# Form 9 0

### 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)

2007

Department of the Treasury Internal Revenue :- ervice(77) The organization may have to use a copy of this return to satisfy state reporting requirements 2007, and ending For the 2:107 calendar year, or tax year beginning D Employer Identification Number Check if aprilicable: Please use IRS label or print or type. See THE ARTS CENTER OF CANNON COUNTY, INC. 58-1882966 Addres: shange P.O. BOX 111 E Telephone number Name clange WOODBURY, TN 37190 615-563-2787 specific Initial /: .am Accounting metrios: Cash X Accrusi Termin xon Other (specify) Amend: : return Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). H and I are not applicable to section 527 organizations Application pending H (a) Is this a proup return for affiliates?.... H (b) If Yes, enter number of affiliates G Web site: ► N/A H (c) Are all a filiates included?.... (If No.: : ttach a list. See instructions.) Organization type ► |X| 501(c) 4947(a)(1) or 3 - (insert no.) H (d) is this a : eparate return filed by an (check or ly one) organization covered by a group ruling? if the organization is not a 509(a)(3) supporting organization and its Check her: > gross receipts are normally not more than \$25,000. A return is not required, but if the Group Exemption Number organizal on chooses to file a return, be sure to file a complete return. Check X If the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF). Gross recii pts: Add lines 6b, 8b, 9b, and 10b to line 12 ... **▶** 924,089. Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.) 1 Cor Iributions, gifts, grants, and similar amounts received: a Co-tributions to donor advised funds..... b Direct public support (not included on line 1a)..... 216,808 1 b 1 c c Inc. ect public support (not included on line 1a)..... 1 d 381.684 d Go, arnment contributions (grants) (not included on line 1a) ...... 598,492. 1 e Total (add lines s 598,492, noncash \$ 3 . . . Program service revenue including government fees and contracts (from Part VII, line 93)... 2 324,934. 3 Membership dues and assessments..... 4 Interest on savings and temporary cash investments..... 5 Dividends and interest from securities. . . . 6a Gruss rents b Les:: rental expenses..... c Ne. rental income or (loss). Subtract line 6b from line 6a..... 60 663. SEE STATEMENT 1) 7 7 Otter investment income (describe ...... (B) O her (A) Securities 8a Gross amount from sales of assets other 8a the inventory..... Яb b Lette: cost or other basis and sales expenses. . . c Gain or (loss) (attach schedule)..... 8d d Net gain or (loss). Combine line 8c, columns (A) and (B)..... 9 Special events and activities (attach schedule). If any amount is from gaming, check here ... a Gross revenue (not including \$ regarted on line 1b)..... **b** Less; direct expenses other than fundraising expenses..... 90 c Nel income or (loss) from special events. Subtract line 9b from line 9a..... 10 a Gress sales of inventory, less returns and allowances..... b Lesst cost of goods sold..... c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a . . . . . . 10 ¢ 11 Oll Br revenue (from Part VII, line 103).... 12 924,089. Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11..... 12 399,<u>672</u> 13 Program services (from line 44, column (B))..... 13 48,567. 14 Ms lagement and general (from line 44, column (C))..... 15 Fu draising (from line 44, column (D))..... 16 Payments to affiliates (attach schedule)..... 16 17 448,239. Tol al expenses. Add lines 16 and 44, column (A)..... 17 475,850. 18 18 677,030. 19 Ne assets or fund balances at beginning of year (from line 73, column (A))..... 19 20 Of or changes in net assets or fund balances (attach explanation)..... 20 Ne assets or fund balances at end of year. Combine lines 18, 19, and 20..... 1,152,880. Form 990 (2007) TEEA0109L 12/27/07 BAA For Prilizacy Act and Paperwork Reduction Act Notice, see the separate instructions.

2.11		itatement of Functional Ex ir section 501 (c)(3) and (4) organ	pens	es All organizations mas and section 4947(a)(1	nust complete column (	A). Co umns (B), (C), a	nd (D) are required
D	o nat in:	lude amounts reported on line , 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 a		aid from donor advised					
	(cash	\$					
	поп-са	.h \$)					
		nount includes grants, check here	22 a				
<b>22</b> b	_	ts and allocations (att sch)					
	(cash	\$					
	non-ca:	nount includes					
	foreign	irants, check here *	22 b		<del></del>		
23	(attach	assistance to individuals schedule)	23				
24	Benefit (attach	paid to or for members schedule)	24			Y A	
25 a	directo:	sation of current officers, key employees, etc. listed	25 a	37,450.	29,960.	7,490.	0
ь	Compe	sation of former officers.	200	3.7.100.	25,500.	7,430.	0.
	directo	, key employees, etc. listed /-B.	25 b	0.	0.	0.	0
c	Compens	zion and other distributions, not	230			0.	0.
	describe:	ider section 4958(f)(1)) and persons in section				_	_
		(B)	25 c	0.	0.	<u>0</u> .	0.
26	Salarie include	and wages of employees not on lines 25a, b, and c	26	110,881.	99,793.	11,088.	
27	Pensio include	plan contributions not on lines 25a, b, and c	27				
28	Employ	e benefits not included on	28	3,700.	3,330.	370.	
29		axes	29	11,348.	10,213.	1,135.	
30	_	anal fundraising fees	30				
31		ing fees	31	4,389.	3,950.	439.	
32		25	32				
33		i	33 34				
34 35	•	and shipping	35	7,982.	7,184.	798.	<u> </u>
36		icy	36				
37		:nt rental and maintenance	37	3,771.	3,394.	377.	
38		and publications	38	12,125.	10,913. 2,265.	1,212. 252.	
39 40		s, conventions, and meetings	39 40	2,517.			
41		::s, conveniuons, and meetings	41	15,980.	14,382.	1,598.	
42		in, depletion, etc (attach schedule)	42	30,869.	27,782.	3,087.	
43	Other ex	inses not covered above (itemize):	4.5	207 207	106 506	20 721	
	·	CATEMENT 2	43 a	207,227.	186,506.	20,721.	
t			43 c				
ì	•		43 d				
•	- <i></i> ·		43 e				
f			43 f		<del> </del>		
ç			43 g				
44	Total ful through (B) - (D)	tional expenses. Add lines 22a lg. (Organizations completing columns earry these totals to lines 13 - 15)	44	448,239.	399,672.	48,567.	0.
Join	t Costs.	theck.   if you are following	SOP	98-2.	-		
Are	any joint	costs from a combined education	ial can	npaign and fundralsing s	solicitation reported in (	B) Program services? amount allocated to Pro	F Yes X No
If 'Y	es,' ente	(i) the aggregate amount of thes	e joint locate	costs \$ d to Management and go	eneral \$	amount allocated to Pro ; and (Iv) ti	ne amount allocated
	undraisir						
BAA		<u></u>		TEEA0102L 0	8/02/07		Form <b>990</b> (200 <b>7</b> )

88/13/5008 13:01 0122635788

) If this amount includes foreign grants, check here .

