

Return of Organization Exempt From Income Tax

2005

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2005 calendar year, or tax year beginning 1/1, 2005, and ending 12/31, 20 05

B Check if applicable:

- Address change
Name change
Initial return
Final return
Amended return
Application pending

ROCKFORD RESC 29 IB 200512 03 13 3 0000
ROCKFORD RESCUE MISSION MINISTRIES 3DG
PO BOX 1958
ROCKFORD IL 61110-0458

D Employer identification number

36:6132381

E Telephone number

(815)965-5332 x105

F Accounting method: Cash [checked] Accrual

S Other (specify)

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes [checked] No

H(b) If "Yes," enter number of affiliates

H(c) Are all affiliates included? Yes [ ] No [ ]

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes [ ] No [ ]

I Group Exemption Number

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

G Website: rockfordrescuemission.org

J Organization type (check only one) [checked] 501(c)(3) [ ] 4947(a)(1) or [ ] 527

K Check here [ ] if the organization's gross receipts are normally not more than \$25,000

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12

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

Table with columns for Revenue, Expenses, and Net Assets. Rows include: 1 Contributions, gifts, grants... 2 Program service revenue... 3 Membership dues... 4 Interest on savings... 5 Dividends... 6a Gross rents... 6b Less: rental expenses... 6c Net rental income... 7 Other investment income... 8a Gross amount from sales... 8b Less: cost or other basis... 8c Gain or (loss)... 8d Net gain or (loss)... 9 Special events... 9a Gross revenue... 9b Less: direct expenses... 9c Net income... 10a Gross sales of inventory... 10b Less: cost of goods sold... 10c Gross profit or (loss)... 11 Other revenue... 12 Total revenue... 13 Program services... 14 Management and general... 15 Fundraising... 16 Payments to affiliates... 17 Total expenses... 18 Excess or (deficit)... 19 Net assets at beginning... 20 Other changes... 21 Net assets at end of year.

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**Part II Statement of Functional Expenses** All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) . . . . . (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22			
23	Specific assistance to individuals (attach schedule) . . . . .	23	54,683	54,683	
24	Benefits paid to or for members (attach schedule) . . . . .	24			
25	Compensation of officers, directors, etc. . . . .	25	76,664	38,332	19,166
26	Other salaries and wages . . . . .	26	1,158,883	968,624	92,335
27	Pension plan contributions . . . . .	27	6,500		6,500
28	Other employee benefits . . . . .	28	168,141	136,505	8,496
29	Payroll taxes . . . . .	29	88,090	68,334	11,565
30	Professional fundraising fees . . . . .	30	121,486		121,486
31	Accounting fees . . . . .	31	30,126	11,514	17,576
32	Legal fees . . . . .	32			
33	Supplies . . . . .	33	15,588	9,430	5,291
34	Telephone . . . . .	34	17,826	13,247	2,333
35	Postage and shipping . . . . .	35	72,158	284	946
36	Occupancy . . . . .	36	89,867	82,887	3,695
37	Equipment rental and maintenance . . . . .	37			
38	Printing and publications . . . . .	38			
39	Travel . . . . .	39			
40	Conferences, conventions, and meetings . . . . .	40			
41	Interest . . . . .	41	14,666	12,906	1,173
42	Depreciation, depletion, etc. (attach schedule)	42	193,818	178,225	8,826
43	Other expenses not covered above (itemize):				
a	Statement 4	43a	427,198	363,563	20,768
b		43b			
c	Statement 5	43c	614,762	614,762	
d		43d			
e		43e			
f		43f			
g		43g			
44	<b>Total functional expenses.</b> Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	3,150,456	2,553,296	198,670

Statement 3

**Joint Costs.** Check  if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No

If "Yes," enter (i) the aggregate amount of these joint costs \$ 16,974; (ii) the amount allocated to Program services \$ 15,277; (iii) the amount allocated to Management and general \$ -0-; and (iv) the amount allocated to Fundraising \$ 1,697

