

CRITICAL MESSAGES

NONE

ELECTRONIC FILING

NONE

INFORMATIONAL MESSAGES

- FORM 990, PART X, LINE 27 END OF YEAR UNRESTRICTED FUND BALANCE IS CALCULATED.
- IF SCHEDULE B REQUIRED, ENTER DATA ON SCREEN SCHB INSTEAD OF SCREEN INC.
- FORM 8868 FOR FORM 990/990-EZ EXTENSION PREVIOUSLY PRINTED; VERIFY EXTENDED DUE DATE IN SCREEN EXT.
- VERIFY THAT ANY CASH CONTRIBUTIONS FROM SPECIAL EVENTS REPORTED IN THE DIRECT FOLDER THAT ARE SUBJECT TO SCHEDULE B REPORTING REQUIREMENTS HAVE BEEN ENTERED ON SCREEN SCHB.
- PREPARER 'PENELOPE D. WILSON, CPA'
- FORCE FIELD ENTERED WITH DATA "765,449" ON SCREEN SCHA
- FORCE FIELD ENTERED WITH DATA "361,733" ON SCREEN PSA
- FORCE FIELD ENTERED WITH DATA "309,071" ON SCREEN PSA
- FORCE FIELD ENTERED WITH DATA "106,895" ON SCREEN PSA
- FORCE FIELD ENTERED WITH DATA "174,697" ON SCREEN PSA
- FORCE FIELD ENTERED WITH DATA "124,652" ON SCREEN EXP-2

MISSING DATA

	PRIOR YEAR DATA
FUNCTIONAL EXPENSES	
<input type="checkbox"/> M/G INTEREST EXPENSE	2,725
EXPENSES DIRECTLY RELATED TO INCOME (FUNDRAISING EVENT)	
<input type="checkbox"/> P/S OTHER EXPENSES	137
<input type="checkbox"/> F/R OTHER EXPENSES	22,818
SCHEDULE OF CONTRIBUTORS (EZELL FOUNDATION)	
<input type="checkbox"/> CASH CONTRIBUTION	35,000
SCHEDULE OF CONTRIBUTORS (BAPTIST HEALING TRUST)	
<input type="checkbox"/> CASH CONTRIBUTION	55,078
SCHEDULE OF CONTRIBUTORS (COMMUNITY FOUNDATION)	
<input type="checkbox"/> CASH CONTRIBUTION	150,000
SCHEDULE OF CONTRIBUTORS (SILVIA ROBERTS)	
<input type="checkbox"/> CASH CONTRIBUTION	25,000
BALANCE SHEET - ASSETS	
<input type="checkbox"/> PREPAID EXPENSE - EOY	662
BALANCE SHEET - LIABILITIES AND EQUITY	
<input type="checkbox"/> INCREASES TO NET ASSETS	69,215

Forms 990 / 990-EZ Return Summary

For calendar year 2008, or tax year beginning 7/01/08, and ending 6/30/09

62-1571573

ROCKETOWN OF MIDDLE TENNESSEE

Net Asset / Fund Balance at Beginning of Year		<u>3,697,741</u>
Revenue		
Contributions	<u>284,221</u>	
Program service revenue	<u>285,888</u>	
Investment income	<u>144,293</u>	
Capital gain / loss		
Special events:		
Gross revenue	<u>232,017</u>	
Direct expenses	<u>20,521</u>	
Net income	<u>211,496</u>	
Other income	<u>555,396</u>	
Total revenue		<u>1,125,505</u>
Expenses		
Program services	<u>952,396</u>	
Management and general	<u>137,025</u>	
Fundraising	<u>127,153</u>	
Total expenses		<u>1,216,574</u>
Excess / (deficit)		<u>-91,069</u>
Other changes		
Net Asset / Fund Balance at End of Year		<u>3,606,672</u>

Reconciliation of Revenue	
Total revenue per financial statements	<u>1,317,194</u>
Less:	
Unrealized gains	
Donated services	<u>3,270</u>
Recoveries	
Other	<u>188,419</u>
Plus:	
Investment expenses	
Other	
Total revenue per return	<u>1,125,505</u>

Reconciliation of Expenses	
Total expenses per financial statements	<u>1,408,263</u>
Less:	
Donated services	<u>3,270</u>
Prior year adjustments	
Losses	
Other	<u>188,419</u>
Plus:	
Investment expenses	
Other	
Total expenses per return	<u>1,216,574</u>

Balance Sheet			
	Beginning	Ending	Differences
Assets	<u>3,778,531</u>	<u>3,690,474</u>	
Liabilities	<u>80,790</u>	<u>83,802</u>	
Net assets	<u>3,697,741</u>	<u>3,606,672</u>	<u>-91,069</u>

Miscellaneous Information

Amended return _____
 Return / extended due date 2/15/10
 Failure to file penalty _____

**BLANKENSHIP CPA GROUP, PLLC
109 WESTPARK DRIVE, SUITE 430
BRENTWOOD, TN 37027-5032
615-373-3771**

CONFIDENTIAL

ROCKETOWN OF MIDDLE TENNESSEE
P. O. BOX 331129
NASHVILLE, TN 37203

Dear Lauren:

We have prepared the enclosed returns from information provided by you without verification or audit. We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Also enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

IRS CIRCULAR 230 DISCLOSURE REQUIREMENT: IRS Circular 230 requires us to notify you that any tax advice contained in this communication (including attachments) is not intended or written to be used, and cannot be used, by any person for the purpose of avoiding tax penalties that may be imposed by law.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

BLANKENSHIP CPA GROUP, PLLC

PENELOPE D. WILSON, CPA

Filing Instructions

ROCKETOWN OF MIDDLE TENNESSEE

Exempt Organization Tax Return

Taxable Year Ended June 30, 2009

Date Due: February 15, 2010

Remittance: None is required. Your Form 990 for the tax year ended 6/30/09 shows no balance due.

Mail To: Department of the Treasury
Internal Revenue Service Center
Ogden, UT 84201-0027

If a private delivery service is used, mail to:
OSPC
1973 N. Rulon White Blvd.
Ogden, UT 84404

Signature: The return should be signed and dated on Page 1 by an officer representing the organization.

Other: Initial and date the copy of the return, and retain it for your records.

Certified mail with postmarked receipts is recommended for written proof of timely filing and/or payment. File the postmarked receipt with your copy of the tax return.

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

OMB No. 1545-0047
2008
Open to Public Inspection

A For the 2008 calendar year, or tax year beginning **7/01/08**, and ending **6/30/09**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization <p align="center">ROCKETOWN OF MIDDLE TENNESSEE</p> Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite P. O. BOX 331129 City or town, state or country, and ZIP + 4 <p align="center">NASHVILLE TN 37203</p>	D Employer identification number <p align="center">62-1571573</p> E Telephone number <p align="center">615-843-4001</p> G Gross receipts \$ 1,334,445
F Name and address of principal officer: <p align="center">REGINA NEWKIRK SAME AS ABOVE</p>		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	

