Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or

OMB No. 1545-0047

Department of the Treesury Internal Revenue Service

private foundation), section 527, or section 4947(a)(1) nonexempt charitable trust

Inspection

A For the 2000 calendar year, or tax year parted beginning 7 / 1 / 2000, and ending 5 / 30 / 200 B chapter year than 6 cognition number 2 / 2000 calendary 10 / 30 / 30 / 30 / 30 / 30 / 30 / 30 /		ternal Rev	enue Service		▶ The organization may have	to use a copy of this re	turn to sati	isfy state reporting a	requirement	s.	Inspection
B Centify applicability Secretary Change of name C	•	Fort	he 2000 cale	andar y							. 20 () 1
Change of address Cha	8	Check	if applicable:		C Name of organization						
Company of name mails are multiple Section 501 (c) 2501 N. S. SOL die Y. Tra i 1 Section 501 (c) (3) organization type (diest only only ∑ Section 501 (c) (3) organization send 447 (s) (1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 900-E2). More report of the companization one and 447 (s) (1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 900-E2). More report of the companization one and 447 (s) (1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 900-E2). More report of the companization one of the set of the set of the companiz	Γ	_			Elderhaven, In-	c.			86-09	935278	3
Initial return	Ē	_		print or	Number and street (or P.O. box	if mail is not delivered to	street addre	Room/suite			
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C Organization type (chect only one) ► South 1998 (check the state of affiliates) ► South 1998 (check the state one) ► South 1998	Ē	Final									_
Goganization type (lexic onlyce) ► (solicit) → (finite and the second process) → (file) a finite and the second process of the sec	Ī	Amer			Tucson, AZ 857	49			r Crieck	► □ u sbt	plication penging
e Section 501(c)(3) organizations and 4847(e)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-Ez). J Accounting method: □ Cash □								Note: H and	I are not ap	plicable to	section 527 orgs.
a completed Schedule A (Form 990 or 900-E2). J. Accounting method: Cash S. Account D. Other (specify) by the completion of the completion	G	Orga	nization typ	e (check	only one) ▶ 💢 501(c) (3) ◀	(insert no.) 527 or	4947(a				
a completed Schedule A (Form 990 or 900-EZ). Accounting method:		• Se	ction 501(c)(3) orgai	nizations and 4947(a)(1) nonex	empt charitable trusts	must attac	611 I			
K Chock here		8 CO	mpleted Sch	edule /	(Form 990 or 900-EZ).			H(C) Are all a			Yes N
R Check here ▶ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a neturn with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return. Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 11	J	Acco	unting metho	xd: 🔲 (Cash 🔀 Accrual 🗌 Oth	er (specify) ▶)
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Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 14 contributions, gifts, grants, and similar amounts received: a Direct public support		organ	nization need	not file	a return with the IRS; but if th	e organization received	a Form 99	90 I Enter 4-d			
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16 1 Contributions, gifts, grants, and similar amounts received: a Direct public support b indirect public support c Government contributions (grants) d Total (add lines 1a through 1c) (cash \$ 9,733 noncash \$) 2 Program service revenue including government fees and contracts (from Part VIII, line 93) 2 Program service revenue including government fees and contracts (from Part VIII, line 93) 3 Membership dues and assessments 4 Interest on savings and temporary cash investments 5 Dividends and interest from securities 6 Gross rents 6 Beb 6 Less: rental expenses c Net rental income or (loss) (subtract line 6b from line 6a) 6 C 7 Other investment income (describe >) 7 8 Be Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses. c Gain or (loss) (attach schedule) d Net gain or (loss) (combine line 8c, columns (A) and (B)) 9 Special events and activities (attach schedule) a Gross revenue (not including \$ of contributions reported on line 1a) 10 Less! direct expenses other than fundraising expenses 9 De Less! direct expenses other than fundraising expenses 9 De Less! direct expenses other than fundraising expenses 9 De Less! direct expenses other than fundraising expenses of 10a		Pack	age in the mail	l, it shou	ld file a return without financial da	ata. Some states require	a comple				
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1 Contributions, gifts, grants, and similar amounts received: a Direct public support	U	Part I	Revenu	e, Exp	enses, and Changes	n Net Assets or F	und Ba	lances (See Sp	ecific ins	tructions	on page 16.)
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b indirect public support. c Government contributions (grants) d Total (add lines 1a through fc) (cash \$ 9,733 noncash \$) 1d 9,73 2 Program service revenue including government fees and contracts (from Part VII, line 93) 3 Membership dues and assessments 4 Interest on savings and temporary cash investments 5 Dividends and interest from securities 6 Gross rents 6 Less: rental expenses 6 C Net rental income or (loss) (subtract line 6b from line 6a) 7 Other investment income (describe ► 8a Gross amount from sales of assets other than inventory. b Less: cost or other basis and sales expenses. c Gain or (loss) (attach schedule) d Net gain or (loss) (combine line 8c, columns (A) and (B)) 9 Special events and activities (attach schedule) a Gross revenue (not including \$ of contributions reported on line 1a) 100 Gross gales of inventory, less returns and allowances 101 Describes of goods sold 102 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 13 Program services (from line 44, column (B)) 15 Fundraising (from line 44, column (C)) 16 Program service (revenue (Tot find line 44, column (C)) 17 Stantage (add lines 16 and 44, column (C)) 18 Excess or (deficit) for the year (subtract line 11) 19 Program service (revenue (From line 44, column (C)) 19 Cother changes in net assets or fund balances at beginning of year (from line 12), 19 Cother changes in net assets or fund balances (attach explanation) 20 Other changes in net assets or fund balances (attach explanation) 20 Other changes in net assets or fund balances (attach explanation) 20 Other changes in net assets or fund balances (attach explanation) 20 Other changes in net assets or fund balances (attach explanation) 20 Other changes in net assets or fund balances (attach explanation) 20 Other changes in net assets or fund balances (attach explanation) 20 Other changes in net assets or fund balances (attach explanation)		a					l 1al	9.73	33		
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9 Special events and activities (attach schedule) a Gross revenue (not including \$		c	Gain or (le	oss) (a	ittach schedule)		8c		\$``÷		
a Gross revenue (not including \$		d	Net gain o	or (loss	s) (combine line 8c, columi	ns (A) and (B))			- 8a		
RF Constributions reported on line 1a) Contributions reported on line 1a) NO Less Idirect expenses other than fundraising expenses NO NO Less Idirect expenses other than fundraising expenses NO NO NO Less Idirect expenses other than fundraising expenses NO N		1 -							7.5		
C Net income or (loss) from special events (subtract line 9b from line 9a) 9c NO 10a Gross sales of inventory, less returns and allowances 10a 10b 10c C Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) 10c 11. Other revenue (from Part VII, line 103) 11 12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 12 313, 137 13 Program services (from line 44, column (B)) 13 291, 618 14 Management and general (from line 44, column (C)) 15 1, 176 16 Payments to affiliates (attach schedule) 16 17 Total expenses (add lines 16 and 44, column (A)) 17 314, 359 18 Excess or (deficit) for the year (subtract line 17 from line 12) 18 (1, 222) 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 19 23, 316 20 Other changes in net assets or fund balances (attach explanation) 20 15		a									
No log log log log log log log log log lo		d 0.5	contribution	ons rep	ported on line 1a)	• • • • • • • • • • • • • • • • • • • •	9a				
No log log log log log log log log log lo		. p.	Less: dire	ct expe	enses other than fundraisir	ng expenses	9b				
C Gross profit'or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		C	Net Incom	ne or (I	oss) from special events (s	subtract line 9h from	line 9a\	• • • • • • • • • • • • • • • • • • • •	9c		
C Gross profit'or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	N	و10 إرا	Gross sale	es of ir	iventory, less returns and	allowances	10a				
C Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		ם ו	Less: cosi	t ot go	ods sold,,	• • • • • • • • • • • • • • • •	106	<u>.</u>			
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 12 313, 137 313, 137 313, 137 313, 137 314, 356 315	_	C	Gross profit	'or (los:	s) from sales of inventory (attact	h schedule) (subtract lir	ne 10b from	m line 10a)	. 10c		_
Program services (from line 44, column (B)) Management and general (from line 44, column (C)) Fundraising (from line 44, column (D)) Payments to affiliates (attach schedule) Total expenses (add lines 16 and 44, column (A)) Excess or (deficit) for the year (subtract line 17 from line 12) Net assets or fund balances at beginning of year (from line 73, column (A)) Other changes in net assets or fund balances (attach explanation) 13	(,		Other reve	enuė (f	rom Part VII, line 103)				11		
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Total expenses (add lines 16 and 44, column (A)) 17 314, 359 18 Excess or (deficit) for the year (subtract line 17 from line 12). 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 20 Other changes in net assets or fund balances (attach explanation) 20 15,	er		Program s	service	s (from line 44, column (B))			. 13	2	291,618.00
Total expenses (add lines 16 and 44, column (A)) 17 314, 359 18 Excess or (deficit) for the year (subtract line 17 from line 12). 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 20 Other changes in net assets or fund balances (attach explanation) 20 15,	3	14	Managem	ent an	d general (from line 44, co	lumn (C))			. 14		21,565.00
Total expenses (add lines 16 and 44, column (A)) 17 314, 359 18 Excess or (deficit) for the year (subtract line 17 from line 12). 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 20 Other changes in net assets or fund balances (attach explanation) 20 15,	9	15	Fundraisir	ng (froi	m line 44, column (D))				. 15		1,176.00
18 Excess or (deficit) for the year (subtract line 17 from line 12)	Ä	1	Payments	to affi	liates (attach schedule)	• • • • • • • • • • • • • • • • •			. 16		
18 Excess or (deficit) for the year (subtract line 17 from line 12)	_		Total exp	enses	(add lines 16 and 44, colu	mn (A))		· · · · · · · · · · · · · · · · · · ·	. 17	3	314,359.00
Net assets or fund balances at beginning of year (from line 73, column (A)) Other changes in net assets or fund balances (attach explanation) Net assets or fund balances at end of year (combine lines 18, 19, and 20) 19 23,316 20 15, Net assets or fund balances at end of year (combine lines 18, 19, and 20) 21 37,846	Ä	18	Excess or	(defici	t) for the year (subtract lin	e 17 from line 12)			. 18		(1,222.00)
20 Other changes in net assets or fund balances (attach explanation)	99	19	Net assets	s or fur	id balances at beginning o	f year (from line 73,	column	(A))	. 19		23,316.00
Z 21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	ë	20	Other char	nges ir	n net assets or fund baland	es (attach explanati	on)		. 20		15,752
		21	Net assets	or fur	d balances at end of year	(combine lines 18,	19, and 2	20)	21		37,846.00