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399,672.

Form 990 (2007)

f Total c Program Service Expenses (should equal line 44, column (B), Program services)

. .

(Grants and allocations \$

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. . . . . . Form 990 (21 )7) THE ARTS CENTER OF CANNON COUNTY, INC.

For	n <b>9</b> 9(	(2)	DT) THE ARTS CENTER OF CANNON COUNTY, INC.	58-:	1882966	Page 4
173			Salance Sheets (See the instructions.)			
Not	e: V C	Vhe olu:	required, attached schedules and amounts within the description in should be for end-of-year amounts only.	(A) Beginning of year		(B) End of year
			n - non-interest-bearing	1.29,596.	45	37,147.
	46	Sã	ings and temporary cash investments		46	
			ounts receivable			
	b	Le:	s; allowance for doubtful accounts		47 c	6,250.
	48 a	Ple	lges receivable			
	b	Le:	s; allowance for doubtful accounts		48 c	<del> </del>
	49	Ġ٢	nts receivable	40,000.	49	20,400.
	50 a	Re-	sivables from current and former officers, directors, trustees, and key loyees (attach schedule)		50 a	
	b	Re-	eivables from other disqualified persons (as defined under section 4958(f)(1)) persons described in section 4958(c)(3)(B) (attach schedule)		50 b	
Ş	   51 =	Of	ar notes and loans receivable			
ASSETS	l	(al	ach schedule)	!		
5	E	) Le	s; allowance for doubtful accounts 51 b		51 c	
			Intories for sale or use		52	4,306.
	53	Pro	paid expenses and deferred charges	800.	53	2,980.
	54 8	เกง	stments - publicly-traded securities		54 a	
	İt	in	stments – other securities (attach sch)		54 b	
	55 a	ini	stments - land, buildings, & equipment: basis. 55a			
	t	Le (al	s: accumulated depreciation		55 c	<del>_</del>
	56	יתו	stments - other (attach schedule)		56	
	578	a La	d, buildings, and equipment: basis 57a 1, 658, 200.			
	1		si; accumulated depreciation STATEMENT 4 57b 309, 621.	553,599.	57 c	1,348,579.
	58	Ot	er assets, including program-related investments			
	"	(de	SEE STATEMENT 5		58	204,060.
	59		al assets (must equal line 74). Add lines 45 through 58	723,995.	59	1,623,722.
_	60	Ac	ounts payable and accrued expenses	.4,801.	60	3,309.
	61	G	Ints payable		61	
L	62	De	arred revenue	.0,000.		15,000.
Ā	1			J.	2. E	
B	63	L0 en	ins from officers, directors, trustees, and key loloses (attach schedule)		63	
L	64	a Ta	exempt bond liabilities (attach schedule)		64 a	
Ţ	1	b Mo	gages and other notes payable (attach schedule)	20,570.		436,031.
T E S	65	0	er liabilities (describe SEE STATEMENT 6)	1,594.		16,502.
	66	Te	a al liabilities. Add lines 60 through 65	46,965.	66	470,842.
_	Org	าลกเ	itions that follow SFAS 117, check here F X and complete lines 67			
Ņ	-"'	· th	, uph 69 and lines 73 and 74.			0.40 000
	רם ו	· O	estricted	6.17,030		948,820.
Ş	68	T	an porarily restricted		68	224 254
Austra	69	P	Finanently restricted		69	204,060.
	1 -	nani	ations that do not follow SFAS 117, check here		- 11	
Ř	1	70	C trough 74.			
, ,	70		sital stock trust principal, or current funds		70	
į.	71	P	r dain or capital surplus, or land, building, and equipment f⊔nd	· <b></b>	71	
E A	3	, b	ained earnings, endowment, accumulated income, or other funds.		72	
ļ	۱′ <u>"</u>					4 450 000
	73	3 T	c al net assets or fund balances. Add lines 67 through 69 or lines 70 through 2 (Column (A) must equal line 19 and column (B) must equal line 21)	677,030		1,152,880.
3	5   74	, '	c al liabilities and net assets/fund balances. Add lines 66 and 73	723,995	. 74	1,623,722.
B	AA	· ·				Form <b>990</b> (2007)

TEEA0104L 08/02/07

Form 990 (2007) THE ARTS CENTER OF CANNON COUNTY, INC 58-1882966 Page 6 Current Officers, Directors, Trustees, and Key Employees (continued) Yes No 75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings. b Are at / officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed it 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)..... 75 b Х c Do an, 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'. 75 c If 'Yes' attach a statement that includes the information described in the instructions. e organization have a written conflict of interest policy?. 75 d CONTRACT. 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) turing the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See he instructions.) (C) Compensation (if not paid, (D) Contributions to (E) Expense (B) Loans and employee benefit account and other (A) Name and address Advances enter -0-) plans and deferred allowances compensation plans

NONE

Yes No Health II ther Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? X If 'Yes attach a detailed statement of each change ..... 76 77 Were any changes made in the organizing or governing documents but not reported to the IRS?..... **77** If 'Yes attach a conformed copy of the changes. 78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . 78 a 78 b b If 'Yes, has it filed a tax return on Form 990-T for this year?..... Was there a liquidation, dissolution, termination, or substantial contraction during the 79 year? Yes, attach a statement..... 80 a Is the enganization related (other than by association with a statewide or nationwide organization) through common member ship, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? 80 a b If 'Yes enter the name of the organization - N/A \_\_\_\_ and check whether it is exempt or nonexempt. 0 b Did the organization file Form 1120-POL for this year?..... 81 b Form 990 (2007)