I Tax-exempt status: 501(c) (**3**) (insert no.) 4947(a)(1) or 527

J Website: **u WWW.ROCKETOWN.COM**

K Type of organization: Corporation Trust Association Other **u**

L Year of formation: **1994** **M** State of legal domicile: **TN**

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: <p align="center">ROCKETOWN'S MISSION IS TO CREATE CULTURALLY RELEVANT ENVIRONMENTS THAT FOSTER VITAL RELATIONSHIPS BETWEEN DISENFRANCHISED ADOLESCENTS AND CHRISTIAN MENTORS IN ORDER TO MEET THE SOCIAL, SPIRITUAL, AND PHYSICAL</p>			
Activities & Governance	2 Check this box <input checked="" type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.			
	3 Number of voting members of the governing body (Part VI, line 1a)	3	23	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	23	
	5 Total number of employees (Part V, line 2a)	5	60	
	6 Total number of volunteers (estimate if necessary)	6	60-75	
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a		
	b Net unrelated business taxable income from Form 990-T, line 34	7b		0
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year	
	9 Program service revenue (Part VIII, line 2g)	500,130	284,221	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	276,800	285,888	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	468,419	555,396	
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,245,349	1,125,505	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)			
	14 Benefits paid to or for members (Part IX, column (A), line 4)			
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	472,544	588,091	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	95		
	b Total fundraising expenses (Part IX, column (D), line 25) u	127,153		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	703,480	628,483	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,176,119	1,216,574		
19 Revenue less expenses. Subtract line 18 from line 12	69,230	-91,069		
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year	End of Year	
	21 Total liabilities (Part X, line 26)	3,778,531	3,690,474	
	22 Net assets or fund balances. Subtract line 21 from line 20	80,790	83,802	
		3,697,741	3,606,672	

Part II Signature Block

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.

Sign Here

Signature of officer _____ Date _____

Type or print name and title _____

Paid Preparer's Use Only

Preparer's signature _____ Date _____ Check if self-employed Preparer's identifying number (see instructions) **P00940948**

Firm's name (or yours if self-employed), address, and ZIP + 4 **BLANKENSHIP CPA GROUP, PLLC**
109 WESTPARK DRIVE, SUITE 430
BRENTWOOD, TN 37027-5032

EIN **u 45-0491842**
 Phone no. **u 615-373-3771**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

ROCKETOWN'S MISSION IS TO CREATE CULTURALLY RELEVANT ENVIRONMENTS THAT FOSTER VITAL RELATIONSHIPS BETWEEN DISENFRANCHISED ADOLESCENTS AND CHRISTIAN MENTORS IN ORDER TO MEET THE SOCIAL, SPIRITUAL, AND PHYSICAL

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **361,733** including grants of \$) (Revenue \$)

THE SIXTH AVENUE SKATEPARK

4b (Code:) (Expenses \$ **309,071** including grants of \$) (Revenue \$)

THE ROCKTOWN MUSIC VENUE

4c (Code:) (Expenses \$ **106,895** including grants of \$) (Revenue \$)

THE EMPYREAN COFFEE BAR

4d Other program services. (Describe in Schedule O.)

(Expenses \$ **174,697** including grants of \$) (Revenue \$)

4e Total program service expenses u \$ **952,396** (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?		X
14b	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25.		X
24b	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d	d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
25b	b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1a	11		
1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a	60		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	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
b	If "Yes," enter the name of the foreign country: u See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

		Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body	1a	23
b	Enter the number of voting members that are independent	1b	23
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6	Does the organization have members or stockholders?	6	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	X
b	Each committee with authority to act on behalf of the governing body?	8b	X
9a	Does the organization have local chapters, branches, or affiliates?	9a	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	X

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	X
13	Does the organization have a written whistleblower policy?	13	X
14	Does the organization have a written document retention and destruction policy?	14	X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a	The organization's CEO, Executive Director, or top management official?	15a	X
b	Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	15b	X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed u TN
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: u LAUREN BROOKS 401 6TH AVE SOUTH NASHVILLE TN 37203 615-843-4001

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

I List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

I List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

I List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

I List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL W. SMITH BOARD MEMBER	1	X					0	0	0	
MARK EZELL BOARD MEMBER	1	X					0	0	0	
TOM HARRINGTON BOARD MEMBER	1	X					0	0	0	
BARD LIDDLE BOARD MEMBER	1	X					0	0	0	
LYDIA ARMISTAD BOARD MEMBER	1	X					0	0	0	
MARK BLAZE BOARD MEMBER	1	X					0	0	0	
JUDITH BRAKEN BOARD MEMBER	1	X					0	0	0	
ROBIN CROW BOARD MEMBER	1	X					0	0	0	
BETTY DICKENS BOARD MEMBER	1	X					0	0	0	
CHARLES DORRIS BOARD MEMBER	1	X					0	0	0	
JEFF EDMONSON BOARD MEMBER	1	X					0	0	0	
MARK G'FRANCISCO BOARD MEMBER	1	X					0	0	0	
JAY STROTHER BOARD MEMBER	1	X					0	0	0	
AMY THOMAS BOARD MEMBER	1	X					0	0	0	
EMMETT H. TURNER BOARD MEMBER	1	X					0	0	0	
MICHAEL VADEN BOARD MEMBER	1	X					0	0	0	
ROBERT E. WOOD BOARD MEMBER	1	X					0	0	0	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
GLENN WORLEY BOARD MEMBER	1	X					0	0	0	
SEPHIA WRIGHT BOARD MEMBER	1	X					0	0	0	
BOB YEAGER BOARD MEMBER	1	X					0	0	0	
LAURA GRIDER BOARD MEMBER	1	X					0	0	0	
BOB MUELLER BOARD MEMBER	1	X					0	0	0	
WILLIAM WRIGHT BOARD MEMBER	1	X					0	0	0	
1b Total							u			

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization **u 0**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization **u 0**

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	60,000				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	224,221				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f	u	284,221				
	Program Service Revenue	2a PROGRAM SERVICE REVENUE		Busn. Code			
b				285,888	285,888		
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f		u	285,888				
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)		u			
	4 Income from investment of tax-exempt bond proceeds		u				
	5 Royalties		u				
	6a Gross Rents	(i) Real	(ii) Personal				
		144,293					
		b Less: rental exps.					
	c Rental inc. or (loss)	144,293					
	d Net rental income or (loss)	u	144,293			144,293	
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis & sales exps.					
		c Gain or (loss)					
	d Net gain or (loss)	u					
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a	232,017				
		b Less: direct expenses	20,521				
		c Net income or (loss) from fundraising events	u	211,496	211,496		
9a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities	u					
10a Gross sales of inventory, less returns and allowances	a	344,957					
	b Less: cost of goods sold	188,419					
	c Net income or (loss) from sales of inventory	u	156,538	156,538			
Miscellaneous Revenue		Busn. Code					
11a SPONSORSHIPS			21,800	21,800			
b OTHER REVENUE			21,269	21,269			
c							
d All other revenue							
e Total. Add lines 11a-11d	u	43,069					
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	u	1,125,505	696,991	0	144,293		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
 All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	303,889	257,284		46,605
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	193,310	149,954	24,580	18,776
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	10,901	5,951	2,974	1,976
9 Other employee benefits	37,734	29,537	1,937	6,260
10 Payroll taxes	42,257	32,743	6,092	3,422
11 Fees for services (non-employees):				
a Management				
b Legal	39,197	1,072	30,813	7,312
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	25,776	5,866	18,095	1,815
14 Information technology				
15 Royalties				
16 Occupancy	25,083	19,159	4,569	1,355
17 Travel	7,674	6,316	997	361
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	124,652	115,926	4,363	4,363
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a PURCHASED SERVICES OTHER	76,893	45,429	11,416	20,048
b UTILITIES	74,017	70,077	1,970	1,970
c PURCHASED SERVICES PERSON	58,344	56,711	260	1,373
d INSURANCE	43,417	39,076	4,341	
e REPAIRS AND MAINTENANCE	34,666	34,036	630	
f All other expenses	118,764	83,259	23,988	11,517
25 Total functional expenses. Add lines 1 through 24f	1,216,574	952,396	137,025	127,153
26 Joint Costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	57,694	1	179,610
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	203,473	3	111,457
	4 Accounts receivable, net	7,822	4	5,179
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	32,795	8	32,995
	9 Prepaid expenses and deferred charges	662	9	
	10a Land, buildings, and equipment: cost basis	10a 4,325,482		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b 969,260		
		3,476,085	10c	3,356,222
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11		15	5,011	
16 Total assets. Add lines 1 through 15 (must equal line 34)	3,778,531	16	3,690,474	
Liabilities	17 Accounts payable and accrued expenses	80,790	17	83,802
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	80,790	26	83,802
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	3,494,268	27	3,484,876
	28 Temporarily restricted net assets	203,473	28	121,796
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	3,697,741	33	3,606,672	
34 Total liabilities and net assets/fund balances	3,778,531	34	3,690,474	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b	Were the organization's financial statements audited by an independent accountant?	X	
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b	If "Yes," did the organization undergo the required audit or audits?		