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

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► <b>Homeless Shelter</b> All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	<b>Program Service Expenses</b> (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
<b>a Rescue Services: Food service (total meals 130,202), homeless shelter (total nights of lodging 42,897), medical clinic, Life Recovery program (1,719 individuals), Education center</b>  (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	<b>1,938,534</b>
<b>b Mission Mart Thrift Stores</b>  (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	<b>614,762</b>
<b>c</b>  (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>d</b>  (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>e Other program services (attach schedule)</b> (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services). . . . ►	<b>2,553,296</b>

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

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	45 Cash—non-interest-bearing . . . . .	741,502	45	453,073
	46 Savings and temporary cash investments . . . . .		46	
	47a Accounts receivable . . . . .	76,396		
	b Less: allowance for doubtful accounts . . . . .		47c	76,396
	47b	4,309		
	48a Pledges receivable . . . . .			
	b Less: allowance for doubtful accounts . . . . .		48c	
	48b			
	49 Grants receivable . . . . .		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule) . . . . .		50	
	51a Other notes and loans receivable (attach schedule) . . . . .			
	b Less: allowance for doubtful accounts . . . . .		51c	
	51b			
	52 Inventories for sale or use . . . . .	278,652	52	261,066
	53 Prepaid expenses and deferred charges . . . . .	81,141	53	83,739
54 Investments—securities (attach schedule) . . . . .		54		
▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV				
55a Investments—land, buildings, and equipment: basis . . . . .				
b Less: accumulated depreciation (attach schedule) . . . . .		55c		
55b				
56 Investments—other (attach schedule) . . . . .		56		
57a Land, buildings, and equipment: basis . . . . .				
b Less: accumulated depreciation (attach schedule) . . . . .		57c	4,745,190	
57b	4,754,956			
58 Other assets (describe ▶ gift cards, rent deposits . . . . .)	29,644	58	15,189	
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58. . . . .	5,890,204	59	5,634,653	
<b>Liabilities</b>	60 Accounts payable and accrued expenses . . . . .	90,259	60	169,390
	61 Grants payable . . . . .		61	
	62 Deferred revenue . . . . .	10,000	62	10,000
	63 Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .		63	
	64a Tax-exempt bond liabilities (attach schedule) . . . . .		64a	
	b Mortgages and other notes payable (attach schedule) . . . . .		64b	
	65 Other liabilities (describe ▶ Statement 6 . . . . .)	216,223	65	183,576
66 <b>Total liabilities.</b> Add lines 60 through 65 . . . . .	316,482	66	362,966	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted . . . . .	5,551,758	67	5,262,856
	68 Temporarily restricted . . . . .	21,964	68	8,831
	69 Permanently restricted . . . . .		69	
	<b>Organizations that do not follow SFAS 117, check here</b> ▶ <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds . . . . .		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund . . . . .		71	
	72 Retained earnings, endowment, accumulated income, or other funds . . . . .		72	
	73 <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21) . . . . .	5,573,722	73	5,271,687
	74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73. . . . .	5,890,204	74	5,634,653





**Part VI Other Information (continued)**

		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	✓	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	Statement 7		
	82b   101,470	✓	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?		
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	✓
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ -0- ; section 4912 ▶ -0- ; section 4955 ▶ -0-		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	✓
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		-0-
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		-0-
90a	List the states with which a copy of this return is filed ▶ Illinois		
b	Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)	90b	77
91a	The books are in care of ▶ Beverly Giloy Telephone no. ▶ ( 815 ) 965-5332 Located at ▶ 715 W. State St. Rockford, IL ZIP + 4 ▶ 61102		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b	✓
	If "Yes," enter the name of the foreign country ▶		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶	91c	✓
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92		

**Part VII Analysis of Income-Producing Activities (See the instructions.)**

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a Resale shops					505,141
b Recycle bulk clothing					45,761
c					
d					
e					
f Medicare/Medicaid payments . . . . .					
g Fees and contracts from government agencies					
94 Membership dues and assessments . . . . .					
95 Interest on savings and temporary cash investments					4,404
96 Dividends and interest from securities . . . . .					
97 Net rental income or (loss) from real estate:					
a debt-financed property . . . . .					
b not debt-financed property . . . . .			16	2,200	5,266
98 Net rental income or (loss) from personal property					
99 Other investment income . . . . .					
100 Gain or (loss) from sales of assets other than inventory					(13,602)
101 Net income or (loss) from special events . . . . .					(23,714)
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a soft drinks					6,568
b miscellaneous receipts					4,985
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				2,200	534,809
105 Total (add line 104, columns (B), (D), and (E))					537,009

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)**

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
	Statement 8

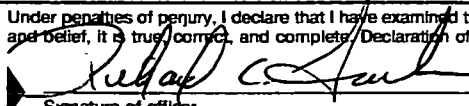
**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)**

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

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)**

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
  - (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No
- Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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

Please Sign Here:  Date: 4/20/06

Signature of officer: Richard C. Fols  
Type or print name and title.