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Form <b>990</b> (2	007) THE ARTS CENTER OF CANNON COUNTY, INC.	58-1882966	F	age 7
PartVE	Other Information (continued)		Yes	No
82 a Did the	organization receive donated services or the use of materials, equipment, or facilities itially less than fair rental value?	at no charge or at 82a		Х
bilf Yes. revens	you may indicate the value of these items here. Do not include this amount as in Part I or as an expense in Part II. (See instructions in Part III.)	82b N/A		
83 a Did th:	organization comply with the public inspection requirements for returns and exemption	n applications? 83s	X	
	organization comply with the disclosure requirements relating to quid pro quo contribu			<u> </u>
84a Did th	organization solicit any contributions or gifts that were not tax deductible?	84		X
	did the organization include with every solicitation an express statement that such codeductible?	initio Mous of Aura Mare		A
	4), (5), or (6). Were substantially all dues nondeductible by members?			A
	organization make only in-house lobbying expenditures of \$2,000 or less?		N N	A
if 'Yes waive	was answered to either 85a or 85b, do not complete 85c through 85h below unless trior proxy tax owed for the prior year.	ne orçanization received a		
	issessments, and similar amounts from members	85c N/A		
<b>d</b> Sectio	162(e) lobbying and political expenditures	85d N/A		
e Aggre	ate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A		
f Taxab	amount of lobbying and political expenditures (line 85d less 85e)	85f N/A		
g Does 1	ie organization elect to pay the section 6033(e) tax on the amount on line 85f?	85	g  N	A
dues al	i 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reason Dable to nondeductible lobbying and political expenditures for the following tax year?	nable et imate of 85	h N	/A
	?) organizations. Enter: a Initiation fees and capital contributions included on			
		86a N/A		
	eceipts, included on line 12, for public use of club facilities	86b N/A		
<b>87</b> 501(c)	. 12) organizations. Enter: a Gross income from members or shareholders	87 a N/A		
b Gross again:	ncome from other sources. (Do not net amounts due or paid to other sources amounts due or received from them.)	87b N/A		
88 a At any or an If 'Yes	lime during the year, did the organization own a 50% or greater interest in a taxable entity disregarded as separate from the organization under Regulations sections 301.7, complete Part IX	corporation or partnership, 701-2 and 301.7701-3?	a	Х
b At any section	ime during the year, did the organization, directly or indirectly, own a controlled entit 512(b)(13)? If 'Yes,' complete Part XI	y with n the meaning of 88	b	X
	$(:!)$ organizations. Enter: Amount of tax imposed on the organization during the year $oldsymbol{u}$			
	n 4911 ► 0. ; section 4912 ► 0. ; section 4	[32565		
<b>b</b> 501(c during expla	ei) and 501(c)(4) organizations. Did the organization engage in any section 4958 exce the year or did it become aware of an excess benefit transaction from a prior year? If thing each transaction	ss ber efit transaction "Yes," attach a statement	b	X
c Enter	mount of tax imposed on the organization managers or disqualified persons during to the sections 4912, 4955, and 4958.	he ► 0.		
d Enter	Imount of tax on line 89c, above, reimbursed by the organization.	., ▶ 0.		
	inizations. At any time during the tax year, was the organization a party to a prohibite	ed tax shelter transaction?. 89		X
	ginizations. Did the organization acquire a direct or indirect interest in any applicable i		f	X
g For s organ	g porting organizations and sponsoring organizations maintaining donor advised funds in the properties of a fund maintained by a sponsoring organization, have excess business hold	Did the supporting ings a any time during		X
	states with which a copy of this return is filed  NONE		 . <u></u>	
(See	e: of employees employed in the pay period that includes March 12, 2007		ь	0
	tiks are in care of > DONALD FANN, EXEC DIRECTOR Telephone of BOX 111, WOODBURY, TN	umber • 615-563-2787 ZIP + 4 • 37190		
	v ime during the calendar year, did the organization have an interest in or a signature it laccount in a foreign country (such as a bank account, securities account, or other	or other authority over a financial account)? 91	Ye≤ b	s No X
	c. anter the name of the foreign country	turing.		
See finar	he instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of cital Accounts.	[262		
BAA		Fo	rm 990	(2007)

TEEA0107L 09/10/07

	: 07) THE ARTS CENTER OF		UNTY, INC.		58-1882	966 Page 8
	2ther Information (continue					Yes No
	y time during the calendar year, did		n maintain an offic	ce outside of the U	Inited States?	91 c X
if 'Yes	s, enter the name of the toreign count	ry				
	4947(a)(1) nonexempt charitable					
	er the amount of tax-exempt inte				92	N/A
THE WITH	Analysis of Income-Produc				nation 510, 513, 514	
Note: Esta	i ;iross amounts unless		usiness income		ection 512, 513, or 514	(E)
otherwise i	in dicated.	Business code	(B) Amount	Exclusion code	(D) Amount	Related or exempt function income
	eg am service revenue: E. STATEMENT 7					324,934.
.1						
e		-				
f Me	di are/Medicaid payments					
g Fees	s contracts from government agencies					****
94 Me	ni lership dues and assessments.					
95 Inte	re on savings & temporary cash invmnts.					
96 Div	ric⊟nds & interest from securities [					
97 Net	re tal income or (loss) from real estate:					
a det	of inanced property					
b not	t obt-financed property					<u> </u>
98 Net	re ital income or (loss) from pers prop					
99 Oth	ne: investment income					663.
	ir or (loss) from sales of assets e: than inventory.					
101 Net	ir ome or (loss) from special events					
102 Gro	sa irofit or (loss) from sales of inventory					
103 Oti	ne revenue: a					
b						
c						
d						
e		DESCRIPTION OF THE PROPERTY OF			<u> </u>	205 507
	otcl II (add columns (B), (D), and (E))					325,597. 325,597.
	tal (add line 104, columns (B), (D), : .: 35 plus line 1e, Part I, should equ			· · · · · · · · · · · · · · · · · · ·		325,391.
	lelationship of Activities t			yemnt Purnos	es (See the instruc	tions )
	Explain how each activity for which					
<b>□</b> 1114 (40.	I f the organization's exempt purp	oses (other than	by providing fund	s for such purpos	es).	e accomplishment
N/A				<u>·_</u>		
	Ţ <del></del>					
	Information Regarding Tax	able Subsidi	aries and Disre	egarded Entition	es (See the instruc	tions.)
	(A)	(B)		(C)	(D)	(E)
	, address, and EIN of corporation, artrarship, or disregarded entity	Percentage of ownership intere		of activities	Total income	End-of-year assets
N/A			क			
			육			
			ę			
			8			
The second second second	Information Regarding Tra					
	he $\sigma$ -panization, during the year, receive any fu					Yes X No
	the organization, during the year, pa If ∵es' to (b), file Form 8870 and Fe			on a personal be	nefit contract?	Yes XNo
BAA					TEEA0108L 12/27/	07 Form <b>990</b> (2007)

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\$ 19°.

		07) THE ARTS CENTER OF CANNON CO	OUNTY, INC.		58-1882	2966	Р	age 9
		Information Regarding Transfers To an	d From Controlled En	tities. Compil	ete only if th	e		
		organization is a controlling organization	n as defined in section	1512(0)(13).	· · · · · · · · · · · · · · · · · · ·		Yes	No
100	<b>5</b> :4 :		b_llod oatik d_fi	d in casting E111	Avetav et the C		105	140
106	Yes	reporting organization make any transfers to a complete the schedule below for each controller	l entity	a in section 51.:	(b)(13) of the Ci	oger II		<u>X</u>
		(A) Name, address, of each controlled entity	(B) Employer identification Number	Descrip tra i	c) otlon of sfer	Amount o	) if tran	sfer
a								
b								
c								
		Totals						
							Yes	No
107	Did 'Yes	e reporting organization receive any transfers fr complete the schedule below for each controlle	om a controlled entity as d	efined in sectio	512(b)(13) of t	he Code? If		Х_
		(A) Name, address, of each controlled entity	(B) Employer Identification Number	Descri tra:	C) ption of isfer	Amount o	D) of tran	sfer
a								
þ								
С								
		Totals						
						**************************************	Yes	No
108	Did ann	e organization have a binding written contract in ites described in question 107 above?		, covering the in	terest, rents, ro	yalties, and		x
Plea	se	Inder penalties of perjury, I declare that I have examined this return, correct, and complete. Declaration of preparer (other than of	urn, including accompanying schedul ficer) is based on all information of v			knowledge and b	elief, it i	
Sign Here	) •	Signature of officer  DONALD FANN, EXECUTIVE DIREC Type or print name and title.	TOR					
Paid Pre-		DAVID B. HALL, CPA	Date 2	/28/08	Check if self-	Preparers 55N General Instruct N/A	or PTIN	(See
pare		Hirm's name (or HALL, DAVIDSON & ASSO						
Use		imployed). P.O. BOX 1234			EIN - N/A	4 6 1 6 6 6	A A A	
Only	<u>'</u>	P+4 MURFREESBORO, TN 3713	3-1234		Phone no. ► (6			
BAA						rom	1 330	(2007)

TEEA0110L 08/03/07

### SCHEDULE A (Form 990 c / 990-EZ)

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

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

Supplementary Information - (See separate Instructions.)