For Paperwork Reduction Act Notice, see page 1 of the separate instructions.

Form **990** (2000)

	990 (2000)			·			Page
Par	t Ii Statement of Functional Expenses	All organizations must	comple	te column (A). Columns (B)	, (C), and (D) are required	for section 501(c)(3) and (4) organizations and sect
	Do not include amounts reporte			ble trusts but optional for o		 	
	6b, 8b, 9b, 10b, or 16 of Pa			(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach sch					Elle Virlandi, Kiye	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(cash \$ 160 noncash \$)	22	160	160		
23	Specific assistance to individuals (attach schedule)	23				
24	Benefits paid to or for members (a	ttach schedule)	24				
25	Compensation of officers, directors	s, etc	25	49,400	41,990	7,410	
	Other salaries and wages		26	67,099	67,099		
27	Pension plan contributions	· · · · · · · · · · · · · · ·	27			L	
28	Other employee benefits		28	6,979	6,979		
29	Payroll taxes		29	12,345	12,345		
30	Professional fundraising fees	· · · · · · · · · · ·	30	1,176			1,176
	Accounting fees		31	4,802		4,802	
	Legal fees		32				
	Supplies		33	1,071	<u> </u>		
34	Telephone	· · · · · · · · · · · · · · · · · · ·	34	2,548	2,548		
35 26	Postage and shipping		35	900	900		
36 37	Occupancy		36	35,777	35,777		
38	Equipment rental and maintenance	· · · · · · · · · · · · · · · ·	37	72,957	72,957		
	Printing and publications		38	8,457	8,457		<u> </u>
40	Travel	otingo	39	432	432		<u> </u>
41	Interest	eurigs	<u>40</u> 41	5 550		<u> </u>	
42	Depreciation, depletion, etc. (attach	schodulo)	42	5,550	5,550		
43	Other expenses (itemize): a Stat	ement 4	43a	815	25 252	815	-
ь		<u> </u>	43b	43,891	35,353	8,538	
c			43c				
d			43d				
е			43e	-	·		
44 1	Total functional expenses (add lines 22 through 43						
(completing columns (B) - (D), carry these totals	to lines 13 - 15	44	314,359.00	291,618.00	21,565.00	1,176.00
Repo	rting of Joint Costs. Did you repo	rt in column (B) (I	Prog	am services) any	joint costs from a	combined	
eauce	itional campaign and fundraising so	olicitation?					∐Yes ⊠ No
TTOS,	enter (I) the aggregate amount of these	joint costs \$; (II) the amor	unt allocated to Progr	ram services \$;
	amount allocated to Management and ge			; and (iv) the amou	int allocated to Fundr	aising \$	
	III Statement of Program Se		<u>sh</u> m	ients (See Specif	ic Instructions on	page 23.)	
what	is the organization's primary exemp	ot purpose? ▶					Program Service Expenses
ui orga iublica	anizations must describe their exempt pur tions issued, etc. Discuss achievements th	pose achievements i	in a ci	ear and concise man	ner. State the numbe	r of clients served,	(Required for 501(c)(3) and
hanta	ole trusts must also enter the amount of g	rants and allocations	to atl	(4). ners)	organizations and 494	1/(a)(1) nonexempt	(4) orgs., and 4947(a)(1)
	he entity provides				seietad li	wing	trusts, but optional for others.
S	ervices in an envir	onment tha	t r	ecognizes	the whole	health -	
ء ح	f the individual: s	oirtual an	<u>d</u> _r	hysical.		Pastar	
		(Gra	nts a	nd allocations \$		160)	291,618
ь _							
-							
		-	- -				

(Grants and allocations \$ (Grants and allocations \$ (Grants and allocations \$ Other program services (attach schedule) (Grants and allocations \$ 291,618.00