Paid Preparer's Use Only: Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_ Check if self-employed:  Preparer's SSN or PTIN (See Gen. Inst. W): \_\_\_\_\_  
Firm's name (or yours if self-employed), address, and ZIP + 4: \_\_\_\_\_ EIN: \_\_\_\_\_ Phone no.: ( ) \_\_\_\_\_

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

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

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

OMB No. 1545-0047

**2005**

Department of the Treasury  
Internal Revenue Service

**Supplementary Information—(See separate instructions.)**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization <b>Rockford Rescue Mission Ministries, Inc.</b>	Employer identification number <b>36 : 6132381</b>
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**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
<b>Rev. Patrick Clinton</b> <b>2307 Jonquil Pl. Rockford, IL 61107</b>	<b>Sr. Director of Programs 45 hrs/wk</b>	<b>28,292</b>	<b>4,120</b>	<b>25,000 housing allowance</b>
Total number of other employees paid over \$50,000 . . . ▶		<b>-0-</b>		

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
<b>Grizzard</b> <b>110 N. Maryland Ave Glendale, CA 91206</b>	<b>Direct mail appeal &amp; acquisition</b>	<b>112,476</b>
Total number of others receiving over \$50,000 for professional services . . . ▶		<b>-0-</b>

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

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

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

	Yes	No
<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) . . . . .		✓
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
<b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
<b>a</b> Sale, exchange, or leasing of property? . . . . .		✓
<b>b</b> Lending of money or other extension of credit? . . . . .		✓
<b>c</b> Furnishing of goods, services, or facilities? . . . . .		✓
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? . . . . .		✓
<b>e</b> Transfer of any part of its income or assets? . . . . .		✓
<b>3a</b> Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) . . . . .		✓
<b>b</b> Do you have a section 403(b) annuity plan for your employees? . . . . .	✓	
<b>c</b> During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?		✓
<b>4a</b> Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		✓
<b>b</b> Do you provide credit counseling, debt management, credit repair, or debt negotiation services? . . . . .		✓

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box )

- 5**  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6**  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7**  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8**  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9**  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ \_\_\_\_\_
- 10**  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a**  An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b**  A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12**  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13**  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: ▶  Type 1  Type 2  Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14**  An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	2,673,101	2,627,427	2,576,216	2,456,465	10,333,209
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	664,158	823,531	794,855	670,503	2,953,047
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	5,958	182	1,808	12,813	20,761
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	65,139	15,978	19,697	24,951	125,765
23 Total of lines 15 through 22	3,408,356	3,467,118	3,392,576	3,164,732	13,432,782
24 Line 23 minus line 17	2,744,198	2,643,587	2,597,721	2,494,228	10,479,735
25 Enter 1% of line 23	34,084	34,671	33,926	31,647	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 209,595
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 130,655
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 10,479,735
d Add: Amounts from column (e) for lines: 18 20,761 19 -0-					
22 125,765 26b 130,655					26d 277,181
e Public support (line 26c minus line 26d total)					26e 10,202,554
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 97.355 %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year. N/A					
(2004) (2003) (2002) (2001)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:					
(2004) (2003) (2002) (2001)					
c Add: Amounts from column (e) for lines: 15 16 17 20 21					27c
d Add: Line 27a total and line 27b total					27d
e Public support (line 27c total minus line 27d total)					27e
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					27f
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