2007

OMB No. 1545-0047

724

Department of the Treesury Internal Revent Service ► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ. Name of the organization Employer identification number 58-1882966 CENTER OF CANNON COUNTY, Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See instructions, List each one, If there are none, enter 'None.') III) Name and address of each (c) Compensation (d) Contributions to employee benefit plans and deferred (b) Title and average (e) Expense employee paid more than \$50,000 hours per week count and other devoted to position allowances compensation N/A 0 0 0. Total number of other employees paid over \$50,001 III Compensation of the Five Highest Paid Independent Contractors for Professional Services (See 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 N/A 0. Total number of others receiving over \$50,000 for rofessional services 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 instructions.) (a) Nam , and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation NONE of other contractors receiving over \$50,000 for other services......

TEEA0401L 12/27/07

Schedule A (Form 990 or 990-EZ) 2007

BAA For Properwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

THE ARTS CENTER OF CANNON COUNTY, INC. 58-1882966 Schedule A :Form 990 or 990-EZ) 2007 Page 2 **原語側蓋|| Statements About Activities** (See instructions.) Yes No 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 expense: paid or incorred in connection with the lobbying activities . . . . ightharpoonup \$ N/A (Must :qual amounts on line 38, Part VI-A, or line I of Part VI-B.)..... Organications that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organications checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities. 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficery? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.) a Sale, Exchange, or leasing of property?..... 28 2Ь b Lendin ) of money or other extension of credit?..... Х 2c c Furnishing of goods, services, or facilities?..... d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?...... X 2d 2e Х e Transi ir of any part of its income or assets?..... 3a Did th: 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.)..... 3 2 3b X b Did the organization have a section 403(b) annuity plan for its employees?..... c 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... X 3¢ d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?...... 3d 4a Did the organization maintain any donor advised funds? If 'Yes,' complete lines 4b through 4g. If 'No,' complete lines Х 4f and 1g..... N/A b Did the organization make any taxable distributions under section 4966?..... 4b N/A N/A d Enter the total number of donor advised funds owned at the end of the tax year..... N/A e Enter The aggregate value of assets held in all donor advised funds owned at the end of the tax year.......... f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of 0 amounts in such funds or accounts..... g Enter I ie aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year.. 🟲 0.

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

BAA

Sche	dule A	Form 990 or 990-EZ) 2007 T	HE ARTS CENTER OF	CANNON COUNTY, 1	<u> </u>	58-1882	966 Page 3
S) (4		Reason for Non-Private	Foundation Status (S	See instructions.)			
cert	ify tha	he organization is not a private	foundation because it is: (	(Please check only ONE ap	plicab e box	.)	
5	☐ A ·	hurch, convention of churches,	or association of churches.	Section 170(b)(1)(A)(i).			
6	<b>A</b>	shoot, Section 170(b)(1)(A)(ii).	(Also complete Part V.)				
7	A	ospital or a cooperative hospita	l service organization. Sec	tion 170(b)(1)(A)(iii).			
8	A	ederal, state, or local governme	nt or governmental unit. So	ection 170(b)(1)(A)(v).			
9	_	nedical research organization of	perated in conjunction with	a hospital. Section 170(b)(	(1)(A)(iii). Er	iter the hospi	tal's name, city,
10	☐ Aii	organization operated for the be so complete the Support Sched	enefit of a college or univerule in Part IV-A.)	rsity owned or operated by	a governme	ntal unit. Sec	tion 170(b)(1)(A)(iv).
11 a	Ar St	organization that normally recestion 170(b)(1)(A)(vi). (Also com	ives a substantial part of it aplete the <b>Support Schedu</b>	s support from a governme le in Part IV-A.)	ental unit or	from the gene	eral public.
11 b	A	ommunity trust. Section 170(b)	(1)(A)(vì). (Also complete t	he <b>Support Schedule</b> in Pa	irt IV-/)		
12	+ <sub>***</sub>	organization that normally rece in activities related to its charita in gross investment income and anization after June 30, 1975. S	hle etc functions — subje	ct to cortain excentions, an	d (2) uo mo	re than 33.1/3	8% of its support
13	□ <sub>A₁</sub>	organization that is not controll uirements of section 509(a)(3).	ed by any disqualified pers	ons (other than foundation	managers)	and otherwise	
	Ι	Type I Type II		onally Integrated  out the supported organization	Type III		· · · · · · · · · · · · · · · · · · ·
		(a) ⊟ame(s) of supported organization(s)	(b) Employer identification number (EIN)	(c)	(c Is he su	i) ipported on listed in porting ration's	(e) Amount of support
			<u> </u>		Ytis	No	
	<del></del> -						
		-	<del>                                     </del>		<del> </del>		,
	<del></del>	-				▶	0.
Tota			<u></u>		· · · · · · · · · · · · · · · · · · ·		<u></u>
74 BAA		prganization organized and ope	erated to test for public saf	ety. Section 509(a)(4). (Se			990 or 990-EZ) 2007
_~~					Conc	2212 W /1 A111	

