Form **990-EZ**

D. artment of the Treasury Internal Revenue Service

Short Form

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(aX1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoning organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 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

2008



Α	For the 2008 calendar year, or tax year beginning // 01 , 2008, and ending 6/30	, 2009
В	Olican in appropriate	Employer identification number
	Address change Please use IRS ROBERTSON COUNTY HISTORICAL SOCIETY	62-1124119
	Name change label or D O ROY 1022	Telephone number
	Inhal return type. SPRINGFIELD. TN 37172-1022	·
	Termination See Specific	615-382-7173
	Amended sekim Instruc-	Group Exemption
	Application pending	Number
	• Section 501(cV3) organizations and 4947(aV1) popeyempt charitable trusts G Accounting m	ethod X Cash Accrual
	 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 m Other (specify 	
1		tach Schedule B (Form 990,
٠.	990.F7 or 99	
J		ormally not more than
K	Check \(\sum_{\text{lift}} \] If the organization is not a section 509(a)(3) supporting organization and its gross receipts are r \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete it.	return
		etairi.
L	Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990	► \$ 30 566
	ınstead of Form 990-EZ	7 30,300.
Ra	Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the II	nstructions for Part I.)
	1 Contributions, gifts, grants, and similar amounts received	1 19,359.
	2 Program service revenue including government fees and contracts	2 6,890.
	3 Membership dues and assessments	3 3,004.
	4 Investment income	4 1,313.
	5a Gross amount from sale of assets other than inventory 5a	
_		5c
REVENUE	c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a) (att sch)	7 8482
V E	6 Special events and activities (complete applicable parts of Schedule G) If any amount is fromgaming, check here	
Ņ	a Gross revenue (not including \$of contributions	
Ē	reported on line 1)	
Ξ	b Less, direct expenses other than fundraising expenses 6b	
2909	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c
0	7a Gross sales of inventory, less returns and allowances 7a	
<u>~</u> .,ı	,,	
$\overline{}$		7.
>	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c
\' \'\'\	8 Other revenue (describe) 8
ح.	9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	▶ 9 30,566.
PLICEXPESSE	10 Country and applications and (attacks asked tile)	10
LL,		11
ĘĘ		12 9,351.
ξĝ	1.2 0.000	13 275.
CN	15 1 Totassiana rees and other payments to independent conduct	10 100
υş	14 Occupancy, rent, utilities, and maintenance	
s	15 Printing, publications, postage, and shipping	15 533.
	16 Other expenses (describe ► See Statement 1)	16 11,939.
	17 Total expenses (add lines 10 through 16)	► 17 34,226.
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 -3 ,660.
А		
NS	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-ying figure reported on prior year's return)	ear 19 214,872.
ΕŞ		
S	20 Other changes in net assets or fund balances (attach explanation)	20
n	21 Net assets or fund balances at end of year Combine lines 18 through 20	► 21 211,212.
IP a	Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 i	nstead of Form 990-EZ
	(See the instructions for Part II.) (A) Beginning o	
22	2 Cash, savings, and investments 73,5	82. 22 75,061.
23	126.7	
24	4.5	
25	014.0	
		
	Total liabilities (describe >)	
_27		
BA	A For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.	Form 990-EZ (2008)