**Part V Private School Questionnaire** (See page 7 of the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? . . . . .		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? . . . . .		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? . . . . . If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ..... ..... .....		
32a	Does the organization maintain the following: a Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . .		
32b	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .		
32c	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .		
32d	d Copies of all material used by the organization or on its behalf to solicit contributions? . . . . .  If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.) ..... .....		
33	Does the organization discriminate by race in any way with respect to:		
33a	a Students' rights or privileges? . . . . .		
33b	b Admissions policies? . . . . .		
33c	c Employment of faculty or administrative staff? . . . . .		
33d	d Scholarships or other financial assistance? . . . . .		
33e	e Educational policies? . . . . .		
33f	f Use of facilities? . . . . .		
33g	g Athletic programs? . . . . .		
33h	h Other extracurricular activities? . . . . .  If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ..... .....		
34a	Does the organization receive any financial aid or assistance from a governmental agency? . . . . .		
34b	Has the organization's right to such aid ever been revoked or suspended? . . . . . If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation . . . . .		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.) N/A  
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a**  if the organization belongs to an affiliated group. Check **b**  if you checked "a" and "limited control" provisions apply.

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

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  
 See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45	Lobbying nontaxable amount . . . . .				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures . . . . .				
48	Grassroots nontaxable amount . . . . .				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures . . . . .				

**Part VI-B Lobbying Activity by Nonelecting Public Charities**  
 (For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers . . . . .			
b Paid staff or management (Include compensation in expenses reported on lines c through h.) . . . . .			
c Media advertisements . . . . .			
d Mailings to members, legislators, or the public . . . . .			
e Publications, or published or broadcast statements . . . . .			
f Grants to other organizations for lobbying purposes . . . . .			
g Direct contact with legislators, their staffs, government officials, or a legislative body. . . . .			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means . . . . .			
i Total lobbying expenditures (Add lines c through h.) . . . . .			

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



**ROCKFORD RESCUE MISSION MINISTRIES**  
**FORM 990**  
**2004**  
**36-6132381**

**Page 1, Part I: Revenue, Expenses & Changes in Net Assets or Fund Balances, Line 9 Special Events**

<u>Event</u>	<u>Receipts</u>	<u>Contributions</u>	<u>Revenue</u>	<u>Expenses</u>	<u>Net Income</u>
Telethon	116,208	115,426	782	31,175	(30,393)
Walkathon	14,930	0	14,930	7,063	7,867
Luncheon	11,261	3,737	7,524	8,001	(477)
Women's Gathering	28,550	14,044	14,506	15,217	(711)
Birdies for Charity	19,116	19,116	0	0	0
	<u>190,065</u>	<u>152,323</u>	<u>37,742</u>	<u>61,456</u>	<u>(23,714)</u>
Included in line 1a		152,323			
Total for line 9a			37,742		
Total for line 9b				61,456	
Net Income for line 9c					(23,714)

ROCKFORD RESCUE MISSION MINISTRIES  
FORM 990  
2004  
36-6132381

Page 2, Part II, Statement of Functional Expenses Line 42, Depreciation

	<u>Total</u>	<u>Program</u>	<u>General</u>	<u>Fund Raising</u>
Building & property improvements	134,699	125,191	5,415	4,093
Vehicles	10,908	10,908		
Tools and equipment	2,189	2,189		
Office & kitchen equipment	46,022	39,937	3,411	2,673
Musical equipment	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	<u>193,818</u>	<u>178,225</u>	<u>8,826</u>	<u>6,767</u>

ROCKFORD RESCUE MISSION MINISTRIES  
FORM 990  
2005  
36-6132381

Page 3, Part III, Statement of Program Accomplishments:

- a Rescue Services Aid assistance and care of homeless men, women and children through provision of temporary lodging, meals, clothing, counseling, etc. during 2005, 42,897 nights of temporary lodging, 130,202 meals and 22,174 items of food, clothing, and household items were provided to individuals and families
- b Mission Mart Resale Stores. Provides outlet for sale of used, donated clothing and merchandise

ROCKFORD RESCUE MISSION MINISTRIES  
 FORM 990  
 2005  
 36-6132381

Page 5, Part V, List of Officers, Directors and Trustees:

(A)	(B)	(C)	(D)	(E)
<u>Name &amp; Address</u>	<u>Title and Avg Hrs per Wk</u>	<u>Compensation</u>	<u>Contributions to Employee Benefit Plans</u>	<u>Expense Act and Other Allowance</u>
Stanley Valulis 2869 Hanford Dr Rockford, IL 61114	Board Director, President	-0-	-0-	-0-
Debbie Holcomb 4312 Eaton Drive Rockford, IL 61114	Board Director,	-0-	-0-	-0-
James Kitzmiller 6332 Simpson Rd Rockford, IL 61102	Board Director,	-0-	-0-	-0-
David Koch 3415 Landstrom Rd Rockford, IL 61107	Board Director,	-0-	-0-	-0-
Glenn Miller 7120 Windsor Lake Parkway Loves Park, IL 61111	Board Director	-0-	-0-	-0-
David Bates 817 Midlothian Way Rockford, IL 61107	Board Director,	-0-	-0-	-0-
Michael Kalodimos 724 N Highland Rockford, IL 61107	Board Director, Treasurer	-0-	-0-	-0-
Richard Farb 1788 Sweetbriar Lane Rockford, IL 61107	Board Director, Vice Chariman	-0-	-0-	-0-
Carol Klint 422 Wood Rd Rockford, IL 61107	Board Director,	-0-	-0-	-0-
Charles Inskeep, MD 16 Johns Woods Dr Rockford, IL 61103	Board Director,	-0-	-0-	-0-

ROCKFORD RESCUE MISSION MINISTRIES  
 FORM 990  
 2005  
 36-6132381

Page 5, Part V, List of Officers, Directors and Trustees

(A)	(B)	(C)	(D)	(E)
<u>Name &amp; Address</u>	<u>Title and Avg Hrs. per Wk</u>	<u>Compensation</u>	<u>Contributions to Employee Benefit Plans</u>	<u>Expense Act. and Other Allowance</u>
Larry Johnson 3360 Twin Ridge Lane Rockford, IL 61109	Board Director,	-0-	-0-	-0-
Ardine Rice P.O Box 1062 Rockford, IL 61105	Board Director,	-0-	-0-	-0-
Bryan Selander P O Box 1835 Rockford, IL 61110	Board Director,	-0-	-0-	-0-
Cheryl Pitney 7020 Thomas Rockford, IL 61114	Executive Director	\$76,664	* -0-	-0-
		<u>\$76,664</u>		

\* Salary

ROCKFORD RESCUE MISSION MINISTRIES  
 FORM 990  
 2005  
 36-6132381

Page 6, Part V, List of Former Officers, Directors and Trustees That Received Compensation

(A)	(B)	(C)	(D)	(E)
<u>Name &amp; Address</u>	<u>Title and Avg Hrs. per Wk</u>	<u>Compensation</u>	<u>Contributions to Employee Benefit Plans</u>	<u>Expense Act and Other Allowance</u>
Gerald Pitney 2006 Fremont St. Rockford, IL 61103	Director Emeritus	\$6,550	-0-	-0-
		<u>\$6,550</u>		
x Retirement				

ROCKFORD RESCUE MISSION MINISTRIES  
FORM 990  
2005  
36-6132381

Page 4, Part IV, Balance Sheets, Line 57, Land, Buildings and Equipment:

	2005			
	<u>Basis</u>	<u>Accumulated Depreciation</u>	<u>Net Book Value</u>	<u>Depreciation Expense</u>
Land	459,103		459,103	
Buildings & improvements	5,080,635	987,597	4,093,038	140,421
Land Improvement	16,049	5,625	10,423	1,610
Vehicles	80,383	49,230	31,153	10,908
Musical Instruments & sound equipment	13,675	12,742	934	
Furnishing, Program	255,086	194,781	60,305	21,379
Office Equipment	151,287	119,655	31,632	17,821
Kitchen Equipment	101,060	46,532	54,528	6,821
Tools & equipment	31,845	30,711	1,134	2,189
Fixtures & equipment in resale store	<u>34,220</u>	<u>31,281</u>	<u>2,939</u>	<u>2,996</u>
	<u>6,223,342</u>	<u>1,478,153</u>	<u>4,745,190</u>	<u>204,146</u>