TEEA0407L 12/27/07

Schedule A	Form 990 or 990-EZ) 2007	THE ARTS CE	ENTER OF CANNO	N COUNTY, INC	58-188296	66 Page 4
Ranti MA	Support Schedule (	Complete only if you o	checked a box on line	10, 11, or 12.) <i>Use</i> d	ash method of accou	inting.
Note: You r	ay use the worksheet in th	ne instructions for cor	verting from the accr	ual to the cash metho	oc of accounting.	
beginning i	ır (or fiscal year )	<b>(a)</b> 2006	<b>(b)</b> 2005	<b>(c)</b> 2004	<b>(d)</b> 2003	<b>(e)</b> Total
15 Gifts, . receiv:	ants, and contributions					
	d. (Do not include grants, See line 28.)	276,942.	159,956.	97,219.	123,735.	657,852.
16 Memb	rship fees received					0.
merchair or furni: that is re	eipts from admissions, lise sold or services performed, ing of facilities in any activity lated to the organization's ;, etc, purpose.	236,522.	211,080.	97,258.	115,546.	660,406.
18 Gross in	ome from interest, dividends,				2.070107	3007100.
loans (seincome l unrelate sec. 511	I from payments on securities 512(a)(5)), rents, royalties, om similar sources, and business taxable income (less laxes) from businesses acquired janzation after June 30, 1975.	1,003.	107.	368.	435.	1,913.
19 Net inco	ne from unrelated business			:		
	not included in line 18					0.
organ: either on its	enues levied for the ation's benefit and laid to it or expended ehalf					0.
faciliti: organi: unit w includ: faciliti:	ue of services or surnished to the ation by a governmental nout charge. Do not the value of services or generally furnished to lic without charge					0.
22 Other	icome. Attach a					
sched:	le. Do not include (loss) from sale of					
capita	assets					0.
	lines 15 through 22	514,467.				1,320,171.
	minus line 17	277,945.				659,765.
	% of line 23	5,145.	3,711.			A A
	eations described on line			column (e), line 24		
b Prepare supporte return.	I list for your records to show the crganization) whose total gifts the ter the total of all these excess	e name of and amount cont for 2003 through 2006 exce amounts	ributed by each person (off eded the amount shown in I	ter than a governmental uni line 26a. Do not file this lis	t cr publicly st with your 26 b	
c Total :	upport for section 509(a)(	1) test: Enter line 24,	column (e)	.,.,,.,.,.	► 26c	
	nounts from column (e) for	or lines: 18		19		
		22		26 b	26 d	
e Public	support (line 26c minus lin	ne 26d total)				
f Public	support percentage (line	26e (numerator) divi	ded by line 26c (deno	minator))	<b>&gt;</b> 26f	*
a For an name such a	cations described on line punts included in lines 15 f, and total amounts recenounts for each year:	i, 16, and 17 that wer lived in each year fro				
(2006)	<u> </u>	(2005)	<u>_</u> (2004)		· (2003)	<u>-</u> -
	amount included in line the name of, and amount (Include in the list organ amputing the difference buces (the excess amounts					
(2006)	·0.	(2005)	<u>U . <sup>(2004)</sup> _</u>		· (2003)	<u>u</u> -
c Add: A	nounts from column (e) f	or lines: 15 _	657,852.	16		1 210 250
	ne 27a total support (line 27c total min	660,406. 20 _	1.17 (67) 4.4.1	21	27 c	1,318,258.
d Add: l	ne 2/a total	Ua	na line 2/b total			ט. טור פור ר
e Public	support (line 27c total mir	nus line 27d total)		ه انسمام در		1,310,258.
f Total :	inpport for section 509(a)(	2) test: Enter amoun	t from line 23, column	1 (0) = [ 271   ]	L, 340, 1/1.	00 00 0
g Publik	Hupport percentage (line	2/e (numerator) divi	geg by line 2/1 (deno	ımınator <i>))</i>		33.00 8
	ient Income percentage					
28 Unust list for nature	ind Grants: For an organization records to show, for of the grant. Do not file to	ation described in line each year, the name his list with your retu	of the contributor, the	e date and amount of ese grants in line 15.	tre grant, and a brie	f description of the
BAA				7		990 or 990-EZ) 2007

10:61 8002/61/80 e722935188

	dule A	Form 990 or 990-EZ) 2007 THE ARTS CENTER OF CANNON COUNTY, I	58-1882966	Page 5
	W.	Private School Questionnaire (See instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part	IV) N	I/A
				Yes No
29	Does other	e organization have a racially nondiscriminatory policy toward students by statement in its charactering instrument, or in a resolution of its governing body?	arter, bylaws,	29
30	Does catalo, and sc	e organization include a statement of its racially nondiscriminatory policy toward students in a les, and other written communications with the public dealing with student admissions, prc graiolarships?	Il its brochures, ms,	30
31	Has the the makes	organization publicized its racially nondiscriminatory policy through newspaper or broadcast record of solicitation for students, or during the registration period if it has no solicitation program the policy known to all parts of the general community it serves?	nedia during , in a way that	31
	If 'Yes	please describe; if 'No,' please explain. (If you need more space, attach a separate statemen	·	
		·		
32	Does	e organization maintain the following:		
		indicating the racial composition of the student body, faculty, and administrative staff?		32 a
	b Record	s documenting that scholarships and other financial assistance are awarded on a racially minatory basis?		32 b
	c Copie: with s	of all catalogues, brochures, announcements, and other written communications to the put lic dent admissions, programs, and scholarships?	dealing	32 c
	d Copie:	of all material used by the organization or on its behalf to solicit contributions?		32d
	If you	inswered 'No' to any of the above, please explain. (If you need more space, attach a separate		
			i ill	and week 1
33	Does 1	e organization discriminate by race in any way with respect to:		
	a Stude	ls' rights or privileges?		33a
	<b>b</b> Admis	ions policies?		33 Ь
	<b>c</b> Emplo	ment of faculty or administrative staff?		33 c
	d Schol	ships or other financial assistance?		33 d
	e Educa	onal policies?		33e
	f Use o	"acilities?		331
	<b>g</b> Athlet	; programs?		33 g
	<b>h</b> Other	extracurricular activities?		33 h
	If you	inswered 'Yes' to any of the above, please explain. (If you need more space, attach a separate	19	
		···		
34	a Does 1	ie organization receive any financial aid or assistance from a governmental agency?		34 a
	b Has th	organization's right to such aid ever been revoked or suspended?		34 b
		inswered 'Yes' to either 34a or b, please explain using an attached statement.		
35	Does section nondi	se organization certify that it has complied with the applicable requirements of 5: 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial rimination? If 'No,' attach an explanation		35
BA	Α	TEEACAG4L 12/27/07 \$	chedule A (Form 990	or 990-EZ) 2007