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return **ROCKETOWN OF MIDDLE TENNESSEE** Identifying number **62-1571573**

Business or activity to which this form relates
INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	250,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

(a) Description of property		(b) Cost (business use only)	(c) Elected cost
6			
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12	▶ 13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	124,817

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶ <input type="checkbox"/>	

Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i	Nonresidential real property		39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instr.	22	124,817
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2008

Open to Public Inspection

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

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

Department of the Treasury Internal Revenue Service

Name of the organization

ROCKETOWN OF MIDDLE TENNESSEE

Employer identification number 62-1571573

Part I 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 only one organization.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.)
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9 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 June 30, 1975. See section 509(a)(2). (Complete Part III.)
10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)
11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
a Type I b Type II c Type III—Functionally Integrated d Type III—Other
e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) 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?
(ii) A family member of a person described in (i) above?
(iii) A 35% controlled entity of a person described in (i) or (ii) above?

Table with 2 columns: Yes, No. Rows: 11g(i), 11g(ii), 11g(iii)

h Provide the following information about the organizations the organization supports.

Table with 7 main columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization in col. (i) listed in your governing document?, (v) Did you notify the organization in col. (i) of your support?, (vi) Is the organization in col. (i) organized in the U.S., (vii) Amount of support. Sub-columns for Yes/No in (iv), (v), and (vi).

Total

Part II 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) u	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	538,192	1,058,036	525,550	500,130	284,221	2,906,129
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1-3	538,192	1,058,036	525,550	500,130	284,221	2,906,129
5 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)						765,449
6 Public support. Subtract line 5 from line 4						2,140,680

Section B. Total Support

Calendar year (or fiscal year beginning in) u	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	538,192	1,058,036	525,550	500,130	284,221	2,906,129
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	168,355	119,299	144,088	139,557	144,293	715,592
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	4,704	31,443	18,037	73,361	43,069	170,614
11 Total support. Add lines 7 through 10						3,792,335
12 Gross receipts from related activities, etc. (see instructions)					12	1,750,447
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	56.4475 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	61.2460 %
16a 33 1/3 % support test—2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
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		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% 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 qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% 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 qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Table with 7 columns: (a) 2004, (b) 2005, (c) 2006, (d) 2007, (e) 2008, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business under section 513; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1-5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2004, (b) 2005, (c) 2006, (d) 2007, (e) 2008, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.); 13 Total support. (Add lines 9, 10c, 11, and 12.)

14 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

Table with 3 columns: Description, Value, Percentage. Row 15: Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 %

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, Value, Percentage. Row 17: Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 %

19a 33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

PART II, LINE 10 - OTHER INCOME DETAIL

MISCELLANEOUS REVENUE \$ 170,614

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors
u Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

2008

Name of the organization

Employer identification number

ROCKETOWN OF MIDDLE TENNESSEE

62-1571573

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(**3**) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

General Rule

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ► \$

Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization

ROCKETOWN OF MIDDLE TENNESSEE

Employer identification number

62-1571573**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MEMORIAL FOUNDATION 100 BLUEGRASS COMMONS BLVD, STE 320 HENDERSONVILLE TN 37075	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	MICHAEL W. SMITH 404 BRIDGE STREET FRANKLIN TN 37064	\$ 22,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	COKE 4100 COCA-COLA PLAZA PO BOX 31371 CHARLOTTE NC 28231	\$ 7,550	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	MARK & MARTHA EZELL 4800 LEALAND LANE NASHVILLE TN 37220	\$ 30,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	SEAN HANNITY C/O FIRST CHEROKEE STATE BANK 9860 HIGHWAY 92 WOODSTOCK GA 30188	\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	HCA FOUNDATION ONE PARK PLAZA I-4 EAST NASHVILLE TN 37203	\$ 33,064	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

ROCKETOWN OF MIDDLE TENNESSEE

Employer identification number

62-1571573

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	METROPOLITAN DEVELOPMENT AND HOUSING 701 SOUTH SIXTH STREET NASHVILLE TN 37206	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	LOTTERY FOR EDUCATION - STATE OF TN TENNESSEE DEPARTMENT OF EDUCATION 5TH FLOOR ANDREW JACKSON TOWER 710 JAMES ROBERTSON PARKWAY NASHVILLE TN 37243	\$ 40,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	HCA CORPORATION PO BOX 550 NASHVILLE TN 37203	\$ 10,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	BOB & JANIE YEAGER 2630 OLD CHARLOTTE PIKE FRANKLIN TN 37064	\$ 22,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	THOMAS HARRINGTON 4009 LYNNWOOD CT FRANKLIN TN 37069	\$ 16,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12	SAM & PEGGY MOORE 33 NORTHUMBERLAND NASHVILLE TN 37215	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

ROCKETOWN OF MIDDLE TENNESSEE

Employer identification number

62-1571573

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	PURITY FOUNDATION PO BOX 100957 NASHVILLE TN 37224	\$ 7,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
14	PURITY DAIRIES PO BOX 100957 NASHVILLE TN 37224	\$ 12,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
15	HEMPHIL BROTHERS COACH CO PO BOX 78099 NASHVILLE TN 37027	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
16	CURB RECORDS 48 MUSIC SQUARE EAST NASHVILLE TN 37203	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
17	ADVOCARE 2727 REALTY RD CARROLLTON TX 75006	\$ 7,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
18	MARK & MARTHA EZELL FOUNDATION PO 100957 NASHVILLE TN 37224	\$ 7,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

u Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization: ROCKETOWN OF MIDDLE TENNESSEE; Employer identification number: 62-1571573

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate contributions, aggregate grants, aggregate value, and questions about donor advisement.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Form for Part II including questions about conservation easements, a table for 'Held at the End of the Year' (2a-2d), and questions about monitoring and expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Form for Part III including questions about reporting art and historical treasures, and a table for reporting revenues and assets.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment **u** _____ %
- b Permanent endowment **u** _____ %
- c Term endowment **u** _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? **3b**

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		1,050,000		1,050,000
b Buildings		2,599,667	468,545	2,131,122
c Leasehold improvements				
d Equipment		661,461	486,361	175,100
e Other		14,354	14,354	
Total. Add lines 1a–1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)		u		3,356,222

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,125,505
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,216,574
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-91,069
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-91,069

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	1,317,194
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	3,270
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	188,419
e	Add lines 2a through 2d	2e	191,689
3	Subtract line 2e from line 1	3	1,125,505
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	1,125,505