Part IV	Balance Sheets	(See Specific	Instructions on pag	e 23.)
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Note:		Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.	(A)		(B)
	45		Beginning of year	 	End of year
	46	Cash — non-interest-bearing	6,034	45	8,519
	**	Savings and temporary cash investments	4,075	46	5,733
	47a	Accounts receivable			
		Less: allowance for doubtful accounts 47b		47c	
	l	「大き Age - 17 (1945 年 3 mm)	·	5.8	<u> </u>
		Pledges receivable		1.5	
	Ь	Less: allowance for doubtful accounts 48b		48c	
	49	Grants receivable		49	
	50	Receivables from officers, directors, trustees, and key employees	·		
		(attach schedule)		50	
	рта	Other notes and loans receivable (attach schedule)		***	
Assets	ь	Less: allowance for doubtful accounts 51b		1	
	52	Inventories for sale or use		51c	
	53		 -	52	
	54	Prepaid expenses and deferred charges		53	
		Investments — land, buildings, and		54	
		equipment: basis		ety.	
	ь	Less: accumulated depreciation (attach		٠	
		schedule)		55c	3,923.00
	56	Investments — other (attach schedule)		56	
	57a	Land, buildings, and equipment; basis 57a			
	þ	Less: accumulated depreciation (attach		~	•
	58	schedule)	00 700	57c	04 150
	30	Other assets (describe > See Statement 5	89,729	58	84,153
	59	Total assets (add lines 45 through 58) (must equal line 74)	99,838.00	59	102,328.00
	60	Accounts payable and accrued expenses	1,522	60	1,932
	61	Grants payable		61	
	62	Deferred revenue		62	
es	63	Loans from officers, directors, trustees, and key employees (attach		<u>.</u>	
Liabilities		schedule)		63	
ë	64a	Tax-exempt bond liabilities (attach schedule)		64a	
٦	b	Mortgages and other notes payable (attach schedule)	75,000	64b	62,550
	65	Other liabilities (describe >)		65	
	66	Total Ilabilities (add lines 60 through 65)	76 500 00	.	64 400 00
ᅥ	Orga	inizations that follow SFAS 117, check here > X and complete lines	76,522.00	66	64,482.00
	5-	67 through 69 and lines 73 and 74.		*	
8	67	Unrestricted	23,316	67	37,846
ᆵ		Temporarily restricted		68	
짧		Permanently restricted		69	
Net Assets or Fund Balances	Orga	nizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74.		Supr Supr	
[]		Capital stock, trust principal, or current funds		70	
<u>s</u>		Paid-in or capital surplus, or land, building, and equipment fund		70 71	
Se		Retained earnings, endowment, accumulated income, or other funds		72	
۲		Total net assets or fund balances (add lines 67 through 69 OR lines		* 37	
<u>ĕ</u>		70 through 72; column (A) must equal line 19 and column (B) must		74	
_	1	equal line 21)		73	37,846.00
ᆚ	74	Total liabilities and net assets/fund balances (add lines 66 and 73).	99,838.00	74	102,328.00

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.

Par	Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 25.)				Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return						
а	Total revenue, gains, and other siper audited financial statements.	upport	- 3.0	N/A	а		penses and lo			Ý,	NI/I
b	Amounts included on line a but no line 12, Form 990:				ь	Amount	s included on Form 990:			a	N/F
(1)	Net unrealized gains on investments \$	2			(1)	Donated	d services of facilities	\$			
(2)	Donated services and use of facilities \$				(2)	reported o	adjustments on line 20,				
(3)	Recoveries of prior year grants\$	·* . 3	1	y sy Siri. 2010-y y 1	(2)		reported on	<u>\$</u>			
(4)	Other (specify):				(3)		Form 990	\$			
` '		\$ 14 			(4)	Other (s	specify):			-13 A - 1	
	Add amounts on lines (1) through	(4) b						s		1	
			\dagger			Add am	ounts on lines	(1) t	hrough (4) b	b	i i i i i i i i i i i i i i i i i i i
c d	Line a minus line b	· · · ▶ <u>c</u>	+	0.00	С		ninus line b			C	0.00
•	Form 990 but not on line a:				d		s included on 90 but not on I				
	Investment expenses				(1)	Investmer	t expenses		•		
	not included on line 6b, Form 990 \$			in we'r a'r a'r diwyddiaiddiai y cyfraeth y diwyddiaiddiai y cyfraeth y cyfraeth y cyfraeth y cyfraeth y cyfrae Cyfraeth y cyfraeth y		not includ	ed on line 990	\$			
(2)	Other (specify):	-			(2)	Other (s		<u>×</u>			
		. :		in the Name						v.	
	Add amounts on lines (1) and (2)	<u></u> d	1	1 5 m Pr 1 m		A d d a		\$ (4) =	(0)		
8	Total revenue per line 12, Form 99	90	1		e		penses per lin		nd (2) ▶ Form 990	-	
. Daniel	(line c plus line d)	▶ e		0.00		(line c p	lus line d)			e	0.00
Par	t V List of Officers, Directo Instructions on page 25.)	rs, Irust	00 S,	and Key E	:mpl	oyees (List each one	ечел	if not compe	nsa	ted; see Specifi
	(A) Name and address			(B) Title and a week devol			(C) Compenseti (If not paid, enter -0)	on	(D) Contributions to employee benefit plans deferred compensation		(E) Expense eccount and other allowances
	ene L. Zerby 1 N. Soldier Trail, T	ucson,	ĀZ	Preside	nt	0		0		0	0
<u>Flo</u>	rence Zerby 1 N. Soldier Trail, To			Vice P		0		0		٥	0
Wil 120	liam R. Deyo 2 E. Knox Drive, Tucso			Sec/Tr	eas	40	29,90	00		0	0
Jean 120	nnie M. Deyo 2 E. Knox Drive, Tucso	on, AZ		Asst S	ec	40	19,50	T		0	0
	an Blommer O N. Dodge Blvd, Tucso	on, AZ		Board 1	Mem	b 0		0		0	0
<u>Dor</u>	is LeQuieu Via Laterna, Tucson,			Board 1			-	0		0	0
<u> Ell</u> :	ie Miller O W. Dove Way, Tucson,			Board 1				0		0	0
Ern:	ie Risek		<u>-</u>					0		0	0
Johi 1111	10 E. Dry Glutch Place, n G. Sheley Sr. 61 E. Edison, Tucson,	7.7						一		T	
	Edison, Iucson,			Board 1	-1e111	b 0		4		1	0
i	Did any officer, director, trustee, or key em related organizations, of which more than s If "Yes," attach schedule — see Sp	10,000 was	provide	ed by the relate	d orga	of more tha nizations?	n \$100,000 from	your o	rganization and a	<u> </u>] Yes ⊠ No