`	_L		-	-		
	990-EZ (2008) ROBERTSON COUNT				-112	24119 Page 2
	Statement of Program Se		(See the instructi	ons.)		Expenses
	s the organization's primary exempt purpose? H				(Req	uired for 501(c)(3)
Desc	ribe what was achieved in carrying out the ribe the services provided, the number o	ne organization's exempt purp f persons benefited, or other	poses. In a clear and co	oncise manner,	4947	(4) organizations and (a)(1) trusts; optional
prog	am title.	- Percente Benefitoa, or outer			for o	thers.)
28						
	(Grants \$) If the	nis amount includes foreign gi	rants check here		28a	
29	(Circles +	no amount molades foreign gr	ranto, unoun noro			
23				- -		
	(Grants \$) If the	nis amount includes foreign gi	rants, check here	-	29 a	
30			- 			
	(Grants \$) If the	•	30 a			
31	Other program services (attach schedule					
	(Grants \$) If the		31 a			
	Total program service expenses(add lin		32			
Par	List of Officers, Directors	, Trustees, and Key Em	ployees. (List each	one even if not co	mper	sated. See the instrs)
		(b) Title and average hours	(c) Compensation (If	(d) Contributions	to	(e) Expense account
	(a) Name and address	per week devoted	not paid, enter -0)	employee benefit plai	ns and	and other allowances
FILE	ENE M DECK TO	to position		deferred compensa		
	ENE M BECK, JR	President	0.		0.	0.
	OAK ST] 0				
SPR	INGFIELD, TN 37127					
DAV	ID ALLEN	Vice President	0.		0.	0.
300	NORTH MAIN ST) o				
SPR	INGFIELD, TN 37172					
	RICIA ALLEN	Secretary	0.		0.	0.
	NORTH MAIN ST	O	•	ļ	٠.	•
	INGFIELD, TN 37172	١				
						
	JORIE FYKE	Secretary	0.	•	0.	0.
	TAYLOR TR	Į o		1		
SPR	INGFIELD, TN 37172					
		-				
				1		
BAA		TEEA0812L 0	1/14/09	L	!	Form 990-EZ (2008)

Other Information (Note the statement requirement in General Instruction V.)			
		Υe	s No
33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed desc each activity	ription of	33	Х
Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the chan		34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), buhot reported on Forattach a statement explaining your reason for not reporting the income on Form 990-T.	rm 990-T,		
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, an proxy tax requirements?		35a	X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	[3	35 b	
Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N	3	36	Х
37a Enter amount of political expenditures, direct or indirect, as described in the instructions.	0.	,	5 15 75
b Did the organization file Form 1120-POL for this year?	_3	37b	X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employeeor were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	3	38a	X
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b	N/A		
39 501(c)(7) organizations Enter.			
a Initiation fees and capital contributions included on line 9	N/A	,	
b Gross receipts, included on line 9, for public use of club facilities.	N/A		
40 a 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ►	0.	ا رون ادار	
b 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction du year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' complete Schedule L, Part I	•	юь	Х
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? If 'Yes,' complete Form 8886-T	4	0 e	X
 e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T 41 List the states with which a copy of this return is filed None 	4	0е	X
	4	10 e	X
	4	10 e	X
41 List the states with which a copy of this return is filed ► None			
41 List the states with which a copy of this return is filed ► None 42a The books are in care of ► PATRICIA F ALLEN Telephone no	► _(6 <u>15) _3</u>		
41 List the states with which a copy of this return is filed ► None	► _(6 <u>15) _3</u>		
41 List the states with which a copy of this return is filed ► None 42a The books are in care of ► PATRICIA F ALLEN Located at ► 300 NORTH MAIN STREET SPRINGFIELD TN ZIP + 4	• (615) 3 • 37172		567
41 List the states with which a copy of this return is filed ► None 42a The books are in care of ► PATRICIA F ALLEN Telephone no	► <u>(615)</u> 3 ► <u>37172</u> over a	10-75	567
41 List the states with which a copy of this return is filed ► None 42a The books are in care of ► PATRICIA F ALLEN Located at ► 300 NORTH MAIN STREET SPRINGFIELD TN Description of the patricular part of the patricular	► <u>(615)</u> 3 ► <u>37172</u> over a	10-75 Ye	567 s No
42a The books are in care of ► PATRICIA F ALLEN Located at ► 300 NORTH MAIN STREET SPRINGFIELD TN b At any time during the calendar year, did the organization have an interest in or a signature or other authority financial account in a foreign country (such as a bank account, securities account, or other financial account)	► <u>(615)</u> 3 ► <u>37172</u> over a	10-75 Ye	567 s No
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42a The books are in care of ► PATRICIA F ALLEN Located at ► 300 NORTH MAIN STREET SPRINGFIELD TN At any time during the calendar year, did the organization have an interest in or a signature or other authority financial account in a foreign country (such as a bank account, securities account, or other financial account) 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 a Foreign Bank and Financial Accounts.	► (615) 3 ► 37172 over a	10-75 Yes 2b	567s No X
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42 a The books are in care of ► PATRICIA F ALLEN Located at ► 300 NORTH MAIN STREET SPRINGFIELD TN At any time during the calendar year, did the organization have an interest in or a signature or other authority financial account in a foreign country (such as a bank account, securities account, or other financial account): 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 a Foreign Bank and Financial Accounts. C At any time during the calendar year, did the organization maintain an office outside of the U.S.? If 'Yes,' enter the name of the foreign country: ▶	► (615) 3 ► 37172 over a	10-75 Yes 2b	567s No X
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42a The books are in care of ► PATRICIA F ALLEN Located at ► 300 NORTH MAIN STREET SPRINGFIELD TN Located	► <u>(615)</u> <u>3</u> 37172	Yes 22b	567s No X X X
42 a The books are in care of ► PATRICIA F ALLEN Located at ► 300 NORTH MAIN STREET SPRINGFIELD TN At any time during the calendar year, did the organization have an interest in or a signature or other authority financial account in a foreign country (such as a bank account, securities account, or other financial account): 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 a Foreign Bank and Financial Accounts. C At any time during the calendar year, did the organization maintain an office outside of the U S? If 'Yes,' enter the name of the foreign country: A Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu oForm 1041 — Check here	► _(615) _3 ► _37172 over a 2 43	Yes 22b	567s No X X X
42a The books are in care of ► PATRICIA F ALLEN Located at ► 300 NORTH MAIN STREET SPRINGFIELD TN At any time during the calendar year, did the organization have an interest in or a signature or other authority financial account in a foreign country (such as a bank account, securities account, or other financial account): See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts. C At any time during the calendar year, did the organization maintain an office outside of the U S? If 'Yes,' enter the name of the foreign country: A Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu oForm 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year	over a 43	Yes 22b Yes 22c Yes 4	s No X X X