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			EZ) 2007 THE ART					58-18	82966	Page 6
134	DVIVA	(To be complete	penditures by Elected ONLY by an eligible of	ting Public Charit organization that filed f	l <b>es</b> (See instruc form 5768)	tions.)			N/	A
Che	ck ► a	if the organiz	ation belongs to an affi	liated group. Check	► b if you	checked '	a and fi	mited co	ntrol' pro	ovisions apply.
			imits on Lobbying	•			(a Affiliated tota	group		(b) be completed
		(The term	'expenditures' means a	mounts paid or incurre	d.)		tota	313		or all electing organizations
36	Total I	bbying expenditu	res to influence public (	opinion (grassroots lob	bying)	36			1	
37	Total i	obying expenditu	ires to influence a legisl	ative body (direct lobb)	ying)	37				
38	Total I:	obying expenditu	ares (add lines 36 and 3	7)		38				
39	Other :	xempt purpose e	expenditures			39	_			
40	Total :	lempt purpose e	xpenditures (add lines 3	18 and 39)		40				
41	Lobby	ig nontaxable an	nount. Enter the amount	from the following tab	le –					
	If the	mount on line 40	is - The I	obbying nontaxable as	mount is –					
	Not or	ır \$500,000	20%	of the amount on line	40					
	Over \$5.	3,000 but not over \$1,	000,000 \$100,0	00 plus 15% of the excess o	ver \$500,000					
	Over \$7.	-30,000 but not over \$	1,500,000\$175,0	00 plus 10% of the excess or	ver \$1,000,000 -	41				
	Over \$1	-30,000 but not over \$	17,000,000 \$225,0	00 plus 5% of the excess over	er \$1,500,000					
	Over \$	7,000,000	\$1,00	00,000		<b>建工程</b>				
42	Grass.	ots nontaxable a	amount (enter 25% of lin	ne 41)		42				
43	Subtra	t line 42 from lin	ie 36. Enter -0- if line 4	2 is more than line 36.	• • • • • • • • • • • • • • • • • • • •	43			+	
44	Subtra.	t line 41 from lin	ne 38. Enter -0- if line 4	l is more than line 38.		44	SAM CHARVES	00031_11444441		
	Cautic	ii: If there is an a	amount on either line 43	or line 44, you must fi	ile Form 4720.					
		(Some organ	izations that made a sec	Averaging Period I ction 501(h) election do the instructions for lir	not have to co	mplete all		ve colum	ıns belov	ν.
	·			Lobbying Expend	litures During 4	-Year Ave	raging F	eriod		
				d				<u> </u>		
		ar year al year	(a) 2007	(b) 2006	(c) 2005	,		d <b>)</b> 104	1	(e) Total
		ing in) ►	2007							
45	Lobby	g nontaxable							ļ	
	amoui	_		and the second s						
46	Lobbyin	ceiling amount	3515				<b>E</b>	A A		
_	(150%	line 45(e))		27.				Green Pro	<b>200</b>	
47	Total :	bbying tures			_					
48		ots non-								
40							<b>3</b> 3 2 3		2	<del></del>
<u>49</u>	(150%	s ceiling amount line 48(e))						7	<b>E</b>	
50		ots lobbying tures								
37	<b>欧洲</b>	Lobbying A	ctivity by Nonelectionly by organizations the	ng Public Charitie at did not complete Par	es rt VI•A) (See ins	tructions.)	)		N/	'A
Duri	ing the v	ar, did the orga	nization attempt to influ	ence national, state or	local legislation	. including	any			
atte	mpt to i	fluence public of	nization attempt to influ pinion on a legislative m	atter or referendum, t	nrough the use o	of:	-	Yes N	lo	Amount
									_	
		-	ent (Include compensati					<u> </u>	<b></b>	
			egislators, or the public							
			ed or broadcast stateme					$\vdash$		<del></del>
			ations for lobbying purp					<del>                                     </del>	<del></del>	
	-		slators, their staffs, gove							
			, seminars, conventions				• • • • • • •	200 00 200 00 00 00 00 00 00 00 00 00 00	52512	
		*	ures (add lines c throug						300	
		o any of the above	ve, also attach a statemer	nt giving a detailed descri	ription of the lobb	ying activit			···	
BA	Λ .						Sch	edule 🗛 (	Form 99	0 or 990-EZ) 2007

TEEA0405L 12/27/07

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TEEA0406L 12/27/07

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and the state of the second of the second

2/28/08

STAT MENT 1 FOR! 990, PART I, LINE 7

OTHER INVESTMENT INCOME

INTE EST-CHECKING & CD'S....

TOTAL \$

STAT ::MENT 2 FOR! 990, PART II, LINE 43 OTH! REXPENSES

	(A)	(B)	(C)	(D)
	TOTAL	PROGRAM SERVICES	MANAGEMENT {{ GENERAL	FUNDRAISING
EVEN EXPENSES	63,093.	56,784.	6,309.	
GIFT SHOP MDSE & COMM	14,962.	13,466.	1,496.	
GIFT SHOP & GALLERY EXP	3,359.	3,023.	336.	
CONC SSION EXPENSES	4,035.	3,632.	403.	
CLAS ES	10,204.	9,184.	1,020.	
ADVE TISING	757.	681.	76.	
BANK CARD FEES & S/C	4,204.	3,784.	420.	
MISC LLANEOUS	5,111.	4,600.	511.	
SALE TAX (GIFT SHOP)	1,306.	1,175.	131.	
SECU ITY	406.	365.	41.	
SHOP SUPPLIES	4,185.	3,767.	418.	
MUSE ⋅M EXPENSE	11,759.	10,583.	1,176.	
MAIN ENANCE & REPAIRS	10,971.	9,874.	1,097.	
UTIL TIES & PHONE	28,188.	25,369.	2,819.	
INSU ANCE - GENERAL	11,514.	10,363.	1,151.	
OFFI E SUPPLIES & EXP	<b>5,222</b> .	4,700.	522.	
GRAN S EXP - TIMBER COOP	2,865.	2,579.	286.	
CD'S PUBISHING, MISC	23,850.	21,465.	2,385.	
MEMB RSHIP EXP	40.	36.	4.	
CONT IBUTIONS EXP	1,200.	1,080.	120.	
ROUN ING	-4.	-4.		
·	TOTAL \$ 207,227.	186,506.	\$ 20,721.	\$ 0.

STAT :MENT 3

FORI 990, PART III

ORG. NIZATION'S PRIMARY EXEMPT PURPOSE

THE RTS CENTER HOLDS VARIOUS SHOWS, EVENTS, PLAYS, ARTISTIC ACTIVITIES, ETC., WITH GRANTS, DONATIONS, MEMBERSHIPS, AND ADMISSIONS INCOME BEING USED TO PAY RELA ED EXPENSES, THUS PROVIDING QUALITY ARTS EXPERIENCES AND THE OPPORTUNITY TO PART PATE IN THE ARTS FOR RESIDENTS OF CANNON AND SURROUNDING COUNTIES, COMPRISING A MOSTLY RURAL PART OF MIDDLE TENNESSEE.

2/28/08	05:32PM
FORI	EMENT 4 1990, PART IV, LINE 57 BUILDINGS, AND EQUIPMENT
BUIL	CATEGORY         BASIS         ACCUM. DIPREC.         BOOK VALUE           TURE AND FIXTURES         \$ 211,080. \$ 127,184. \$ 83,896.           INGS         1,187,733. 150,193. 1,037,540.           VEMENTS         209,014. 32,244. 176,770. 50,373. 50,373.           TOTAL \$ 1,658,200. \$ 309,621. \$ 1,348,579.
FORI OTHI	EMENT 5 990, PART IV, LINE 58 R ASSETS  M COLLECTION-ART & BASKETS  TOTAL \$ 204,060. \$ 204,060.
FORI OTHI SALE ACCR	## IMENT 6  990, PART IV, LINE 65  **CIABILITIES**  **TAX PAYABLE**  **ED INTEREST PAYABLE**  **EEMED GIFT CARDS**  **TOTAL**  **TOT
FOR	:MENT 7 990, PART VII, LINE 93 RAM SERVICE REVENUE  (A) (B) (C) (D) (E)
EVEN FUND GIFT OTHE CONC CLAS RENT MISC MURF	BUSI- UNRELATED EXCLU- NESS BUSINESS SION EXCLUDED OGRAM SERVICE REVENUE CODE AMOUNT CODE AMOUNT FUNCTION  S/SEASON TICKET RAISERS SHOP & GALLERY SALES SALES-CD'S, MISC SSIONS ES  BUSI- UNRELATED EXCLU- RELATED OR EXEMPT FUNCTION  17,007. 15,533. 7,263. 16,225.