To Did the organization enage in any activity not previously reported to the IRS7 1 ms. a faceliated description of such activity 75 X X X X X X X X X	·Pa	rt VI Other Information (See Specific Instructions on page 26.)		N/A	Yes	No			
77 Were any changes made in the organizing or governing documents but not reported to the IRS7 78 Dit the capacitation have arrelated outsides grass income of \$1.00 or more during the year cereated by this return? 78 Dit the capacitation have arrelated business grass income of \$1.00 or more during the year cereated by this return? 78 Dit the capacitation related business grass income of \$1.00 or more during the year cereated by this return? 79 Was there a liquidation, disorbidine, formitiation, or substantial contraction during the year? If "res," attach a statement	76		description of each activity	1		X			
If "Yes," attach a conformed copy of the changes. 78	77	Were any changes made in the organizing or governing documents but not reported	to the IRS?						
78a Dit he organization have unrelated business gross income of 31,000 or more during the year covered by this return? 77b Was there a Rigidation, disschillor, lemination, or substantial contraction during the year? 77c Was there a Rigidation, disschillor, lemination, or substantial contraction during the year? 77d Was there a Rigidation, disschillor, lemination, or substantial contraction during the year? 77d Was there a Rigidation related (other than by association with a statewise or advenued to generation) through common membership, generally poses, trades, decised, sell, only with example or network organization in the common membership. 77d Was there is required to the organization in the common membership. 77d Was there is required to the organization of the common membership. 77d Was there is required to the organization of the common membership. 77d Was the organization organization organization or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? 77d Bit Mass and the common of the form 1120-POL for this year? 77d Bit Mass and the common of the form 1120-POL for this year? 77d at substantially less than fair rental value? 77d Bit Mass and the common of the form 1120-POL for this year? 77d at substantially less than fair rental value? 77d Bit Mass and the common of the form 1120-POL for this year? 77d at substantially less than fair rental value? 87d Bit Mass and the common of the form 1120-POL for this year? 87d Bit Mass and the common of the form 1120-POL for this year? 87d Bit Mass and the common of the form 1120-POL for this year? 87d Bit Mass and the common of the form 1120-POL for this year? 87d Bit Mass and the common of the form 1120-POL for this year? 87d Bit Mass and the common of the form 1120-POL for this year? 87d Bit Mass and the common of the form 1120-POL for this year? 87d Bit Mass and the common of the form 1120-POL for this year. 87d Bit Mass and the common of the form 1120-POL for this year. 87d Bit		If "Yes," attach a conformed copy of the changes.		7.	1000	1			
b 1"Yes," has it filled a tax return on Form 990-T for this year? 9	78a		this retum?	78a					
79 Was there a liquidation, dissolution, termination, or substantial contaction during the year? If "es," attach a statem and substantial contaction during the year? If "es," attach a statem and substantial contaction of the programation related (pink than by association with a statewise or analization) proveming bodies, trustees, discussed, and an analysis of the programation of the organization by M/A and check whether it is exempt OR nonexempt. 1818 Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81 or 122 bill the organization file Form 1120-POL for this year? 282 bill the organization file Form 1120-POL for this year? 282 bill the organization file Form 1120-POL for these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions for reporting in Part III.) . 283 bill the organization comply with the public inspection requirements relating to quid pro quo contributions? 284 bill the organization comply with the disclosure requirements relating to quid pro quo contributions? 385 bill the organization include with every solicitation an exproses statement that such contributions or gifts the ware not tax deductible? 285 bill (6), 6), or (6) organization include with every solicitation an exproses statement that such contributions or gifts the ware not tax deductible? 386 bill the organization expension or qifts that were not tax deductible? 387 bill of organization expension or qifts that were not tax deductible? 388 bill of organization expension or qifts that were not tax deductible? 389 bill of organization expension or qifts that were not tax deductible? 380 bill the organization expension or quite that were not tax deductible? 380 bill of organization expension organization expension or tess? 380 bill of organization expension organization organization expension that the such contributions or gifts were not tax deductible? 381 bill of organization expension organization expension orga	b	If "Yes," has it filed a tax return on Form 990-T for this year?			N/A				
80a is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, sustess. Affors, etc., but any other exempt organization? b If "Yes." enter the name of the organization ▶ N/A ### Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81 ### 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? ### 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? ### 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? #### Did the organization comply with the disclosure requirements for returns and exemption applications? #### Did the organization comply with the disclosure requirements for returns and exemption applications? #### Did the organization solicit any contributions or gifts that were not tax deductible? ##### 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 pricy year. #### 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 pricy year. #### Did the organization endeductible amount of section 6033(e)(1/4) dues notices ### Did the organization endeductible amount of section 6033(e) tax on the amount in 85f to its reasonable estimate of does allocable to madeutible belobying and political expenditures the flexibious lax year? ### Did the organization of the proxy part of the organization o		Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attack	ch a statement						
solution to the content of the comparization of the seampt of measure pt organization? State Sta	80a	Is the organization related (other than by association with a statewide or nationwide organization) through	n common membership.	-	May 1				
and check whether it is □ exempt OR □ nonexempt. and check whether it is □ exempt OR □ nonexempt. b Did the organization file Form 1120-POL for this year? 22 Did the organization file Form 1120-POL for this year? 23 Did the organization received volnated 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 incloate 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 for reporting in Part III.) 13 Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 15 Did the organization or poly with the disclosure requirements relating to quid pro quo contributions? 26 Did the organization or poly with the disclosure requirements relating to quid pro quo contributions? 27 Did the organization or poly with the disclosure requirements relating to quid pro quo contributions? 38 Did N/A 28 Did the organization or poly with the disclosure requirements relating to quid pro quo contributions? 39 Did the organization or poly with the disclosure requirements relating to quid pro quo contributions? 39 Did the organization or poly with the disclosure requirements relating to quid pro quo contributions or gifts were not tax deductible? 30 Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 30 Did the organization meke only in-house lobbying expenditures of \$2,000 or less? 50 Di(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? 50 Did the organization meke only in-house lobbying expenditures of \$2,000 or less? 51 Poly N/A 52 Did the organization meke only in-house lobbying expenditures of \$2,000 or less? 53 Did the organization expenditures from members. 54 Did the organization expenditures from members. 55 Did (7) Organizations. Substantially all dues notices. 56 Did (7) Organizations. Subs		governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	• • • • • • • • • • • • • • • • • • • •	80a		Х			
81a Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81. b Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? 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 for reporting in Part III.) 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 for reporting in Part III.) b 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? b Did the organization only with the disclosure requirements relating to quid pro quo contributions? b Did the organization comply with the disclosure requirements relating to quid pro quo 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 the server not tax deductible? b Did the organization include with every solicitation an express statement that such contributions or gifts the server not tax deductible? c Solicity (6), 0, 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 85 or 85.8 do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year. If "Yes," was answered to either 85 or 85.8 do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year. If "Yes," was answered to either 85 or 85.8 do not complete 85c through 85h below unless the organization received a waiver for proxy tax ow	b	If "Yes," enter the name of the organization ▶ N/A				3.77			
Instructions for line 81 Instructions for line 81 Instructions for line 81 Instructions for line 81 Instructions for genization flee Form 1120-POL for this year? 22 23 24 25 25 26 26 26 27 28 28 28 28 29 29 20 20 20 20 20 20 20 20			pt OR nonexempt.	· ."\.	3				
b Did the organization file Form 1120-POL for this year? 22a 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 for reporting in a repart III.) 33a 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? 83b N/R 34b Did the organization comply with the disclosure requirements relating to quid pro quo contributions or gifts the fires," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 84b Did the organization make only in-house tobbying expenditures of \$2,000 or less? 85b 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? b Did the organization make only in-house tobbying expenditures of \$2,000 or less? 85b N/R 65 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? c Dues, assessments, and similar amounts from members. b Did the organization and political expenditures of \$2,000 or less? 65 Soliciol 162(c) lobbying and political expenditures (line 85d less 65e). 67 Taxable amount of lobbying and political expenditures (line 85d less 65e). 68 Soliciol 162(c) lobbying and political expenditures (line 85d less 65e). 68 Soliciol 162(c) lobbying and political expenditures (line 85d less 65e). 69 Gross receipts, included on line 12, for public use of club facilities. 87 Soliciol 170 orgs. Enter: a Initiation fees and capital contributions included on line 12 88 Soliciol 170 orgs. Enter: a Initiation fees and capital contributions included on line 12 89 Soliciol 30 organizations. Enter: Amount of tax imposed on the organizati	81a	Enter the amount of political expenditures, direct or indirect, as described in the	1 1		1 y 5 oy 1 5 o 7	1.			
82a		Instructions for line 81		7.	. Via	14 Ty.			
at substantially less than fair rental value? bif "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 for reporting in Part III.) 33a Did the organization comply with the public inspection requirements for returns and exemption applications? bid the organization comply with the disclosure requirements relating to quid pro quo contributions? 33b N/R 4b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 5b If "Yes," did the organization collicit any contributions or gifts that were not tax deductible? 5b Soft(c)(4) (5), or (6) organizations include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c Soft(c)(4) (5), or (6) organizations. a Were substantially all dues nondeductible by members? 5c Soft(c)(4) (5), or (6) organizations. a Were substantially all dues nondeductible by members? 5c Soft(c)(4) (5), or (6) organizations. a Were substantially all dues nondeductible by members? 5c Soft(c)(4) (5), or (6) organizations. a Were substantially all dues nondeductible by members? 5c Soft(c)(4) (5), or (6) organizations. a Were substantially all dues nondeductible by members? 5c Soft(c)(4) (5), or (6) organizations. a Were substantially all dues nondeductible by members? 5c Soft(c)(4) (5), or (6) organizations are substantially all dues nondeductible by members? 5c Soft(c)(4) (5), or (6) organization and substantially all dues nondeductible by members? 5c Soft(c)(4) organization and substantially all dues nondeductible by members? 5c N/A 6c Section 4632(e) (obbying and political expenditures of the soft and substantial and substantial and a substantial	b	Did the organization file Form 1120-POL for this year?	• • • • • • • • • • • • • • • • • • • •	81b		X			
b if "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part II or as an expense in Part II. (See instructions for reporting in Part III.) 33a Did the organization comply with the public inspection requirements for returns and exemption applications? 33b N/A 33b N/A 33b N/A 33b N/A 33b N/A 33b N/P 33b N/P 33b N/P 33b N/P 33b N/P 34c Did the organization comply with the public inspection requirements relating to quid pro que contributions? 33b N/P 34c Did the organization comply with the disclosure requirements relating to quid pro que contributions or gifts were not tax deductible? 55c Soft(c)(4). (5). or (6) organizations. a Were substantially all dues nondeductible by members? 55c Soft(c)(4). (5). or (6) organizations. a Were substantially all dues nondeductible by members? 55c Soft(c)(4). (5). or (6) organizations. a Were substantially all dues nondeductible by members? 55c Soft(c)(4). (5). or (6) organizations. a Were substantially all dues nondeductible by members? 55c Soft(c)(4). (5). or (6) organizations. a Were substantially all dues nondeductible by members? 55c N/A 55c Soft(c)(4). (5). or (6) organizations. a Were substantially all dues nondeductible by members? 55c Soft(c)(4). (5). or (6) organizations. a Were substantially all dues nondeductible by members? 55c Soft(c)(4). (5). or (6) organizations. a Were substantially all dues nondeductible by members? 55c Soft(c)(4). (5). or (6) organizations. a Were substantially all dues nondeductible by members? 55c Soft(c)(4). (5). or (6) organizations. a Were substantially all dues nondeductible by members? 55c Soft(c)(6). (5). or (6). organization and political expenditures of \$2,000 or less? 55c N/A 5	82a	Did the organization receive donated services or the use of materials, equipment, or	facilitles at no charge or						
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explaining each transaction c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. d Enter: Amount of tax on line 89c, above, reimbursed by the organization D List the states with which a copy of this return is filed Arizona b Number of employees employed in the pay period that includes March 12, 2000 (See inst.) The books are in care of William R. Deyo Located at 2501 N. Soldier Trail, Tucson, AZ ZIP code 85749 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here	Đ	50 ((c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess	s benefit transaction during						
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		explaining each transaction	"Yes," attach a statement	POL		Y			
sections 4912, 4955, and 4958. d Enter: Amount of tax on line 89c, above, reimbursed by the organization	С	Enter: Amount of tax imposed on the organization managers or disqualified persons	· · · · · · · · · · · · L	oan					
d Enter: Amount of tax on line 89c, above, reimbursed by the organization		sections 4912, 4955, and 4958	>			0			
b Number of employees employed in the pay period that includes March 12, 2000 (See inst.)	d	Enter: Amount of tax on line 89c, above, reimbursed by the organization	,	•		0			
b Number of employees employed in the pay period that includes March 12, 2000 (See inst.)	90a	List the states with which a copy of this return is filed ▶ Arizona							
The books are in care of ► William R. Deyo Located at ► 2501 N. Soldier Trail, Tucson, AZ Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here Telephone no. ► 520-749-8936 ZIP code ► 85749			inst.) 90bl			0			
Located at 2501 N. Soldier Trail, Tucson, AZ ZIP code 85749 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here	91	The books are in care of ▶ <u>William R. Deyo</u> Te	lephone no. ▶ 520-749	-89	36				
Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here		Located at \triangleright 2501 N. Soldier Trail, Tucson, AZ Z	P code ▶ 85749						
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92 N/A	92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 –	- Check here		1	 ▶ [N]/ A			
		and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 92						

