10/98	S/L	7	546	546	0	0	0
Remodeling Project Furn & Equip	03/00	S/L	7	11,629	11,629	0	0	0
Amana Ref.(BR22VC)	10/15/01	S/L	7	1,000	832	168	0	0
TOT EQUIP & FURN				15,212	15,044	168	0	0

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Description	ASSETS				ACCUMULATED DEPRECIATION			
	Beginning Cost	06/30/08 Additions	06/30/08 Retirmts	Ending Balance	Beginning Balance	06/30/08 Expense	06/30/08 Retirmts	Ending Balance
Equipment & Furniture								
Furniture	75	0	75	0		0		0
Furniture(1)	12,530	0	12,530	0		0		0
Furniture	3,260	0	3,260	0		0		0
Furniture	107	0	107	0		0		0
New Addition Furn	10,264	0	10,264	0		0		0
Phon Sys & FAX	1,000	0	1,000	0		0		0
Phon Sys & FAX	127	0	127	0		0		0
Kitchen Equip	550	0	550	0		0		0
Gas Dryer	510	0	510	0		0		0
Dryer	546	0	546	0		0		0
Remodeling Project	4,721	0	4,721	0		0		0
Blinds	668	0	668	0		0		0
GMD Computer	1,499	0	1,499	0		0		0
Stove Hood	1,250	0	1,250	0		0		0
Office Furniture	3,680	0	3,680	0		0		0
Misc. Furniture	1,150	0	1,150	0		0		0
Kitchen Equipment	1,449	0	1,449	0		0		0
Microwave & Freezer	425	0	425	0		0		0
Computer,printer,cable	3,383	0	3,383	0		0		0
Mattresses	1080	0	1,080	0		0		0
Computer/Patty	887	0	887	0		0		0
GMD Computer/Client	747	0	747	0		0		0
Maytag Dishwasher	625	0	625	0		0		0
TOT EQUIP & FURN	50,533	0	50,533	0	0	0	0	0
Automotive								
Used Septic Tank Truck	3,500	0	3,500	0		0		0
2001 3500 Chevy van	20,198	0	20,198	0		0		0
TOT AUTOMOTIVE	23,698	0	23,698	0	0	0	0	0
TOTALS	74,231	0	74,231	0	0	0	0	0

\*\*\* moved 2001 3500 Chevy van  
to 1290 RR Ave. Sch.  
\*\*\* retire all Furn. & Equip.  
\*\*\* retire Septic Tank Truck

Description	Cost	07/01/07 Forward	06/30/08 Current	06/30/08 Annual	06/30/09 Depr
		Accum Dep	Yr Depr	Net Book	Per Mo
EQUIP & FURN	50,533	50,533	0	0	0
AUTOMOBILES	23,698	23,698	0	0	0
TOTALS	74,231	74,231	0	0	0

FURNITURE & EQUIPMENT

Description	Purchase Date	Method	Life	Cost	07/01/07 Forward	06/30/08 Current	06/30/08 Annual	06/30/09 Depr
					Accum Dep	Yr Depr	Net Book	Per Mo
Furniture	08/30/91	S/L	7	75	75	0	0	0
Furniture(1)	08/30/91	S/L	7	12,530	12,530	0	0	0
Furniture	06/30/91	S/L	7	3,260	3,260	0	0	0
Furniture	06/01/92	S/L	7	107	107	0	0	0
New Addition Furn	09/30/94	S/L	7	10,264	10,264	0	0	0
Phon Sys & FAX	10/31/94	S/L	7	1,000	1,000	0	0	0
Phon Sys & FAX	11/30/94	S/L	7	127	127	0	0	0
Kitchen Equip	11/30/94	S/L	7	550	550	0	0	0
Gas Dryer	07/10/95	S/L	7	510	510	0	0	0
Dryer	11/10/98	S/L	7	546	546	0	0	0
Furniture-Remodeling Project	06/15/99	S/L	7	4,721	4,721	0	0	0
Blinds	07/05/99	S/L	7	668	668	0	0	0
GMD Computer	08/25/99	S/L	5	1,499	1,499	0	0	0
Stove Hood	05/01/00	S/L	7	1,250	1,250	0	0	0

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