88/13/2008 13:01 8122632788 ARTS CENTER OF CANNO

	<u>.</u>	
2/28/08		05:32PM
CONTRIBUTIONS, GIFTS, AND GRANTS DIRECT PUBLIC SUPPORT		
INDI IDUAL CONTRIBUTIONS.  DONA ED ART & BASKET COLLECTION  TOT	\$ AL <u>\$</u>	12,748. 204,060. 216,808.
GOV: RNMENT CONTRIBUTIONS (GRANTS)		
TENN ARTS COMMISSION GENL SUPPORT TENN ARTS COMMISSION-JOHN WORK CD. MIDD E TN ELECTRIC MEMBERSHIP CORP TARG T. COMM NITY FOUNDATION NEA JOHN WORK PROJECT NEA DUNLAP PROJECT HUD CONOMIC DEVEL- NEW BUILDING. TN D PT OF TRANSPORT - NEW BUILDING. CANN N CO HISTORICAL SOC - NEW BUILDING.		13,600. 20,400. 10,000. 3,000. 2,500. 840. 15,000. 120,280. 134,064. 50,000. 381,684.

88735888 13:01 6155632788







PROJE :TED SUPPORT SCHEDULE FOR 2008

THIS W: RISHEET PROJECTS IF THE ORGANZIATION WILL MEET THE SUPPORT TEST FOR THE TAX YE. R 2008 BASED ON THE DATA ENTERED IN SCREEN 55 FOR THE COLUMN 2007.

	SUPPORT ITEMS	2007 (A)	2006 (B)	2005 (C)	2004 (D)	TOTAL (E)
15. GII CONTRII	S, GRANTS, AND JTIONS	598,462.	276,942.	159,956.	97,219.	1,132,579.
16. MER	BERSHIP FEES RECEIVED					0.
ADMISS: SERVICE OF FAC: THAT IS	S RECEIPTS FROM NS, MERCHANDISE SOLD OR PERFORMED, OR FURNISHING LITIES IN ANY ACTIVITY RELATED TO THE TION'S CHARITABLE PURPOSE	324,934.	236,522.	211,080.	97,258.	869,794.
DIVIDER PAYMENT RENTS, BUSINES BUSINES	S INCOME FROM INTEREST, S, SAMOUNT RECEIVED FROM ON SECURITIES LOANS, OYALTIES, AND UNRELATED TAXABLE INCOME FROM ES ACQUIRED BY THE TION AFTER 6/30/1975	663.	1,003.	107.	368.	2,141.
	INCOME FROM UNRELATED ACTIVITIES NOT INCLUDED 18					0.
ORGANI?	REVENUES LEVIED FOR THE TION'S BENEFIT AND EITHER IT OR EXPENDED ON ITS					0.
FACILII ORGANIZ UNIT WI INCLUDE FACILII	VALUE OF SERVICES OR LES FURISHED TO THE LION BY A GOVERNMENTAL HOUT CHARGE. DO NOT THE VALUE OF SERVICES OR LES GENERALLY FURNISHED TO LIC WITHOUT CHARGE					0.
GAIN (	R INCOME. DO NOT INCLUDE LOSS) FROM SALE OF ASSETS					0.
23. TO	L OF LINES 15 THROUGH 22	924,059.	514,467.	371,143.	194,845.	2,004,514.
24. LI	23 MINUS LINE 17	599,125.	277,945.	160,063.	97,587.	1,134,720.
25. ENT	R 1% OF LINE 23	9,241.	5,145.	3,711.	1,948.	
27A. 27B. 27C. 27D. 27E. 27F. 27G. PI	ZATIONS DESCRIBED ON LINE OTAL AMOUNTS FROM LINES INE 17 AMOUNTS FROM DISMOUNTS FROM COLUMN (E) TOTAL OF LINES 27A AND 2 DELIC SUPPORT (LINE 270 DELIC SUPPORT FOR SECTION BLIC SUPPORT PERCENTAGE ESTMENT INCOME PERCENT	S 15, 16, ANI SQUALIFIED PE FOR LINES 15 PTB MINUS LINE ON 509(A)(2) E(LINE 27E DIV	ERSONS LARGER 5, 16, 17, 20 27D) TEST (LINE 2 HIDED BY LINE 2	R THAN LINE 2 D, AND 21 23, COLUMN (E	25 OR \$5,000 [])	0. 0. 2,002,373. 0. 2,002,373. 2,004,514 99.89% 0.117

12/31/07 2007 FEDERAL SUMMARY DEPRECIATION SCHEDULE

PAGE 1

CLIENT ARTCENTR

THE ARTS CENTER OF CANNON COUNTY, INC.

<u> </u>	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. _PCT	CUR 179/ SDA	PRIOR 179/ SDA/ DEPR	METHOD	LIFE	CURRENT DEPR.
ORM	11:0									
BU	TT+ .462									
1	BI. LDING	7/01/91		256,020			99,213	S/L	40	6,4
2	BI. JOING ADDITION	7/01/96		81,604			21,420	\$/L	40	2,0
3	BI. LOING ADDITION	7/01/97		35,231			8,369	\$/L	40	8
4	BII LDING ADDITION	7/01/98		10,384			2,210	S/L	40	2
37	BIELDING ADDITION	7/01/99		14,039			2,457	S/L	40	3
	BUI.DING ADDITION	1/01/00		10,181			1,785	S/L	40	á
	BUILDING IMPROVEMENTS	7/01/05		47,072			2,668	S/L HY	25	1,8
85	BU LOING ADDITION	12/31/07		733,202		<del></del> -		S/L	<del>4</del> 0 .	
	TOTAL BUILDINGS			1,187,733		0	138,122			12,0
IMF	REJEMENTS									
5	PF ANG	7/01/93		26,917			24,221	\$/L	15	1,7
39	SI EWALK	4/17/00		1,386			598	S/L HY	15	
40	L/ DSCAPING	5/23/00		1,000			435	\$/L HY	15	
75	W/ I'ER & SEWER LINES	7/01/05		78,967			3,012	S/L MM	39	2,0
86	P#. "ING	12/31/07		11,250				S/L	15	
87	SE FER LINE	12/31/07		89,494		·		S/L	40	
	TC- AL IMPROVEMENTS			209,014		0	28,266			3,9
MA	CHI ERY AND EQUIPMENT									
6	CC   PUTER	7/01/91		2,456			2,456	S/L	5	
7	ST GE LIGHTING	7/01/91		8,916			6,912	\$/L	20	•
8	C) IRS - STAGE	7/01/91		12,825			9,937	\$/L	20	+
9	EC IPMENT	7/01/97		2,247			2,247	S/L	10	
	EC IPMENT	7/01/92		263			263	S/L		
	KI I	7/01/93		1,242			1,242	\$/L		
	B/ KETS	7/01/93		625			625	S/L		
	EC SIPMENT	7/01/94		557			557	S/L		
	Siet	7/01/95		39,448			18,147	S/L		1,
	SC IND SYSTEM	7/01/95		10,580			10,580	S/L		
	PH: INE SYSTEM	7/01/95		2,568			2,568	\$/L		
	CALIERA FOLIOMENT	7/01/96		451			451	S/L		
	EQLIPMENT	7/01/96		277			277	S/L		
13	CC: PUTER	7/01/97		2,590			2,590	S/L	. 5	