	VII Analysis of Income-Producing Ac					
	r gross amounts unless otherwise ated.	Unrelated	business income	Excluded by se	ction 512, 513, or 514	(E) Related or
indic		(A) Business code	(B) Amount	(C) Exclusion code	(D)	exempt function
93	Program service revenue:	Dusiness code	Anount	EXCIUSION COOR	Amount	income
	Resident Fees			<u> </u>		303,344
Ь	Interest Income			14	60	
C						
d						
0						
f	Medicare/Medicaid payments					
g	Fees and contracts from government agencies		_			
94	Membership dues and assessments					
95	Interest on savings and temporary cash investments					
96	Dividends and interest from securities		_			
97	Net rental income or (loss) from real estate:			Florida There		aligned to the control of the contro
а	debt-financed property			·		
þ	not debt-financed property		-			
98	Net rental income or (loss) from personal property					
99	Other investment income					
100	Gain or (loss) from sales of assets other than inventory					
101	Net income or (loss) from special events					
102	Gross profit or (loss) from sales of inventory					
103	Other revenue: a					
b						
_						
ď						
6		-				
104	Subtotal (add columns (B), (D), and (E))				60.00	303,344.00
105	Total (add line 104, columns (B), (D), and (E)	· · · · 		<u> </u>	- 30.001	03,404.00
Note:	Line 105 plus line 1d, Part I, should equal the a	amount on line 12	Part I			73, 404.00
Part '	VIII Relationship of Activities to the Acco	mplishment of Ex	empt Purposes (See Specific	Instructions on	nage 31)
Line i	No. Explain how each activity for which income is rep	orted in column (E) of	Part VII contributed im	podantly to the	accomplishment of	the
▼	organization's exempt purposes (other than by pr	oviding funds for such	ourposes).	pottanti, to the	2000111	
93	a These resident fees go	directly t	o the expe	nses of	providin	a
	Eldercare ambulatory as	sisted liv	ing servic	es.	<u>Facilianii</u>	2
			<u> </u>			
				-		
Part I	X Information Regarding Taxable Subsid	laries and Disreg	erded Entities (Se	e Specific In	structions on na	nge 31.)
	(A)	(B)	(C)	I I	(D)	(E)
	Name, address, and EIN of corporation, partnership, or disregarded entity	Percentage of ownership interest	Nature of activ	vities	Total income	End-of-year
N/A	partition of a diologal deal office.	%				assets
			-			
						
		% %				
Dart V	/ Information Deposits - Toronto A					
Part)		lated with Person	al Benefit Contra	icts (See Spi	ecific Instruction	s on page 31.)
(a)	Did the organization, during the year, receive					
	benefit contract?				_	JYes ⊠ No
(b)	Did the organization, during the year, pay prer	niums, directly or i	ndirectly, on a per	sonal benefit	contract?	Yes 💢 No
ote: /	f "Yes" to (b), file Form 8870 and Form 4720 (
	Under penalties of perjury, I declare that I have exa	mined this return, includi	ng accompanying sched	lules and statem	ents, and to the best o	f my knowledge an
		other than of	ficer) is based on all info			wiedge. (Important
		1 11	12/01 N	Illiam R	. 'SE 40	
		1 / //	<u> </u>	GUCTY/	TREAS	
		Date	Time	or print name an	d titla	