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	1,408,263
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	3,270
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	188,419
e	Add lines 2a through 2d	2e	191,689
3	Subtract line 2e from line 1	3	1,216,574
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	1,216,574

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

<u>PART XI, LINE 8 - RECONCILIATION OF CHANGES - OTHER</u>		
<u>COST OF GOOD SOLD</u>	\$	<u>188,419</u>
<u>COST OF GOODS SOLD</u>	\$	<u>-188,419</u>
<u>PART XII, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER</u>		
<u>COST OF GOOD SOLD</u>	\$	<u>188,419</u>

Part XIV Supplemental Information (continued)

PART XIII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER
COST OF GOODS SOLD \$ 188,419

Table with 10 columns and 20 rows of dashed lines for supplemental information.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events	
		FUNDRAISING EVE		NONE	(Add col. (a) through col. (c))	
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	232,017		232,017	
	2	Less: Charitable contributions				
	3	Gross revenue (line 1 minus line 2)	232,017		232,017	
Direct Expenses	4	Cash prizes				
	5	Non-cash prizes				
	6	Rent/facility costs				
	7	Other direct expenses	20,521		20,521	
	8	Direct expense summary. Add lines 4 through 7 in column (d)				20,521
	9	Net income summary. Combine lines 3 and 8 in column (d)				211,496

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))	
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Non-cash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Combine lines 1 and 7 in column (d)				

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities:		
a Is the organization licensed to operate gaming activities in each of these states?	9a	
b If "No," Explain:		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If "Yes," Explain:		
11 Does the organization operate gaming activities with nonmembers?	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

13 Indicate the percentage of gaming activity operated in:

- a The organization's facility
- b An outside facility

13a		%
13b		%

	Yes	No

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records:

Name **u**

Address **u**

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

15a

- b If "Yes," enter the amount of gaming revenue received by the organization **u** \$ and the amount of gaming revenue retained by the third party **u** \$

c If "Yes," enter name and address:

Name **u**

Address **u**

16 Gaming manager information:

Name **u**

Gaming manager compensation **u** \$

Description of services provided **u**

- Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

17a

- b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year **u** \$

SCHEDULE O

(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

u Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public Inspection

ROCKETOWN OF MIDDLE TENNESSEE

Employer identification number

62-1571573

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

NEEDS OF THE TEENS. ROCKETOWN HAS VISITORS REPRESENTING EVERY SOCIAL DEMOGRAPHIC OF THE GREATER NASHVILLE AREA AND SURROUNDING COUNTIES.

FORM 990, PART I, LINE 6

VOLUNTEERS PROVIDE SERVICE TO THE ORGANIZATION IN THE FOLLOWING AREAS: BUILDING MAINTENANCE AND IMPROVEMENT, CROWD MANAGEMENT AT EVENTS, SPECIALTY TEACHERS AND LECTURERS, AND THROUGH OTHER ACTIVITIES.

FORM 990, PART III, LINE 4D - ALL OTHER ACHIEVEMENTS

AFTER SCHOOL PROGRAMS AND SUMMER CAMPS

FORM 990, PART VI, LINE 10 - ORGANIZATION'S PROCESS USED TO REVIEW FORM 990

THE DRAFT 990 IS PROVIDED TO BOTH THE FINANCE COMMITTEE AND THE EXECUTIVE COMMITTEE FOR REVIEW PRIOR TO APPROVAL. APPROVAL IS RECEIVED FROM BOTH COMMITTEES AND THE 990 IS FILED. THE 990 IS THEN PROVIDED TO THE FULL BOARD OF DIRECTORS FOR THEIR REVIEW.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE BOARD GOVERNANCE COMMITTEE ANNUALLY ISSUES THE CONFLICT OF INTEREST POLICY AND MONITORS CONVERSATIONS AND BOARD MEETINGS FOR POTENTIAL CONFLICTS.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

THE ORGANIZATION DOES NOT HAVE ANY EMPLOYEES WHICH MEET THE \$100,000

Name of the organization

ROCKETOWN OF MIDDLE TENNESSEE

Employer identification number

62-1571573

THRESHOLD FOR REPORTING COMPENSATION. THE ORGANIZATION UTILIZED AN OUTSIDE
CONSULTANT WHEN SEARCHING FOR QUALIFIED KEY EMPLOYEES. THE CONSULTANT WAS
TRAINED TO LOOK FOR THE MOST QUALIFIED APPLICANTS WITHIN THE MARKET
COMPENSATION RANGE FOR COMPARABLE JOBS. APPLICANTS WERE INTERVIEWED BY A
COMBINATION OF PEOPLE INCLUDING THE CONSULTANT, BOARD MEMBERS AND STAFF.
THE ULTIMATE DECISION WAS MADE BY OUR EXECUTIVE COMMITTEE OF THE BOARD.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE ORGANIZATION'S ANNUAL REPORT AND FORM 990 ARE AVAILABLE ON THE
ORGANIZATION'S WEBSITE. THE 990 IS ALSO AVAILABLE THROUGH THE WEBSITE
GUIDESTAR.COM. ALL OTHER ORGANIZING DOCUMENTS ARE AVAILABLE UPON REQUEST.