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CLIENT ARTCENTR THE ARTS CENTER OF CANNON COUNTY, INC.

10.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS.	CUR 179/ SDA	PRIOR 179/ SDA/ DEPR	_METHOD_	LIFE .	CURRENT DFPR.
20	ECHPMENT	7/01/97		524			494	S/L	10	3
		7/01/97		\$,500			1,663	S/L	20	17
22	SI LYING	7/01/98		180			153	S/L HY	10	1
23	ST LPTURES	7/01/98		500			425	S/L HY	10	;
24	FCINTAIN	7/01/98		375			323	S/L HY	10	3
25	LICHTING	7/01/98		466			399	S/L HY	10	4
26	Ct-HER	7/01/98		590			590	S/L HY	5	
27	LICHTING	7/01/98		383			323	S/L HY	10	;
28	CU-IPUTER UPGRADES	7/01/98		994			994	S/L HY	5	
29	20 ABLES	7/01/98		800			680	S/L HY	10	1
30	M IC KITCHEN EQUIPMENT	7/01/99		2,834			2,123	S/L HY	10	2
31	ST VE	7/01/99		1,000			750	S/L HY	10	1:
32	IC: MACHINE	7/01/99		900			675	\$/L HY	10	
33	DILIMER	7/01/99		800			600	S/L HY	10	
34	DI'H WASHER	7/01/99		2,500			1,875	S/L HY	10	2
35	SHIP VACUUM	7/01/99		191			143	\$/L HY	10	
36	LF :ER PRINTER	7/01/99		260			260	S/L HY	5	
41	RF. IGE HOOD	7/01/00		4,367			2,840	S/L H	10	d
42	PL' HO DOLLY	7/01/00		450			293	S/L H	10	
43	FC .DER	7/01/00		1,132			735	S/L H	10	1
44	CC #PUTER	7/01/00		719			719	S/L H	5	
45	CCHPUTER	7/01/00		1,249			1,249	S/L H	′ 5	
46	TAILES	7/01/00		700			455	S/L H	′ 10	
47	GE IE LIFT	7/01/00		2,000			1,300	S/L H	10	2
48	P# NT MIXER	7/01/00		700			455	S/L H	10	
49	FREEZER	7/01/00		225			149	\$/L #	- 10	
50	OF CE EQUIPMENT	7/01/00		600			390	\$/L H	10	
51	ST TUE	7/01/00		500			325	S/L H	/ 10	
52	PS ITER	1/01/01		380			380	\$/L H	5	
53	PL 10	1/31/01		8,000			4,400	S/L H		;
54	FA	4/30/01		350			350			
55	LEGIT BOOTH	5/31/01		420			231	S/L H		
56	PI. 10 BOX	8/31/01		251			138	S/L H		
	OC PUTER & MISC EQUIP.	7/31/01		1,090			1,090			
	20 'ON AIR CONDITIONER	10/31/01		15,200			8,360			1,:
	CC PUTER UPGRADES	7/01/02		922			828	S/L H		
60	TELEPHONE SYSTEM	7/01/02		5,075			2,286			!
61		7/01/02		330			297			
62	SC IND SYSTEM	7/01/02		4,179			1,881	S/L H	Y 10	4

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CLIEN! ARTCENTR THE ARTS CENTER OF CANNON COUNTY, INC.

NO_	DESCRIPTION	DATE _ACOURED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179/ SDA	PRIOR 179/ SDA/ DEPR	MFTHOD_	LIFE .	CURRENT DEPR
63	CLLERY TILE & CARPET	7/01/02		813			366	S/L HY	10	81
64	SHIN	7/01/02		1,200			540	S/L HY	10	120
65	FILDING CHAIRS	7/01/02		1,530			689	S/L HY	10	153
66	£   ABLES	7/01/02		811			365	\$/L HY	10	81
67	L HT BOARD, MONITOR, ETC	7/01/03		4,809			1,683	S/L HY	10	481
68	CUMPUTER	7/01/03		848			595	S/L HY	5	170
69	CHMPUTER	7/01/03		849			595	S/L HY	5	170
70	SI UND EQUIPMENT	7/01/03		1,574			550	S/L HY	' 10	157
<b>7</b> 1	SI UND EQUIPMENT	7/01/04		5,898			1,475	S/L HY	10	590
72	C'IMPUTER EQUIPMENT	7/01/04		584			292	S/L HY	′ 5	117
73	L HTING EQUIPMENT	7/01/04		545			137	S/L H	' 10	55
76	E JIPMENT	7/01/04		1,814			542	S/L H	10	181
77	<b>C</b> PIER	7/01/05		521			156	S/L H	7 5	104
78	5+ OMPUTERS	7/01/05		1,821			546	S/L H	′ 5	364
79	HIIID RAILS	7/01/05		3,868			580	S/L H	10	387
80	C: -UR BOTTOMS	7/01/05		5,57 <b>5</b>			837	S/L H	10	558
81	EL CTRICAL EQUIPMENT	7/01/05		7,945			1,192	S/L H	/ 10	795
82	MESEUM CABINETS	7/01/06		8,500			424	S/L H	10	850
83	MI BEUM EXHIBIT TECHNOLOGY	7/01/06		5,500			274	S/L H	10	550
84	M ING BOARD	7/01/06		1,013			50	S/L H	/ 10	101
88	CHIAPUTER	5/19/07		549				200DB H	1 5	54
89	ALHO RACK	6/19/07		369				S/L H	10	18
90	T\ 3 FOR GALLERY	9/25/07		2,596				S/L H	Y 10	135
91	C( ler	10/24/07		764				S/L H	<b>Y</b> 5	
	T( AL MACHINERY AND EQUIPME			211,077		0	112,361			14,819
	TO AL DEPRECIATION			1,607,824		0	278,749			30,868
	GR-IND TOTAL DEPRECIATION			1,607,824		0	278,749			30,868