SCHEDULE'A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Organization Exempt Under Section \$1(c)(3)

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

Supplementary Information — (See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ OMB No 1545-0047

2000

Name of the org	anization			Employer Identifica	ton number
	ven, Inc.			86-0935278	
Part.i	Compensation of the Five Highe (See page 1 of the instructions. Lis	st Paid Employees Ot it each one. If there are	her Than Office none, enter "Non	rs, Directors, and e.")	Trustees
(a) Nem	e end address of each employee paid more than \$50,000	(b) Title and everege hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				;	
 ·					
Total numbe \$50,000	r of other employees paid over	0			
Part II	Compensation of the Five Higher (See page 1 of the instructions. List	st Paid Independent C t each one (whether ind	ontractors for P	rofessional Sen	/Ices , enter "None.")
(a) Na	ame and address of each independent contractor pa	<u> </u>	(b) Type		(c) Compensation
None					
					
<u></u>					
- 					
Total number professional	of others receiving over \$50,000 for services	0			

				raye a
Pa	rt li	Statements About Activities	Ye	s No
1	Du pu	uring the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence ublic opinion on a legislative matter or referendum?		х
		"Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$	٠	e
	Or	rganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations	7 S	
	Ch	necking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	5	
2	Dμ	uring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees,		1
	din	rectors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such		
	pe	erson is affiliated as an officer, director, trustee, majority owner, or principal beneficiary.		, ' ;
		L '		
a	Sa	ale, exchange, or leasing of property?	X	.
_	_			
b	Le	anding of money or other extension of credit?		X
	_			
С	Fu	urnishing of goods, services, or facilities?		X
	_			
d	Pa	ayment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
	т			
•		ansfer of any part of its income or assets?	<u> </u>	X
	II U	the answer to any question is "Yes," attach a detailed statement explaining the transactions.		ļ
3	Do	too the empairation make grants for scholarships, followships, student learners at 0		١
_		pes the organization make grants for scholarships, fellowships, student loans, etc.?	_	X
4a		p you have a section 403(b) annuity plan for your employees?	١	X
þ	Atta	tach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in	:. , } ,	
	TUN	rtherance of its charitable programs qualify to receive payments. (See page 2 of the instructions.)		<u> </u>
	rt·I\			
The	orgai	inization 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, page 5.)		
7	\equiv			
•	닏	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).		
8	Ш	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 ▶		
40	$\overline{}$			
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), 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 13 (Also complete the Support Schedule in Part IV-A.)	'0(b)(l)(A)(vi).
1 1b		A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)		
12	X	An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts	from .	antivition
		related to its charitable, etc., functions — subject to certain exceptions, and (2) no more than 331/5% of its support from gross investme unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See sec (Also complete the Support Schedule in Part IV-A.)	nt ince	ome and
13	\Box	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations describ	ad in:	(4) linaa
. •	ш	5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)	ou in:	(1) ines
		Provide the following information about the supported organizations. (See page 5 of the instructions.)		
	•	(a) Name(s) of supported organization(s) (b) Line number of from above		
		TIOTI above		
14	\Box	An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)		
	<u> </u>			

					Pa
Complete only	if you checked a	a box on line 10,	11, or 12.) <i>Use</i>	cash method o	f accountir
e worksheet in t	the instructions f	or converting fro	m the accrual to	o the cash metho	d of accoun
	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total

Pa	Note: You may use the worksheet in	if you checked	a box on line 10,	11, or 12.) Use	cash method	of accounting.
Cale	endar year (or fiscal year beginning in)	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	2,804		(0) 1007	(4) 1000	5,854.00
16	Membership fees received					37007.00
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose	273,822	169,620			443,442.00
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	206	333			520.00
19	Net income from unrelated business activities not included in line 18	200	333	-		539.00
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					la .
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	0	525			525.00
23	Total of lines 15 through 22	276,832.00	173,528.00			450,360.00
24	Line 23 minus line 17	3,010.00	3,908.00			6,918.00
25	Enter 1% of line 23	2,768.32	1,735.28	<u>-</u>		h i i i i i i i i i i i i i i i i i i i
26	Organizations described on lines 10 or 11: a Enter				▶ 26a	· ·
	Attach a list (which is not open to public inspection) show than a governmental unit or publicly supported organization shown in line 26a. Enter the sum of all these excess amo	on) whose total gifts unts	for 1996 through 1	999 exceeded the	amount 26b	TV. TV. T 4 . *
	Total support for section 509(a)(1) test: Enter line 24, cold				► 26c	
u	Add: Amounts from column (e) for lines: 18		19 26b		▶ 26d	
	Public support (line 26c minus line 26d total)					
	Public support percentage (line 26e (numerator) divid					
27	Organizations described on line 12: a For amount (which is not open to public inspection) to show the name such amounts for each year:	ts included in lines or, and total amou	15, 16, and 17 that nts received in each	were received from year from, each "	n a "disqualified p disqualified person	person," attach a list n." Enter the sum of
	(1999) (1998)					
ь	For any amount included in line 17 that was received from that was more than the larger of (1) the amount on line 25 as individuals.) After computing the difference between the (the excess amounts) for each year:	for the year or (2) \$5	5,000. (înclude in the	e list organizations (described in lines t	5 through 11, as well
	(1999) (1998)				_(1996)	<u> </u>
	Add: Amounts from column (e) for lines: 15		21			449,296.00
	Add: Line 27a total and	l line 27b total			▶ 27d	
•	Public support (line 27c total minus line 27d total)				▶ 276	449,296.00
f		ine 23, column (e) .		. 27f 450	.360.00	130 9 141
g h	Public support percentage (line 27e (numerator) divid Investment income percentage (line 18, column (e) (n					
	Unusual Grants: For an organization described in line 10					
	open to public inspection) for each year showing the name grant. Do not include these grants in line 15. (See page 5	of the contributor,	the date and amour	nt of the grant, and	a brief description	of the nature of the

Schedule A (Form 990 or 990-EZ) 2000

Private School Questionnaire (See page 5 of the instructions.)

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

			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?	29		
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?	30		¥ +80
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?	31	े हाँ 	
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			i i
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
32	Does the organization maintain the following:	1		ř.
	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		<u> </u>
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
đ	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			41.43 2.53
33	Does the organization discriminate by race in any way with respect to:		,	
a	Students' rights or privileges?	33a	10 64	: '
b	Admissions policies?	33ь		
С	Employment of faculty or administrative staff?	33c		_
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	V.		\$ 50 \$ 50 1
		±1.		
}∡lo	Dose the amenization making any financial aid or conjugate from			
	Does the organization receive any financial aid or assistance from a governmental agency?	34a	\dashv	
b	Has the organization's right to such aid ever been revoked or suspended?	34Ь	a (1520 D.)	i fiz ee
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			1983. 1981
5	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)	Y Y