	2004			
	<u>Basis</u>	<u>Accumulated Depreciation</u>	<u>Net Book Value</u>	<u>Depreciation Expense</u>
Land	279,516		279,516	
Buildings & improvements	5,079,785	847,177	4,232,609	141,383
Land Improvement	16,049	4,016	12,033	1,217
Vehicles	64,438	46,022	18,416	11,218
Musical Instruments & sound equipment	13,675	12,742	933	216
Furnishing, Program	261,732	179,887	81,846	30,476
Office Equipment	209,350	159,896	49,454	17,766
Kitchen Equipment	111,167	53,578	57,589	6,620
Tools & equipment	31,845	28,521	3,323	2,766
Fixtures & equipment in resale store	<u>64,872</u>	<u>45,635</u>	<u>19,237</u>	<u>5,412</u>
	<u>6,132,429</u>	<u>1,377,473</u>	<u>4,754,956</u>	<u>217,074</u>

ROCKFORD RESCUE MISSION MINISTRIES

36-6132381

FORM 990 - 2005

RENTAL INCOME

STATEMENT 1

KIND AND LOCATION OF PROPERTY

GROSS  
RENTAL INCOME

FACILITIES

7,466

TOTAL TO FORM 990, PART I, LINE 6A

7,466

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 FORM 990 - 2005      GAIN (LOSS) FROM SALE OF OTHER ASSETS      STATEMENT 2
 

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<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>
1994 GMC Truck C7H042	May 2001	March 2005	Donated
Various Store Fixtures	Oct 1996 thru Nov 2000	March 2005 - written off	Purchased
Various Store Fixtures & Remodeling	Oct 2004	Oct 2005 - store closed	Purchased
Various Kitchen Equipment	Jan 1980 thru June 1995	March 2005 - written off	Purchased
Various Program Furnishings	Sept 1994 thru April 1996	March 2005 - written off	Purchased
Various Office Equipment	Jan 1980 thru July 1998	March 2005 - written off	Purchased
Various Computer Equipment	Sept 1994 thru March 2000	March 2005 - written off	Purchased

ROCKFORD RESCUE MISSION MINISTRIES

36-6132381

FORM 990 - 2005

SPECIFIC ASSISTANCE TO INDIVIDUALS

STATEMENT 3

DESCRIPTION

AMOUNT

SUNDRY ASSISTANCE TO HOMELESS, INCLUDING MEDICAL CARE,  
EDUCATION, AND RECREATION

54,683

TOTAL TO FM 990, PART II, LINE 23

54,683

ROCKFORD RESCUE MISSION MINISTRIES

<u>FORM 990 - 2005</u>	<u>OTHER EXPENSES</u>			<u>STATEMENT 4</u>
<u>DESCRIPTION</u>	(A) <u>TOTAL</u>	(B) <u>PROGRAM SERVICES</u>	(C.) <u>MANAGEMENT AND GENERAL</u>	(D) <u>FUNDRAISING</u>
BUILDING MAINT	56,560	51,532	2,690	2,338
DONATED FOOD, CLOTHES HOUSEWARES	213,108	213,108		
EDUCATION/AWARENESS	11,013	6,626	1,876	2,511
INSURANCE	55,558	47,643	4,912	3,003
MISCELLANEOUS	7,104	4,564	2,501	39
OFFICE SUPPLIES & SERVICE	14,031	6,845	4,671	2,515
OTHER EMPLOYEE EXP	3,960		3,960	
PROMOTION, PUBLICATIONS R/E TAXES	52,598	21,690		30,908
VEHICLE OPERATIONS	8,241	6,530	158	1,553
VOLUNTEER OPERATIONS	<u>1,914</u>	<u>1,914</u>		
TOTAL TO FM 990, LN 43	<u>427,198</u>	<u>363,563</u>	<u>20,768</u>	<u>42,867</u>