,							
Form 990-E Part VI	Z (2008) ROBERTSON COUNTY HI Section 501(c)(3) organization and complete the tables for line	s only. All section		organiza			
47 Did th 48 Is the 49a Did th	ne organization engage in direct or indire ublic office? If 'Yes,' complete Schedule (ne organization engage in lobbying activity organization operating a school as desc ne organization make any transfers to an s,' was the related organization(s) a sect	ct political campaign ac C, Part I ties? If 'Yes,' complete rribed in section 170(b)(exempt non-charitable	Schedule C	C, Part II f 'Yes,' comp	in opposition to candidate		No X X X X
recei	olete this table for the five highest compeved more than \$100,000 of compensation	from the organization. (b) Title and average	If there is	cers, directo none, enter pensation	'None.'	(e) Expense	ch
None_	Name and address of each employee paid more than \$100,000	hours per week devoted to position			benefit plans and deferred compensation	account and other allowance	es
					•		
Total number	of other employees paid over \$100,000 .						
51 Comp	elete this table for the five highest compe the organization If there is none, enter 'I	nsated independent cor None.'	ntractors wt	ho each rece	eived more than \$100,000	of compensati	ion
	(a) Name and address of each independent contra	actor paid more than \$100,000			(b) Type of service	(c) Compensato	n
None							
						····	
			- -		÷		
Fotal numb	er of other independent contractors recei	iving over \$100,000 .		>			
Sign Here	Under penalties of perjury, I declare that I have examine, correct, and complete Declaration of preparer (constitution). Signature of officer PATRICIA F ALLEN Type or print name and title	ined this return, including accorption than officer) is based on a	mpanying sched ill information c		nents, and to the best of my knowler has any knowledge // // - /4- / Date Treasurer		
Paid Pre-	Preparer's signature Erwin D Brown	7	1 -	ate 0-6-09	Check if See N/2	arer's Identifying Nu Instructions) A	mber

► N/A

Phone no

(615) 384-8431

►X Yes No

Form **990-EZ** (2008)

Brown, Brown and Associates PC

728 South Main Street

Springfield, TN 37172

May the IRS discuss this return with the preparer shown above? See instructions

Paid Pre-

Only

BAA

parer's Use

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

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

2008

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inspection.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. See separate instructions.