_	dule A (Form 990 or 990-EZ) 2000								Page 5
Pa	t VI-A Lobbying Expenditures by Elec (To be completed ONLY by an elig				he in:	struc	tions.))	
	k here ▶ a ☐ if the organization belongs to an affi	- ·		<u> </u>			-	-	· · · · · · · · · · · · · · · · · · ·
Che	k here ▶ b if you checked "a" above and "limite	ed control* provision	ns apply.						_
	Limits on Lobbyin (The term "expenditures" mean:	•				Aff	(a) iliated gr totals	oup	(b) To be completed for ALL electing
36					T 56	-			organizations
37	Total lobbying expenditures to influence public opinion (•		36	┼—			_
38	Total lobbying expenditures to influence a legislative bod				37	-			ļ
39	Total lobbying expenditures (add lines 36 and 37)				38	∔—			
40	Other exempt purpose expenditures				39	₩.			
41	Total exempt purpose expenditures (add lines 38 and 39		• • • • • • • • • • • • • • • • • • • •		40	.		,	100
41	Lobbying nontaxable amount, Enter the amount from the lifthe amount on line 40 is — The lo	-					,	$\tau = \mathbf{v}$	
	Not over \$500,000	bbying nontaxable			1	"			tage of the same
	Over \$500,000 but not over \$1,000,000 \$100,00				ro A		4	y	
	Over \$1,000,000 but not over \$1,500,000 \$175,00				41		." .		1 1814 Table 11 11
	Over \$1,500,000 but not over \$17,000,000 \$225,00					 	. /		Taraha ayar a s
	Over \$17,000,000						٠.	1	
42	Grassroots nontaxable amount (enter 25% of line 41)				42		in the l		Martin Alle
43	Subtract line 42 from line 36. Enter -0- if line 42 is more				43	├			
44	Subtract line 41 from line 38. Enter -0- if line 41 is more				44	 			
						12	1.37		
	Caution: If there is an amount on either line 43 or line 4	4, you must file For	m 4720.		1	î.			
		L	obbylng Expendi	tures During	4-Ye	ar Ave	raging	Perio	od
	Calendar year (or fiscal year beginning in) ▶	(a) 2000	(b) 1999	(c) 1998			(d) 1997		(e) Total
45	Lobbying nontaxable amount								
46	Lobbying ceiling amount (150% of line 45(e))				Aller Van de la		•		
47	Total lobbying expenditures								
48	Grassroots nontaxable amount	11 11 11 11					22 42 10		
49	Grassroots ceiling amount (150% of line 48(e))							e e	
50	Grassroots lobbying expenditures								
Par	t VI-B Lobbying Activity by Nonelectin	g Public Char	Ities						
	(For reporting only by organization			/I-A) (See	page	9 of	the ir	nstru	ctions.)
Durin	g the year, did the organization attempt to influence nation opinion on a legislative matter or referendum, through the	al, state or local led					Yes	No	Amount
	Volunteers						\vdash	_	-0 - 1 - 2 ₁ - 2 ₁ - 2 ₁
	Paid staff or management (Include compensation in expe								
c	Media advertisements	· · · · · · · · · · · · · · · · · · ·					\vdash		ទីសេ គីសី សមិទីស្នែស ដើ
d	Mailings to members, legislators, or the public						\vdash		
•	Publications, or published or broadcast statements						┝─┤		
f	Grants to other organizations for lobbying purposes								
Q	Direct contact with legislators, their staffs, government of						┞──┼	-	
h	Rallies, demonstrations, seminars, conventions, speeche						┝─┼	\dashv	
i	Total lobbying expenditures (add lines c through h)							ely.	
	, , , , , , , , , , , , , , , , , , , ,						<u> </u>		
	If "Yes" to any of the above, also attach a statement giving	o a detailed descrip	tion of the labbying	activities					



Pa	rt VI		rarum (See	sters to and Transactions page 9 of the instructions	ns and Relationships With Noncha)	ritable)	
51	Did t (othe	he reporting organiza	tion directly or indirect		ith any other organization described in section 50	1(c) of ti	ne Cod	е
8				oncharitable exempt organization o			Yes	No
				The state of the s		51a(l)	1.55	X
	(ii)				***************************************	a(ii)	\vdash	X
b	Othe	r transactions:						Λ.
	(i)	Sales or exchanges	of assets with a nonc	haritable exempt organization	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	b(i)		Х
					******************************	b(il)		X
	(iii)	Rental of facilities, e	equipment, or other as	sets	*******************************	b(iii)		Х
	(lv)	Reimbursement am	angements			b(lv)		X
	(v)	Loans or loan guara	intees		*!-!*!	b(v)		Х
	(vi)	Performance of sen	vices or membership o	r fundraising solicitations		b(vi)		X
¢						C		X
d	If the	answer to any of the	above is "Yes," compl	ete the following schedule. Columi	n (b) should always show the fair market value of	the good	is, othe	ır
	asse show	ts, or services given to in column (d) the val	by the reporting organizate of the goods, other	zation. If the organization received assets, or services received:	less than fair market value in any transaction or s	haring a	rrange	ment,
	a) a no.	(b) Amount involved	Name of none	(c) haritable exempt organization	(d) Description of transfers, transactions, and shar	ring arrar	gemen	is.
N/	<u>/A_</u>							
								_
				-				
		<u> </u>	<u> </u>					
					 			
					-			
_								
							-	
52a	Is the	organization directly on 501(c) of the Code	or indirectly affiliated v	with, or related to, one or more tax-	exempt organizations described in	Yes		No
ь	If "Ye:	s, complete the follow	wing schedule:	 				
		(a) Name of organiz	ation	(b) Type of organization	(c) Description of relationship			
1/ <i>P</i>	`	 		.,,				
•		· -			· · · · · · · · · · · · · · · · · · ·			
								
								
						_		
	_					-		
	-			 	<u> </u>			
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				<u> </u>	 			
					 		_	
								

2000	Federal Statements	Page 1
· ·		
	Elderhaven, Inc.	86-0935278

Statement 1 Form 990, Part 1, Line 1d Contribution, Gifts, and Grants

Not Open to Public Inspection

No single contributor gave \$5,000 or more during the year.

2000	Federal Statements	Page 2
·	Elderhaven, Inc.	86-0935278
Statement 2 Form 990, Part 1, Line 20 Other Changes in Net Asset	ts or Fund Balances	
		Ending
	d from cash to accrual, during tax period g 6/30/01	
	Total	\$15.752.00

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2000	Federal Statements	Page 3
	Elderhaven, Inc.	86-0935278
Statement 3 Form 990, Part II, Line 22 Grants and Allocation		
Allocation Recipient		Amount
Tucson Police Officers Association Muscular Dystrophy Association Teen Mania Ministries		\$ 85 50 25
	Total	<u>\$160</u>

2000	Federal Statements	Page 4	
	Elderhaven, Inc.	86_0935278	

Statement 4 Form 990, Part II, Line 43 Other Expenses

	(A)	(B)	(C)	(D)
		Program	Management &	, ,
Other Expenses	<u>Total</u>	Services	General	Fundraising
Amortization	\$ 8,538		8,538	
Bank fees	711	711	•	
Contract labor	50	50		
Decorations	100	100		
Employment costs	606	606		
Food serv. supplies	13,888	13,888		
Licenses & permits	200	200		
Miscellaneous	470	470		
Other profess. fees	3,109	3,109		
Repairs & maint.	7,996	7,996		
Resident costs	793	793		
Security	207	207		
Staffing employmen	t 7,073	7,073		
Training	150	<u> 150</u>		
Total	<u>\$43,891</u>	<u>35,353</u>	8.538	0

2000	Federal Statements	Page 5
	Elderhaven, Inc.	86-0935278
Statement 5 Form 990, Part IV, Line 58 Other Assets	3	
		Ending
Net intangible assets (Goody	vill and Incorporation Costs)	<u>\$84,153.36</u> \$84,153.36

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2000	Federal Statements	Page 6
	Elderhaven, Inc.	86-0935278

Statement 6 Form 990, Part IV, Line 64b Mortgages and Other Notes Payable

Note Payable	Beginning Balance	Ending Balance
Zerby - Purchase of Equipment	\$75,000	\$62,550

2000	Federal Statements	Page 7
	Elderhaven, Inc.	86-0935278

Statement 7
Form 990 Schedule A, Part III, Line 2
Transactions with Trustees, Directors, etc.