ROCKFORD RESCUE MISSION MINISTRIES

FORM 990 - 2005 MISSION MART THRIFT STORES STATEMENT 5

<u>DESCRIPTION</u>	<u>(A)</u> <u>TOTAL</u>	<u>(B)</u> <u>PROGRAM</u> <u>SERVICES</u>	<u>(C)</u> <u>MANAGEMENT</u> <u>AND GENERAL</u>	<u>(D)</u> <u>FUNDRAISING</u>
ACCOUNTING, AUDITING & LEGAL	1063	1063		
ADVERTISING	1609	1,609		
BUILDING MAINTENANCE & SUPPLIES	9967	9,967		
BUILDING INSURANCE	1379	1,379		
BUILDING RENTAL	114000	114,000		
DEPRECIATION	10328	10,328		
EDUCATION	875	875		
EQUIPMENT REPAIRS	2751	2,751		
HEALTH, DISABILITY, & FLEX INS.	40288	40,288		
LIABILITY & OTHER INSURANCE	2566	2,566		
MISCELLANEOUS	37	37		
OFFICE SUPPLIES & SERVICES	1234	1,234		
PAYROLL TAXES	21489	21,489		
POSTAGE	230	230		
PURCHASED ITEMS FOR RESALE	20738	20,738		
SALARIES & WAGES	302754	302,754		
SMALL EQUIPMENT PURCHASES	1931	1,931		
RETAIL SUPPLIES	2306	2,306		
OTHER SUPPLIES	6421	6,421		
TELEPHONE	2936	2,936		
UTILITIES	52551	52,551		
VEHICLE INSURANCE	4967	4,967		
VEHICLE OPERATION	4890	4,890		
WORKER'S COMPENSATION INS.	<u>7452</u>	<u>7,452</u>		
TOTAL TO FM 990, LN 43	<u>614,762</u>	<u>614,762</u>	<u>0</u>	<u>0</u>

ROCKFORD RESCUE MISSION MINISTRIES

Form 990 - 2005

BALANCE SHEET  
OTHER LIABILITIES

STATEMENT 6

<u>DESCRIPTION</u>	<u>BEGINNING OF YEAR</u>	<u>END OF YEAR</u>
FUNDS HELD FOR RESIDENTS	5,245	1,672
ACCRUED LONG-TERM COMPENSATION	<u>210,978</u>	<u>181,904</u>
TOTAL TO FORM 990, PART IV, LINE 65	<u>216,223</u>	<u>183,576</u>

LINE

82b. LINE 1 AND LINE 43 INCLUDE DONATED PROFESSIONAL SERVICES AS FOLLOWS:

UNRESTRICTED SUPPORT	
PROGRAM ACTIVITIES	28,249
ADMINISTRATIVE ACTIVITIES	1,031
FUNDRAISING ACTIVITIES	<u>72,190</u>
TOTAL	<u><u>101,470</u></u>

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FORM 990-2004      PART VIII - RELATIONSHIP OF ACTIVITIES TO      STATEMENT 8  
ACCOMPLISHMENT OF EXEMPT PURPOSES

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<u>LINE</u>	<u>EXPLANATION OF RELATIONSHIP OF ACTIVITIES</u>
93A	SALE OF DONATED HOUSEHOLD ITEMS AT RESALE SHOP
93B	DONATED PERSONAL/HOUSEHOLD ITEMS SOLD AS RECYCLE OR BULK MATERIALS.
103A	REFRESHMENTS TO PROGRAM PARTICIPANTS, WORKERS AND STAFF
103B	REVENUE FROM SALE OF SCRAP MATERIALS, GARNISHMENT FEES, PAY PHONE COMMISSION USED TO COVER GENERAL COSTS OF MINISTRY TO HOMELESS AND HURTING PEOPLE

FORM 990 - 2005OTHER INCOMESTATEMENT 9

<u>DESCRIPTION</u>	<u>2004 AMOUNT</u>	<u>2003 AMOUNT</u>	<u>2002 AMOUNT</u>	<u>2001 AMOUNT</u>
RENT	10,125	6,713	12,214	16,179
SOFT DRINKS	7,204	7,102	6,372	7,012
DONATED VEHICLE SALES	2,230			
PRODUCT SALES	4,322			
RELOCATION COST REIMBURSEMENT	40,000			
MISC SCRAP MAT	416	675	500	880
MISC REC & REFUNDS	<u>842</u>	<u>1,488</u>	<u>611</u>	<u>880</u>
TOTAL TO SCHEDULE A, LINE 22	<u>65,139</u>	<u>15,978</u>	<u>19,697</u>	<u>24,951</u>