Name of the organization Employer identification number ROBERTSON COUNTY HISTORICAL SOCIETY 62-1124119 Partile Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is (Please check onlyone organization.) 1 A church, convention of churches or association of churches described insection 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or cooperative hospital service organization described insection 170(b)(1)(A)(iii). (Attach Schedule H.) A medical research organization operated in conjunction with a hospital described insection 170(bX1)XAXiii) Enter the hospital's 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described isection 5 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described insection 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(bX1XAXvi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) X An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 9 June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. Semection 509(aX4). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). Se**section 509(a)(3).** Check the box that 11 describes the type of supporting organization and complete lines 11e through 11h. Type III - Functionally integrated d i Type III- Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other trian foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? a No Yes a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (i) 11g(i) a family member of a person described in (i) above? 11g (ii) 11g (iii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? h Provide the following information about the organizations the organization supports. (v) Did you notify (vii) Amount of Support (I) Name of Supported (u) EIN (iii) Type of organization (iv) is the anization in col organization in col (i) organized in the US? Organization (described on lines 1-9 above or IRC section the organization in col (i) of (i) listed in your (see instructions) your support? governing document? No Yes No Yes No Yes Total

Schedule A (Form 990 or 990-EZ) 2008 ROBERTSON_COUNTY HISTORICAL SOCIETY Page 2 尼湖側 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) ► (f) Total (a) 2004 (b) 2005 (c) 2006(d) 2007 (e) 2008 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.'). Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf 3 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 Total, Add lines 1-3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ► (b) 2005 (d) 2007 (e) 2008 (a) 2004 (c) 2006 (f) Total 7 Amounts from line 4 Gross income from interest. dividends, payments received on securities loans, rents, rovalties and income form similar sources Net income form unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV.) Total support. Add lines 7 through 10 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage % 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 14 15 15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f 16a 33-1/3 support test - 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33-1/3 support test - 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

•	3	, ,	11		
or more, and if the	organization meets the	facts-and-cir	cumstances'	t check a box on line 13, 16a, or 16b, and line 14 is 10% test, check this box and top here. Explain in Part IV how nization qualifies as a publicly supported organization.	-
1007 6 .4		16.11		10 10 17 17 18 18 18 10 10	

b to be labeled at la off calling talling a test. Leave in a to of gain zation and the	Should box off mile to, tod, tob, or that are the
or more, and if the organization meets the 'facts-and-circumstances'	test, check this box and stop here. Explain in Part IV how the
organization meets the 'facts-and-circumstances' test. The organization	ition qualifies as a publicly supported organization.
Private foundation If the organization did not check a box on line 1	3 16a 16b 17a or 17b check this box and see instructions