Journey's End (40% owned by Zerby's, 60% owned by Deyo's) leases the building to Elderhaven.

The Zerbys sold this business, along with their equipment to Elderhaven in year 1999. Installment payments are made on the note payable monthly in the amount of \$1,500.00.

Both of these transactions were fully disclosed on Form 1023 from which the IRS exemption letter, dated 11/1/98, was issued.

2000		Federal S	Statements		Page 8	
2000		Elderha	ıven, Inc.		86-0935278	
Statement 8 Schedule A, Part Other Income	IV-A, Line 22					
Description	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total	
Miscellaneous	\$ <u>0</u> \$ 0	\$ 525 \$ 525	\$ <u>0</u> \$ <u>0</u>	\$ <u>0</u> \$ 0	\$ 525 \$ 525	

Supplemental Information

Elderhaven, Inc. 86-0935278 Depreciation Schedule As of June 30, 2001

		Date	Date	Cost/	Current	Prior	Depr.	Prior					7/00-6/01 Current
No.	Description	Acquired	Sold	Basis	Sec 179	Sec 179	Basis	Depr.	Method	Life Year	ear	Rate	Dept
Amortization													1
1 Goodwill	lwill	7/1/2000		75.000	1	1	75 000	•	ō	Ā	•	4/14	2 4
2 Incorp	2 Incorporation Costs	7/1/2000		17,692	•	ı	17,692	•	70 70	<u>.</u> .		X	200
Total Amortization	ation		•	92,692		ļ, 	92,692) 	,	-	[<u>{</u>	8,538
Depreciation													
Machinary & Equipment	Equipment												
1 Credi	1 Credit Card Machine	07/12/00		2,415	•	1	2,415	1	200DB HY	2	_	0.2000	483
2 Alarms	SI	12/01/00		207	1	•	207	•	200DB HY	7	-	0.1429	8
3 Ноуе	3 Hoyer Lift & Swing	06/29/01	•	345	•	•	345	•	200DB HY	7	-	0.1429	49
Total Machina	Total Machinary & Equipment		l	2,967	ı	ı	2,967		•			1	562
Furniture & Fixtures	ixtures												
1 Fumiture	ture	Various		511	•	•	511	ı	200DB HY	7	-	0.1429	73
2 Hospi	2 Hospital Beds	03/22/01		750	ı	•	750	,	200DB HY	7	-	0.1429	107
3 Misc (3 Misc Carts & Cabinets	03/22/01		510	•	ı	510	1	200DB HY	7	-	0.1429	73
Total Furniture & Fixtures	ъ & Fixtures			1,771			1,771	'				ı	2
Grand Total Depreciation	epreciation			4.738	ı	,	4 738	1				l	040
			LI .				3					IJ	CIO
Grand Total Amortization	mortization		"	92,692	•	-	92,692	I	_				8,538
												1	

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To the Board of Directors Elderhaven, Inc. Tucson, Arizona

We have compiled the accompanying Statement of Assets, Liabilities, and Fund Balances of Elderhaven, Inc. (an Arizona Not-for-Profit corporation) as of June 30, 2001, the related Statement of Support, Revenue, and Expenses for the year then ended, and the Statement of Cash Flows for the year then ended in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants.

A compilation is limited to presenting in the form of financial statements and information that is the representation of officers. We have not audited or reviewed the accompanying financial statements and, accordingly, do not express an opinion or any other form of assurance on them.

The officers have elected to omit substantially all of the disclosures required by generally accepted accounting principles and a statement of changes in fund balances. If the omitted disclosures and a statement of changes in fund balances were included in the financial statements, they might influence the user's conclusions about the Organization's financial position, and results of operations. Accordingly, these financial statements are not designed for those who are not informed about such matters.

November 9, 2001

Davis & Roomy, CPAs, L.L.P.

Tucson, Arizona

ELDERHAVEN, INC.

STATEMENT OF ASSETS, LIABILITIES, AND FUND BALANCES

As of June 30, 2001

ASSETS		
Current assets		
Cash		
Checking	\$	2,877
Payroll		3,568
Cash reserve		5,733
Designated funds		996
Total current assets		13,173
Other current assets		
Prepaid expenses		1,079
Total other current assets		1,079
Property & equipment		
Machinery & equipment		2,967
Fumiture & fixtures		1,771
Less accumulated depreciation		(815)
Total property & equipment		3,923
Other assets		
Goodwill		75,000
Incorporation costs		17,692
Less accumulated amortization		(8,538)
Total other assets		84,153
	<u>\$</u>	102,328
LIABILITIES AND FUND BALANCES		
Current liabilities		
Payroll liabilities		1,932
Total current liabilities		1,932
Note payable - Zerby (related party)		62,550
Total liabilities		64,482
Fund balances		
Beginning fund balance		
Unrestricted		39,068
Temporarily restricted		-
Permanently restricted		-
Surplus (deficit)		(1,223)
Ending Fund Balance (unrestricted)		37,846
	<u>\$</u>	102,328



REVENUE AND SUPPORT	
Resident fees	\$ 303,344
Contribution income	7,997
In-kind contributions	1,737
Interest income	60
Total revenue and support	313,137
EXPENSES	
Advertising	8,279
Amortization	8,538
Appliance	57
Automobile expense	424
Bank fees	711
Contract labor	50
Contributions	160
Decorations	100
Depreciation	815
Employee benefits	492
Employer convenience	18,000
Employment costs	606
Equipment rental & maintenance	72,900
Food service supplies	13,888

Total expenses	314,359
Utilities	18,016
Travel and entertainment	8
Training	150
Supplies	1,575
Staffing employment	7,073
Security	207
Resident costs	793
Repairs and maintenance	7,996
Professional fees	7,911
Printing and reproduction	177
Payroll tax expense	12,345
Payroll expenses - officers	49,400
Payroll expenses - employee	67,099
Miscellaneous	472
Licenses and permits	200
Interest expense	5,550
Insurance expense	2,309
Group insurance - officers	6,486
Fundraising	1,572
Food service supplies	13,888
Equipment rental & maintenance	72,900
Employment costs	606
Employer convenience	10,000

Surplus (deficit)

(1,223)

ELDERHAVEN, INC. STATEMENT OF CASH FLOWS For the year ended June 30, 2001

Cash flows from operating activities		
Surplus (deficit)		\$ (1,223)
Adjustments to reconcile surplus (deficit)		
to net cash used/provided by operating activities:		
Depreciation	815	
Amortization	8,538	
Increase in prepaid expenses	(1,079)	
Increase in payroll liabilities	410	8,684
Net cash provided by operating activities		7,461
Cash flows from investing activities		_
Incorporation costs	(3,157)	
Purchases of machinery & equipment	(2,967)	
Purchases of furniture & fixtures	(1,771)	
Net cash used by investing activities		(7,895)
Cash flows from financing activities		
Effect of change in accounting method (cash to accrual)	15,753	
Payment on note payable - Zerby (related party)	(12,450)	
Net cash provided by financing activities		3,303
Net increase/decrease in cash		2,869
Cash, July 1, 2000		10,304
Cash, June 30, 2001		\$ 13,173