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Other Depreciation:									
1	ARCHITECTURE	6/30/02	25,115			25,115	15 MO S/L	10,046	1,674
2	SECURITY SYSTEM	1/10/03	34,419			34,419	5 MO S/L	34,419	0
3	INSULATION AND SOUND ABATEMEN	1/10/03	2,376			2,376	10 MO S/L	1,307	237
4	LOW VOLATE WIRING AND LADDER F	1/10/03	20,780			20,780	39 MO S/L	2,931	532
5	MINI BLINDS THROUGHOUT FACILITY	2/18/03	1,885			1,885	10 MO S/L	1,005	189
6	CONSTRUCTIONS COSTS	1/06/03	2,117,690			2,117,690	39 MO S/L	298,649	54,299
7	CONSULTANTS	1/10/03	91,179			91,179	39 MO S/L	12,859	2,337
8	OUTDOOR SIGN FOR BLDG	3/01/03	3,000			3,000	10 MO S/L	1,600	300
9	PARTY ROOM CARPET	8/31/03	1,579			1,579	10 MO S/L	763	158
10	BUILDING 401 6TH AVE SO	10/15/03	275,167			275,167	40 MO S/L	32,676	6,879
11	CONCRETE SIDEWALK NEAR OFFICE	12/10/04	1,000			1,000	15 MO S/L	239	67
12	POS TERMINALS	1/10/03	28,569			28,569	5 MO S/L	28,569	0
13	3ID CARD SYSTEMS	1/10/03	18,586			18,586	5 MO S/L	18,586	0
14	DELL POWER EDGE 2600 SERVER	1/10/03	4,830			4,830	3 MO S/L	4,830	0
15	17 INCH LCD FLAT PANEL MONITOR	1/30/03	599			599	3 MO S/L	599	0
16	2 DELL DIMENSION COMPUTERS	9/25/02	2,412			2,412	3 MO S/L	2,412	0
17	DELL DIMENSION COMPUTERS	12/05/02	1,180			1,180	3 MO S/L	1,180	0
18	ADMIN SERVER	6/30/03	5,193			5,193	5 MO S/L	5,193	0
19	DELL DESKTOPS - CYBER CAFE	11/19/03	1,328			1,328	5 MO S/L	1,218	110
20	HP LASERJET 2300 PRINTER	5/01/04	1,174			1,174	3 MO S/L	1,174	0
21	VIDEO EDITING EQUIPMENT	7/15/04	2,232			2,232	5 MO S/L	1,786	446
22	SONY DIGITAL CAMCORDER	8/10/04	1,240			1,240	5 MO S/L	971	248
23	G5 1.8GHz IMAC COMPUTER	6/09/05	5,439			5,439	3 MO S/L	5,439	0
24	OFFICE FURNITURE	12/01/01	500			500	5 MO S/L	500	0
25	OFFICE FURNITURE	1/07/02	1,082			1,082	5 MO S/L	1,082	0
26	OFFICE FURNITURE	1/07/02	740			740	5 MO S/L	740	0
27	DRY DISPLAY CASE	1/10/03	1,000			1,000	5 MO S/L	1,000	0
28	REFRIGERATED DISPLAY CASE	1/10/03	2,500			2,500	5 MO S/L	2,500	0
29	33 CUSTOM CAFE TABLES	1/10/03	2,550			2,550	5 MO S/L	2,550	0
30	60 USED BALCK CHAIRS	1/10/03	2,398			2,398	5 MO S/L	2,398	0
31	18 CAFE TABLE BASES	1/10/03	869			869	7 MO S/L	683	124
32	SKATE PARK RETAIL FIXTURES	1/06/03	2,820			2,820	5 MO S/L	2,820	0
33	VINTAGE STORE RETAIL FIXTURES	1/01/03	1,838			1,838	5 MO S/L	1,838	0
34	2 STAINLESS STEEL TABLES	1/10/03	400			400	10 MO S/L	220	40
35	24 SWIVLE BAR STOOLS	1/10/03	1,199			1,199	5 MO S/L	1,199	0
36	5 COMPARTMENT FILE CABINET	2/05/03	607			607	10 MO S/L	329	60
37	3 ROLLING OFFICE CHAIRS	2/05/03	495			495	5 MO S/L	495	0
38	GREEN ROOM FURNITURE	1/10/03	1,411			1,411	10 MO S/L	776	141
39	OFFICE FURNITURE	2/05/03	1,779			1,779	5 MO S/L	1,779	0
40	8 SOFAS	1/10/03	5,147			5,147	7 MO S/L	4,044	736
41	29 CHAIRS	1/10/03	10,242			10,242	7 MO S/L	8,048	1,463
42	SKATEPARK LOCKERS	3/14/05	1,450			1,450	7 MO S/L	691	207
43	LAND	10/15/03	1,050,000			1,050,000	0 -- Land	0	0
44	HWS TELEVISION	8/09/94	1,712			1,712	7 MO S/L	1,712	0
45	STAGE LIGHTING SYSTEM	8/12/95	4,400			4,400	10 MO S/L	4,400	0
46	SOUND GEAR CAPSTONE MUSIC	11/09/95	5,075			5,075	10 MO S/L	5,075	0
47	SOUND EQUIP NASH CARTAGE	11/21/95	1,068			1,068	10 MO S/L	1,068	0
48	VOCAL PROCESSING UNIT	1/09/96	667			667	10 MO S/L	667	0
49	CORD WRAPS	4/25/96	229			229	10 MO S/L	229	0
50	MONITOR MIXING BOARD	3/01/96	499			499	5 MO S/L	499	0
51	SNAKE STAGE STUDIO	2/11/97	735			735	5 MO S/L	735	0
52	LASER LIGHTS	3/13/97	747			747	5 MO S/L	747	0
53	SOUND/LIGHTS EQUIPMENT	6/24/99	1,000			1,000	5 MO S/L	1,000	0
54	COMPUTER - SHAWN	8/05/00	1,489			1,489	3 MO S/L	1,489	0
55	2 TECHNIC 1200'S	8/07/00	1,000			1,000	5 MO S/L	1,000	0
56	AMERICAN MUSIC SUPPLY	8/17/00	2,980			2,980	5 MO S/L	2,980	0
57	CANON 2020 COPY MACHINE	8/24/00	869			869	3 MO S/L	869	0
58	TENT	5/07/01	3,270			3,270	5 MO S/L	3,270	0
59	HP COMPUTER	12/05/01	1,375			1,375	5 MO S/L	1,375	0
60	PALM PILOTS	6/19/02	5,374			5,374	5 MO S/L	5,374	0
61	COMPUTER FOR OUTREACH	9/19/01	3,236			3,236	5 MO S/L	3,236	0
62	DIGITAL MOVIE CAMERA	10/30/01	3,769			3,769	5 MO S/L	3,769	0
63	LIGHTING	7/23/01	4,500			4,500	5 MO S/L	4,500	0
64	SKATE PARK RAMPS	1/06/03	200,662			200,662	10 MO S/L	110,364	20,066
65	RANCILIO ESPRESSO MACHINE	1/10/03	6,400			6,400	10 MO S/L	3,520	640
66	LARGE RANCHILIO COFFEE GRINDER	1/10/03	700			700	7 MO S/L	550	100
67	3 COMPARTMENT SINK	1/10/03	796			796	10 MO S/L	438	79
68	2 GRINDERS	1/10/03	1,236			1,236	5 MO S/L	1,236	0