	dule A (Form 990 or 990-EZ) 200					62-1124119	Page 3
Par	Support Schedule fo	-		Section 509(a)(2)		
	(Complete only if you che	cked the box on li	ne 9 of Part I.)				
	tion A. Public Support				4.0.007	4.2000	(D.T.)
	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants')	34,443.	17,675.	18,455.			70,573.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt	5 (02)	2 420	1,899.	•		11 010
3	purpose Gross receipts from activities that are not an unrelated trade or business under section 513	5,682.	3,438.	1,899.			11,019.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		-				0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6	Total. Add lines 1-5	40,125.	21,113.	20,354.	0.	0.	81,592.
7 a	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000	0.	0.	0.	0.	0.	0.
c	Add lines 7a and 7b .	0.	0.	0.	0.	0.	0.
	Public support (Subtract line						
	7c from line 6.)						81,592.
Sec	tion B. Total Support				•		
	tion B. Total Support	(a) 2004	(b) 2005	(c) 2006		(e) 2008	(f) Total
Cale	ndar year(or fiscal yr beginning in) Amounts from line 6	(a) 2004 40, 125.	(b) 2005 21, 113.	(c) 2006 20, 354.	(d) 2007 0.	(e) 2008	(f) Total 81,592.
Cale:	ndar year(or fiscal yr beginning in)				(d) 2007		81,592.
Caler 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form				(d) 2007 0.	0.	81,592. 0.
Caler 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses				(d) 2007		81,592.
Caler 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is	40,125.	21,113.	20,354.	(d) 2007 0.	0.	0. 0. 0. 0.
Calei 9 10 a b c 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV Total support. (add frs 9, 10c, 11, and 12)	0.	0.	0.	(d) 2007 0.	0.	0. 0. 0.
Calei 9 10 a b c c 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV	0. 1,432. s for the organiza stop here	0. 15,880.	0.	(d) 2007 0.	0.	0. 0. 0. 0. 22,675. 104,267.
Calei 9 10 a b c c 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV Total support. (add frs 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	1,432. 1,432. sfor the organizar stop here	0. 15,880. tion's first, second	0. 5,363. I, third, fourth, or	(d) 2007 0.	0.	0. 0. 0. 0. 22,675. 104,267.
Calei 9 10 a b c c 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV Total support. (add los 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	1,432. s for the organiza stop here blic Support Pour 100 (line 8, column	0. 15,880. tion's first, second ercentage (f) divided by line	0. 5,363. I, third, fourth, or	(d) 2007 0.	0. 0. a section 501(c)(3)	0. 0. 0. 0. 22,675. 104,267. ► [X]
Calei 9 10 a b c 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pull Public support percentage for 20	1,432. s for the organiza stop here blic Support Pour 100 (line 8, column 2007 Schedule A,	0. 15,880. tion's first, second ercentage (f) divided by line Part IV-A, line 27g	0. 5,363. I, third, fourth, or	(d) 2007 0.	0. 0. a section 501(c)(3)	81,592. 0. 0. 0. 0. 22,675. 104,267. ► [X]
Calei 9 10 a b c 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV Total support. (add tras 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pullius support percentage from 1	1,432. 1,432. Is for the organizar stop here blic Support Po 08 (line 8, column 2007 Schedule A, estment Incon	0. 15,880. tion's first, second ercentage (f) divided by line Part IV-A, line 27, ne Percentage	20, 354. 0. 5, 363. I, third, fourth, or 13, column (f))	(d) 2007 0.	0. 0. a section 501(c)(3)	0. 0. 0. 0. 0. 22,675. 104,267. ► [X]
Calei 9 10 a b c c 11 1 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pullic support percentage for 20 Public support percentage from Investment income percentage finvestment income percentage fines.	1,432. 1,432. 1,432. s for the organizar stop here blic Support Po 08 (line 8, column 2007 Schedule A, estment Incomor 2008 (line 10c, com 2007 Schedule a)	0. 15,880. tion's first, second ercentage (f) divided by line Part IV-A, line 270 to Percentage column (f) divided et A, Part IV-A, line	0. 5,363. I, third, fourth, or 13, column (f)) 3 by line 13, column 27h	(d) 2007 0. 0.	0. 0. 3. section 501(c)(3) 15 16 17 18	0. 0. 0. 0. 0. 104,267. ► [X] %
Calei 9 10 a b c 111 12 13 14 Sec 17 18 19 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV Total support.(add irs 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from ition D. Computation of Inv	1,432. 1,432.	21,113. 0. 15,880. tion's first, second ercentage (f) divided by line Part IV-A, line 27, ne Percentage column (f) divided a A, Part IV-A, line not check the boothe organization of	20, 354. 0. 5, 363. I, third, fourth, or 13, column (f)) by line 13, column 27h c on line 14, and qualifies as a public	(d) 2007 0. 0. fifth tax year as n (f) line 15 is more to licly supported or	0. 0. 15 16 17 18 nan 33-1/3%, and lirganization	0. 0. 0. 0. 0. 0. 104,267. ► [X] % % ne 17 is not