ROCKTOW ROCKETOWN OF MIDDLE TENNESSEE

62-1571573

Federal Asset Report

FYE: 6/30/2009

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
69	2 COFFEE BREWERS	1/10/03	1,099			1,099	5 MO S/L	1,099	0
70	16 MOTOROLA WALKIE TALKIES	1/10/03	2,364			2,364	3 MO S/L	2,364	0
71	SOUND & LIGHTS SYSTEM	1/10/03	223,308			223,308	10 MO S/L	122,820	22,330
72	USED SCISSOR LIFT	1/10/03	1,500			1,500	2 MO S/L	1,500	0
73	PROTECTIVE PADS FOR THE PAD REN	1/01/03	1,840			1,840	2 MO S/L	1,840	0
74	WASHER & DRYER	1/06/03	570			570	5 MO S/L	570	0
75	COPY MACHINE FOR SKATE PARK	1/06/03	908			908	3 MO S/L	908	0
76	GREEN ROOM TV/VCR	1/10/03	513			513	5 MO S/L	513	0
77	60" TV (DONATED)	2/01/03	2,000			2,000	5 MO S/L	2,000	0
78	PHONE SYSTEM	1/01/03	11,000			11,000	7 MO S/L	8,643	1,571
79	LOUDSPEAKERS & MONITOR	9/10/03	2,006			2,006	5 MO S/L	1,939	67
80	STAGE CURTAIN	9/10/03	775			775	5 MO S/L	749	26
81	2 EV MTS-IFULL RANGE CABS	6/17/04	884			884	5 MO S/L	707	177
82	INFORMUS TECHNOLOGY	11/01/03	8,000			8,000	5 MO S/L	7,467	533
83	SKATE PARK RAMP IMPROVEMENTS	5/20/04	4,147			4,147	10 MO S/L	1,693	415
84	RAMP IMPROVEMENTS	6/30/05	6,368			6,368	5 MO S/L	3,821	1,274
85	MICROPHONES (6) CABLES	9/30/04	1,298			1,298	5 MO S/L	974	259
86	COPY MACHINE SKATE PARK	10/09/04	534			534	5 MO S/L	400	107
87	MICROSOFT XP	1/11/02	974			974	5 MO S/L	974	0
88	FUNDRAISING SOFTWARE	11/05/01	2,443			2,443	5 MO S/L	2,443	0
89	FUNDRAISING SOFTWARE	12/21/01	2,227			2,227	5 MO S/L	2,227	0
90	MICROSOFT RETAIL MGMT SOFTWARE	1/10/03	5,015			5,015	3 MO S/L	5,015	0
91	PC CHARGE SOFTWARE	1/10/03	1,425			1,425	3 MO S/L	1,425	0
92	QUICKBOOS PROFESSIONAL 2003	9/10/02	459			459	3 MO S/L	459	0
93	NSPIRE SOFTWARE	1/01/03	500			500	5 MO S/L	500	0
94	NON PROFIT BOOKS	6/02/05	1,311			1,311	3 MO S/L	1,311	0
95	MAC COMPUTER	11/09/05	1,222			1,222	5 MO S/L	652	244
96	DELL LAPTOP	6/20/06	855			855	5 MO S/L	342	171
97	SKATE PARK IMPROVEMENTS	8/31/05	1,154			1,154	5 MO S/L	654	231
98	BOX TRUCK	5/01/06	2,500			2,500	5 MO S/L	1,083	500
99	BOX TRUCK	6/01/06	2,500			2,500	5 MO S/L	1,042	500
100	BOX TRUCK	6/30/06	2,000			2,000	5 MO S/L	800	400
101	AIRCONDITIONING UNIT SKATEPARK	6/28/07	23,809			23,809	10 MO S/L	2,579	2,381
102	NEW COUNTERS	6/30/07	728			728	5 MO S/L	146	145
103	Delta Stage Lighting	4/01/08	1,668			1,668	5 MO S/L	83	334
104	Server HV3P	5/28/08	3,650			3,650	5 MO S/L	61	730
105	Imac Computer 20/2.4/	6/30/08	1,199			1,199	5 MO S/L	0	240
106	Indoor Security	8/08/07	2,100			2,100	7 MO S/L	275	300
107	Jands Hog500-Lighting Board	12/31/07	4,050			4,050	7 MO S/L	289	579
108	Delta Stage Lighting SN F07516	4/15/09	4,790			4,790	7 MO S/L	0	171
	Total Other Depreciation		<u>4,325,480</u>			<u>4,325,480</u>		<u>844,612</u>	<u>124,817</u>
	Total ACRS and Other Depreciation		<u>4,325,480</u>			<u>4,325,480</u>		<u>844,612</u>	<u>124,817</u>
	Grand Totals		4,325,480			4,325,480		844,612	124,817
	Less: Dispositions		0			0		0	0
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>4,325,480</u>			<u>4,325,480</u>		<u>844,612</u>	<u>124,817</u>

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Other Depreciation:											
1	ARCHITECTURE	6/30/02	0				0	0	HY	0	0
2	SECURITY SYSTEM	1/10/03	0				0	0	HY	0	0
3	INSULATION AND SOUND ABATEMEN	1/10/03	0				0	0	HY	0	0
4	LOW VOLATE WIRING AND LADDER F	1/10/03	0				0	0	HY	0	0
5	MINI BLINDS THROUGHOUT FACILITY	2/18/03	0				0	0	HY	0	0
6	CONSTRUCTIONS COSTS	1/06/03	0				0	0	HY	0	0
7	CONSULTANTS	1/10/03	0				0	0	HY	0	0
8	OUTDOOR SIGN FOR BLDG	3/01/03	0				0	0	HY	0	0
9	PARTY ROOM CARPET	8/31/03	0				0	0	HY	0	0
10	BUILDING 401 6TH AVE SO	10/15/03	0				0	0	HY	0	0
11	CONCRETE SIDEWALK NEAR OFFICE	12/10/04	0				0	0	HY	0	0
12	POS TERMINALS	1/10/03	0				0	0	HY	0	0
13	3ID CARD SYSTEMS	1/10/03	0				0	0	HY	0	0
14	DELL POWER EDGE 2600 SERVER	1/10/03	0				0	0	HY	0	0
15	17 INCH LCD FLAT PANEL MONITOR	1/30/03	0				0	0	HY	0	0
16	2 DELL DIMENSION COMPUTERS	9/25/02	0				0	0	HY	0	0
17	DELL DIMENSION COMPUTERS	12/05/02	0				0	0	HY	0	0
18	ADMIN SERVER	6/30/03	0				0	0	HY	0	0
19	DELL DESKTOPS - CYBER CAFE	11/19/03	0				0	0	HY	0	0
20	HP LASERJET 2300 PRINTER	5/01/04	0				0	0	HY	0	0
21	VIDEO EDITING EQUIPMENT	7/15/04	0				0	0	HY	0	0
22	SONY DIGITAL CAMCORDER	8/10/04	0				0	0	HY	0	0
23	G5 1.8GHZ IMAC COMPUTER	6/09/05	0				0	0	HY	0	0
24	OFFICE FURNITURE	12/01/01	0				0	0	HY	0	0
25	OFFICE FURNITURE	1/07/02	0				0	0	HY	0	0
26	OFFICE FURNITURE	1/07/02	0				0	0	HY	0	0
27	DRY DISPLAY CASE	1/10/03	0				0	0	HY	0	0
28	REFRIGERATED DISPLAY CASE	1/10/03	0				0	0	HY	0	0
29	33 CUSTOM CAFE TABLES	1/10/03	0				0	0	HY	0	0
30	60 USED BALCK CHAIRS	1/10/03	0				0	0	HY	0	0
31	18 CAFE TABLE BASES	1/10/03	0				0	0	HY	0	0
32	SKATE PARK RETAIL FIXTURES	1/06/03	0				0	0	HY	0	0
33	VINTAGE STORE RETAIL FIXTURES	1/01/03	0				0	0	HY	0	0
34	2 STAINLESS STEEL TABLES	1/10/03	0				0	0	HY	0	0
35	24 SWIVLE BAR STOOLS	1/10/03	0				0	0	HY	0	0
36	5 COMPARTMENT FILE CABINET	2/05/03	0				0	0	HY	0	0
37	3 ROLLING OFFICE CHAIRS	2/05/03	0				0	0	HY	0	0
38	GREEN ROOM FURNITURE	1/10/03	0				0	0	HY	0	0
39	OFFICE FURNITURE	2/05/03	0				0	0	HY	0	0
40	8 SOFAS	1/10/03	0				0	0	HY	0	0
41	29 CHAIRS	1/10/03	0				0	0	HY	0	0
42	SKATEPARK LOCKERS	3/14/05	0				0	0	HY	0	0
43	LAND	10/15/03	0				0	0	HY	0	0
44	HWS TELEVISION	8/09/94	0				0	0	HY	0	0
45	STAGE LIGHTING SYSTEM	8/12/95	0				0	0	HY	0	0
46	SOUND GEAR CAPSTONE MUSIC	11/09/95	0				0	0	HY	0	0
47	SOUND EQUIP NASH CARTAGE	11/21/95	0				0	0	HY	0	0
48	VOCAL PROCESSING UNIT	1/09/96	0				0	0	HY	0	0
49	CORD WRAPS	4/25/96	0				0	0	HY	0	0
50	MONITOR MIXING BOARD	3/01/96	0				0	0	HY	0	0
51	SNAKE STAGE STUDIO	2/11/97	0				0	0	HY	0	0
52	LASER LIGHTS	3/13/97	0				0	0	HY	0	0
53	SOUND/LIGHTS EQUIPMENT	6/24/99	0				0	0	HY	0	0
54	COMPUTER - SHAWN	8/05/00	0				0	0	HY	0	0
55	2 TECHNIC 1200'S	8/07/00	0				0	0	HY	0	0
56	AMERICAN MUSIC SUPPLY	8/17/00	0				0	0	HY	0	0
57	CANON 2020 COPY MACHINE	8/24/00	0				0	0	HY	0	0
58	TENT	5/07/01	0				0	0	HY	0	0
59	HP COMPUTER	12/05/01	0				0	0	HY	0	0
60	PALM PILOTS	6/19/02	0				0	0	HY	0	0
61	COMPUTER FOR OUTREACH	9/19/01	0				0	0	HY	0	0
62	DIGITAL MOVIE CAMERA	10/30/01	0				0	0	HY	0	0
63	LIGHTING	7/23/01	0				0	0	HY	0	0
64	SKATE PARK RAMPS	1/06/03	0				0	0	HY	0	0
65	RANCILIO ESPRESSO MACHINE	1/10/03	0				0	0	HY	0	0
66	LARGE RANCILIO COFFEE GRINDER	1/10/03	0				0	0	HY	0	0
67	3 COMPARTMENT SINK	1/10/03	0				0	0	HY	0	0
68	2 GRINDERS	1/10/03	0				0	0	HY	0	0

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
69	2 COFFEE BREWERS	1/10/03	0			0	0 HY	0	0
70	16 MOTOROLA WALKIE TALKIES	1/10/03	0			0	0 HY	0	0
71	SOUND & LIGHTS SYSTEM	1/10/03	0			0	0 HY	0	0
72	USED SCISSOR LIFT	1/10/03	0			0	0 HY	0	0
73	PROTECTIVE PADS FOR THE PAD REN	1/01/03	0			0	0 HY	0	0
74	WASHER & DRYER	1/06/03	0			0	0 HY	0	0
75	COPY MACHINE FOR SKATE PARK	1/06/03	0			0	0 HY	0	0
76	GREEN ROOM TV/VCR	1/10/03	0			0	0 HY	0	0
77	60" TV (DONATED)	2/01/03	0			0	0 HY	0	0
78	PHONE SYSTEM	1/01/03	0			0	0 HY	0	0
79	LOUDSPEAKERS & MONITOR	9/10/03	0			0	0 HY	0	0
80	STAGE CURTAIN	9/10/03	0			0	0 HY	0	0
81	2 EV MTS-1FULL RANGE CABS	6/17/04	0			0	0 HY	0	0
82	INFORMUS TECHNOLOGY	11/01/03	0			0	0 HY	0	0
83	SKATE PARK RAMP IMPROVEMENTS	5/20/04	0			0	0 HY	0	0
84	RAMP IMPROVEMENTS	6/30/05	0			0	0 HY	0	0
85	MICROPHONES (6) CABLES	9/30/04	0			0	0 HY	0	0
86	COPY MACHINE SKATE PARK	10/09/04	0			0	0 HY	0	0
87	MICROSOFT XP	1/11/02	0			0	0 HY	0	0
88	FUNDRAISING SOFTWARE	11/05/01	0			0	0 HY	0	0
89	FUNDRAISING SOFTWARE	12/21/01	0			0	0 HY	0	0
90	MICROSOFT RETAIL MGMT SOFTWARE	1/10/03	0			0	0 HY	0	0
91	PC CHARGE SOFTWARE	1/10/03	0			0	0 HY	0	0
92	QUICKBOOS PROFESSIONAL 2003	9/10/02	0			0	0 HY	0	0
93	NSPIRE SOFTWARE	1/01/03	0			0	0 HY	0	0
94	NON PROFIT BOOKS	6/02/05	0			0	0 HY	0	0
95	MAC COMPUTER	11/09/05	0			0	0 HY	0	0
96	DELL LAPTOP	6/20/06	0			0	0 HY	0	0
97	SKATE PARK IMPROVEMENTS	8/31/05	0			0	0 HY	0	0
98	BOX TRUCK	5/01/06	0			0	0 HY	0	0
99	BOX TRUCK	6/01/06	0			0	0 HY	0	0
100	BOX TRUCK	6/30/06	0			0	0 HY	0	0
101	AIRCONDITIONING UNIT SKATEPARK	6/28/07	0			0	0 HY	0	0
102	NEW COUNTERS	6/30/07	0			0	0 HY	0	0
103	Delta Stage Lighting	4/01/08	1,668			1,668	5 MO S/L	83	334
104	Server HV3P	5/28/08	3,650			3,650	5 MO S/L	61	730
105	Imac Computer 20/2.4/	6/30/08	1,199			1,199	5 MO S/L	0	240
106	Indoor Security	8/08/07	2,100			2,100	7 MO S/L	275	300
107	Jands Hog500-Lighting Board	12/31/07	4,050			4,050	7 MO S/L	289	579
108	Delta Stage Lighting SN F07516	4/15/09	4,790			4,790	7 MO S/L	0	171
Total Other Depreciation			<u>17,457</u>			<u>17,457</u>		<u>708</u>	<u>2,354</u>
Total ACRS and Other Depreciation			<u>17,457</u>			<u>17,457</u>		<u>708</u>	<u>2,354</u>
Grand Totals			17,457			17,457		708	2,354
Less: Dispositions			0			0		0	0
Net Grand Totals			<u>17,457</u>			<u>17,457</u>		<u>708</u>	<u>2,354</u>

ROCKTOW ROCKETOWN OF MIDDLE TENNESSEE

62-1571573

FYE: 6/30/2009

Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
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There are no assets that meet the criteria of this report