Schedule A	(Form	990 or 9	990-EZ)	2008	RO	DBER	TSO	N (COU	NTY	HIS	STOR	CICAL	SOC	IETY		62	2 –	112411	.9	Page 4
Rant N	Supp	lemen	tal Inf	ormat	tion	. Col	mple	ete	this	par	t to p	prov	ide the	e exp	olanat	ion r	equire	d i	by Part	II, line 10	;
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ROBERTSON COUNTY HISTORICAL SOCIETY BOARD OF DIRECTORS 2008-2009

OFFICERS

President - Eugene M. Beck Jr.

314 Oak Street

Springfield, TN 37172

615-384-8998

nnbeck@hotmail.com

Vice-President-David Allen

300 North Main Street

Springfield, TN 37172 615-382-0513

Treasurer-Patricia Allen

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615-654-0288

MUSEUM DIRECTOR:

Linda D. Dean 2000 Palmer Drive Springfield, TN 37172 Lindaddean@bellsouth.net

615-384-7773

Client RCHS4119 ROBERTSON COUNTY HISTORICAL 10/05/09 Part III, Line 12 - Other Income	2006 2005 2004 5,363. 15,880. 1,350. 5,363. \$ 15,880. \$ 1,350.
10/05/09 Part III, Line 12 - Other Income Nature and Source 2008 2007 2 OTHER	12.02P 2006 2005 2004
Nature and Source 2008 2007 2	
OTHER	
OTHER Total \$\overline{5}\$ 0. \$\overline{5}\$ 0. \$\overline{5}\$	5,363. 15,880. 1,350. 5,363. \$ 15,880. \$ 1,350.
	•

2008	Federal Statements	Page 1
Client RCHS4119	ROBERTSON COUNTY HISTORICAL SOCIETY	62-1124119
10/05/09		12.03PM
Statement 1 Form 990-EZ, Part I, Line 16 Other Expenses		
Depreciation INSURANCE REPAIRS SECURITY	. \$	5,139. 5,417. 210. 216.
SUPPLIES	Total \$	957. 11,939.
Statement 2 Form 990-EZ, Part II, Line 24 Other Assets		
	Beginning	Ending
Machinery and Equipment	Total $\frac{\$}{\$}$ 4,527. $\frac{\$}{\$}$	3,234. 3,234.
Statement 3		
Form 990-EZ, Part VI Regarding Transfers Associa	ated with Personal Benefit Contracts	
(a) Did the organizati	ion, during the year, receive any funds, directly or	M -
(b) Did the organizati	niums on a personal benefit contract? ion, during the year, pay premiums, directly or	No

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2008 Federal Book Depreciation Schedule

Page 1

Client RCHS4119

ROBERTSON COUNTY HISTORICAL SOCIETY

62-1124119

/05/09																	12:02PM
_No	Description	Date 	Date Sold	Cost/ Basis	Bus Pct.	Cur 179 Bonus	Special Depr. Allow.	Prior 179/ Bonus/ Sp. Depr	Prior Dec. Bal. <u>Depr.</u>	Salva /Bas 	212	Depr. Basis	Prior Depr.	<u>Method</u>	<u>Lıfe</u>	Rate	Current Depr
Form 990/990	-PF																
Buildings																	
2 BUILDIN	— IG	11/24/02	_	150,000				7.				150,000	19,391	S/L	39		3,846
Total Bu	uldings			150,000	ı	0	0		0	0	0	150,000	19,391				3,846
Machinery a	nd Equipment																
1 EQUIPM	ENT	1/01/01	_	12,932								12,932	7,112	S/L	10		1,293
Total Ma	achinery and Equipment			12,932		0	0		0	0	0	12,932	7,112				1,293
Total De	preciation		=	162,932		0	0		0	0		162,932	26,503				5,139
Grand To	otal Depreciation		=	162,932		0	0	S	0	0	0	162,932	26,503				5,139