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
1	ARCHITECTURE	6/30/02	25,115	1,675	0
2	SECURITY SYSTEM	1/10/03	34,419	0	0
3	INSULATION AND SOUND ABATEMENT	1/10/03	2,376	238	0
4	LOW VOLATE WIRING AND LADDER RAC	1/10/03	20,780	533	0
5	MINI BLINDS THROUGHOUT FACILITY	2/18/03	1,885	188	0
6	CONSTRUCTIONS COSTS	1/06/03	2,117,690	54,300	0
7	CONSULTANTS	1/10/03	91,179	2,338	0
8	OUTDOOR SIGN FOR BLDG	3/01/03	3,000	300	0
9	PARTY ROOM CARPET	8/31/03	1,579	158	0
10	BUILDING 401 6TH AVE SO	10/15/03	275,167	6,879	0
11	CONCRETE SIDEWALK NEAR OFFICE	12/10/04	1,000	66	0
12	POS TERMINALS	1/10/03	28,569	0	0
13	3ID CARD SYSTEMS	1/10/03	18,586	0	0
14	DELL POWER EDGE 2600 SERVER	1/10/03	4,830	0	0
15	17 INCH LCD FLAT PANEL MONITOR	1/30/03	599	0	0
16	2 DELL DIMENSION COMPUTERS	9/25/02	2,412	0	0
17	DELL DIMENSION COMPUTERS	12/05/02	1,180	0	0
18	ADMIN SERVER	6/30/03	5,193	0	0
19	DELL DESKTOPS - CYBER CAFE	11/19/03	1,328	0	0
20	HP LASERJET 2300 PRINTER	5/01/04	1,174	0	0
21	VIDEO EDITING EQUIPMENT	7/15/04	2,232	0	0
22	SONY DIGITAL CAMCORDER	8/10/04	1,240	21	0
23	G5 1.8GHz IMAC COMPUTER	6/09/05	5,439	0	0
24	OFFICE FURNITURE	12/01/01	500	0	0
25	OFFICE FURNITURE	1/07/02	1,082	0	0
26	OFFICE FURNITURE	1/07/02	740	0	0
27	DRY DISPLAY CASE	1/10/03	1,000	0	0
28	REFRIGERATED DISPLAY CASE	1/10/03	2,500	0	0
29	33 CUSTOM CAFE TABLES	1/10/03	2,550	0	0
30	60 USED BALCK CHAIRS	1/10/03	2,398	0	0
31	18 CAFE TABLE BASES	1/10/03	869	62	0
32	SKATE PARK RETAIL FIXTURES	1/06/03	2,820	0	0
33	VINTAGE STORE RETAIL FIXTURES	1/01/03	1,838	0	0
34	2 STAINLESS STEEL TABLES	1/10/03	400	40	0
35	24 SWIVLE BAR STOOLS	1/10/03	1,199	0	0
36	5 COMPARTMENT FILE CABINET	2/05/03	607	61	0
37	3 ROLLING OFFICE CHAIRS	2/05/03	495	0	0
38	GREEN ROOM FURNITURE	1/10/03	1,411	141	0
39	OFFICE FURNITURE	2/05/03	1,779	0	0
40	8 SOFAS	1/10/03	5,147	367	0
41	29 CHAIRS	1/10/03	10,242	731	0
42	SKATEPARK LOCKERS	3/14/05	1,450	207	0
43	LAND	10/15/03	1,050,000	0	0
44	HWS TELEVISION	8/09/94	1,712	0	0
45	STAGE LIGHTING SYSTEM	8/12/95	4,400	0	0
46	SOUND GEAR CAPSTONE MUSIC	11/09/95	5,075	0	0
47	SOUND EQUIP NASH CARTAGE	11/21/95	1,068	0	0
48	VOCAL PROCESSING UNIT	1/09/96	667	0	0
49	CORD WRAPS	4/25/96	229	0	0
50	MONITOR MIXING BOARD	3/01/96	499	0	0
51	SNAKE STAGE STUDIO	2/11/97	735	0	0
52	LASER LIGHTS	3/13/97	747	0	0
53	SOUND/LIGHTS EQUIPMENT	6/24/99	1,000	0	0
54	COMPUTER - SHAWN	8/05/00	1,489	0	0
55	2 TECHNIC 1200'S	8/07/00	1,000	0	0
56	AMERICAN MUSIC SUPPLY	8/17/00	2,980	0	0
57	CANON 2020 COPY MACHINE	8/24/00	869	0	0
58	TENT	5/07/01	3,270	0	0
59	HP COMPUTER	12/05/01	1,375	0	0
60	PALM PILOTS	6/19/02	5,374	0	0
61	COMPUTER FOR OUTREACH	9/19/01	3,236	0	0
62	DIGITAL MOVIE CAMERA	10/30/01	3,769	0	0
63	LIGHTING	7/23/01	4,500	0	0
64	SKATE PARK RAMPS	1/06/03	200,662	20,067	0
65	RANCILIO ESPRESSO MACHINE	1/10/03	6,400	640	0
66	LARGE RANCHILIO COFFEE GRINDER	1/10/03	700	50	0
67	3 COMPARTMENT SINK	1/10/03	796	80	0

Asset	Description	Date In Service	Cost	Tax	AMT
68	2 GRINDERS	1/10/03	1,236	0	0
69	2 COFFEE BREWERS	1/10/03	1,099	0	0
70	16 MOTOROLA WALKIE TALKIES	1/10/03	2,364	0	0
71	SOUND & LIGHTS SYSTEM	1/10/03	223,308	22,331	0
72	USED SCISSOR LIFT	1/10/03	1,500	0	0
73	PROTECTIVE PADS FOR THE PAD RENTAL	1/01/03	1,840	0	0
74	WASHER & DRYER	1/06/03	570	0	0
75	COPY MACHINE FOR SKATE PARK	1/06/03	908	0	0
76	GREEN ROOM TV/VCR	1/10/03	513	0	0
77	60" TV (DONATED)	2/01/03	2,000	0	0
78	PHONE SYSTEM	1/01/03	11,000	786	0
79	LOUDSPEAKERS & MONITOR	9/10/03	2,006	0	0
80	STAGE CURTAIN	9/10/03	775	0	0
81	2 EV MTS-1FULL RANGE CABS	6/17/04	884	0	0
82	INFORMUS TECHNOLOGY	11/01/03	8,000	0	0
83	SKATE PARK RAMP IMPROVEMENTS	5/20/04	4,147	415	0
84	RAMP IMPROVEMENTS	6/30/05	6,368	1,273	0
85	MICROPHONES (6) CABLES	9/30/04	1,298	65	0
86	COPY MACHINE SKATE PARK	10/09/04	534	27	0
87	MICROSOFT XP	1/11/02	974	0	0
88	FUNDRAISING SOFTWARE	11/05/01	2,443	0	0
89	FUNDRAISING SOFTWARE	12/21/01	2,227	0	0
90	MICROSOFT RETAIL MGMT SOFTWARE	1/10/03	5,015	0	0
91	PC CHARGE SOFTWARE	1/10/03	1,425	0	0
92	QUICKBOOS PROFESSIONAL 2003	9/10/02	459	0	0
93	NSPIRE SOFTWARE	1/01/03	500	0	0
94	NON PROFIT BOOKS	6/02/05	1,311	0	0
95	MAC COMPUTER	11/09/05	1,222	245	0
96	DELL LAPTOP	6/20/06	855	171	0
97	SKATE PARK IMPROVEMENTS	8/31/05	1,154	230	0
98	BOX TRUCK	5/01/06	2,500	500	0
99	BOX TRUCK	6/01/06	2,500	500	0
100	BOX TRUCK	6/30/06	2,000	400	0
101	AIRCONDITIONING UNIT SKATEPARK	6/28/07	23,809	2,381	0
102	NEW COUNTERS	6/30/07	728	146	0
103	Delta Stage Lighting	4/01/08	1,668	333	333
104	Server HV3P	5/28/08	3,650	730	730
105	Imac Computer 20/2.4/	6/30/08	1,199	240	240
106	Indoor Security	8/08/07	2,100	300	300
107	Jands Hog500-Lighting Board	12/31/07	4,050	578	578
108	Delta Stage Lighting SN F07516	4/15/09	4,790	684	684
Total Other Depreciation			<u>4,325,480</u>	<u>121,477</u>	<u>2,865</u>
Total ACRS and Other Depreciation			<u>4,325,480</u>	<u>121,477</u>	<u>2,865</u>
Grand Totals			<u>4,325,480</u>	<u>121,477</u>	<u>2,865</u>

Federal Statements

Form 990, Part IX, Line 24f - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
OTHER SUPPLIES	\$ 33,617	\$ 31,720	\$ 1,663	\$ 234
TAXES AND LICENSES	22,804	19,088	3,416	300
FOOD AND ENTERTAINMENT	18,742	13,171	2,140	3,431
MARKETING AND ADVERTISING	10,674	6,173	98	4,403
BANK FEES	6,074		6,059	15
GIVEAWAYS/INCENTIVES	4,572	4,294	130	148
AUTOMOBILE	4,531	4,318	70	143
COMPUTER SOFTWARE/HARDWAR	4,394	160	4,234	
TUITION AND TRAINING	3,899	15	1,888	1,996
GIFTS	3,716	1,711	998	1,007
DUES & SUBSCRIPTIONS	3,578	1,533	1,383	662
MISCELLANEOUS	3,368	1,076	2,292	
CASH OVER (SHORT)	-383		-383	
BAD DEBT EXPENSE	-822			-822
TOTAL	\$ <u>118,764</u>	\$ <u>83,259</u>	\$ <u>23,988</u>	\$ <u>11,517</u>