

**Return of Organization Exempt From Income Tax**  
 Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation), section 527, or section 4947(a)(1) nonexempt charitable trust  
 The organization may have to use a copy of this return to satisfy state reporting requirements.

**2000**

Open to Public Inspection

Department of the Treasury  
 Internal Revenue Service

**A** For the 2000 calendar year, or tax year period beginning 7/01/00, and ending 6/30/01

**B** Check if applicable:  
 Change of address  
 Change of name  
 Initial return  
 Final return  
 Amended return

**C** Name of organization  
Alcoholic Rehabilitation Center  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
10290 Southton  
 City or town, state or country, and ZIP code  
San Antonio TX 78223

**D** Employer ID number  
74-1540097

**E** Telephone number  
210-633-0201

**F** Check  If application pending

**G** Org. type (check only one)  501(c)(3) (3) (insert no.)  527 or  4947(a)(1)  
 Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990EZ).

**J** Accounting method:  Cash  Accrual  Other (specify)

**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return 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.

Note: H and I are not applicable to section 527 orgs.  
**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** If "Yes," enter number of affiliates   
**H(c)** Are all affiliates included?  Yes  No (If "No," att. a list. See instr.)  
**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No  
**I** Enter 4-digit group exemption no. (GEN)   
**L** Check this box if the organization is not required to attach Schedule B (Form 990 or 990-EZ)

**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	1a	135,000
b	Indirect public support	1b	223,095
c	Government contributions (grants)	1c	849,383
d	Total (add lines 1a through 1c) (cash \$ <u>1,207,478</u> noncash \$ _____)	1d	1,207,478
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	30,483
3	Membership dues and assessments	3	
4	Interest on savings and temporary cash investments	4	6,746
5	Dividends and interest from securities	5	
6a	Gross rents	6a	
b	Less: rental expenses	6b	
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	
7	Other investment income (describe _____)	7	
8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other
b	Less: cost or other basis and sales expenses	8a	
c	Gain or (loss) (attach schedule)	8b	
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	
8d		8d	
9	Special events and activities (attach schedule)		
a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	16,825
b	Less: direct expenses other than fundraising expenses	9b	2,903
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	13,922
10a	Gross sales of inventory, less returns and allowances	10a	
b	Less: cost of goods sold	10b	
c	Gross profit or (loss) from sales of inventory (att. sch.) (subtract line 10b from line 10a)	10c	
11	Other revenue (from Part VII, line _____)	11	10,920
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	1,269,549
13	Program services (from line 44, column (B))	13	1,146,335
14	Management and general (from line 44, column (C))	14	93,346
15	Fundraising (from line 44, column (D))	15	5,943
16	Payments to affiliates (attach schedule)	16	
17	Total expenses (add lines 16 and 44, column (A))	17	1,245,624
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	23,925
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	518,897
20	Other changes in net assets or fund balances (attach explanation)	20	
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	542,822

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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 Specific Instructions on page 20.)

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 \$ _____ non-cash \$ _____)	22			
23	Specific assistance to individuals	23			
24	Benefits paid to or for members	24			
25	Compensation of officers, directors, etc.	25	50,000	45,000	5,000
26	Other salaries and wages	26	698,711	628,840	69,871
27	Pension plan contributions	27	14,123	12,711	1,412
28	Other employee benefits	28	37,242	35,380	1,862
29	Payroll taxes	29	64,720	60,189	4,531
30	Professional fundraising fees	30	5,943		5,943
31	Accounting fees	31	23,170	22,012	1,158
32	Legal fees	32	1,350	1,283	67
33	Supplies	33	40,628	38,597	2,031
34	Telephone	34	13,507	12,832	675
35	Postage and shipping	35			
36	Occupancy	36			
37	Equipment rental and maintenance	37	9,801	9,801	
38	Printing and publications	38			
39	Travel	39	13,134	13,134	
40	Conferences, conventions, and meetings	40			
41	Interest	41	893	893	
42	Depreciation, depletion, etc. (att. sch.)	42	22,903	21,758	1,145
43	Other expenses (itemize): a	43a			
	b See Statement 1	43b	249,499	243,905	5,594
	c	43c			
	d	43d			
	e	43e			
44	Total functional expenses (add lines 22 - 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	1,245,624	1,146,335	93,346 5,943

**Reporting of Joint Costs.** Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation?  Yes  No

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_; (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_.

**Part III**

**Statement of Program Service Accomplishments (See Specific Instructions on page 23.)**

What is the organization's primary exempt purpose?	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
<p>► <b>Alcohol and drug abuse treatment</b></p> <p>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.)</p>	
a Alcohol and drug abuse rehabilitation services	
(Grants and allocations \$ _____)	1,146,335
b	
(Grants and allocations \$ _____)	
c	
(Grants and allocations \$ _____)	
d	
(Grants and allocations \$ _____)	
e Other program services (attach schedule)	
(Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	1,146,335

**Part IV** Balance Sheets (See Specific Instructions on page 23.)

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

		(A)		(B)
		Beginning of year		End of year
A s s e t s	45 Cash-non-interest-bearing		45	
	46 Savings and temporary cash investments	190,044	46	231,116
	47a Accounts receivable	47a 69,190		
	b Less: allowance for doubtful accounts	47b	47c	69,190
	48a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments-securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54	
	55a Investments-land, buildings, and equipment: basis	55a		
	b Less: accumulated depreciation (attach schedule)	55b	55c	
56 Investments-other (attach schedule)		56		
57a Land, buildings, and equipment: basis	57a 514,961			
b Less: accumulated depreciation (attach schedule)	57b 241,730	209,605	57c	273,231
58 Other assets (describe _____)		58		
59 <b>Total assets</b> (add lines 45 through 58) (must equal line 74)		542,027	59	573,537
L i a b i l i t i e s	60 Accounts payable and accrued expenses	23,130	60	38,307
	61 Grants payable		61	
	62 Deferred revenue		62	
	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 _____)		65	
66 <b>Total liabilities</b> (add lines 60 through 65)		23,130	66	38,307
N e t A s s e t s o f o r g a n i z a t i o n s	<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	426,210	67	442,543
	68 Temporarily restricted	92,687	68	92,687
	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 and column (B) must equal line 21)		518,897	73	535,230
74 <b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)		542,027	74	573,537

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.

Part IV-A 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
<p><b>a</b> Total revenue, gains, and other support per audited financial statements <span style="float:right">▶</span> <b>a</b> <u>1,269,549</u></p> <p><b>b</b> Amounts included on line a but not on line 12, Form 990:</p> <p>(1) Net unrealized gains on investments \$</p> <p>(2) Donated services and use of facilities \$ <u>45,000</u></p> <p>(3) Recoveries of prior year grants \$</p> <p>(4) Other (specify):</p> <p>\$</p> <p>Add amounts on lines (1) through (4) <span style="float:right">▶</span> <b>b</b> <u>45,000</u></p> <p><b>c</b> Line a minus line b. <span style="float:right">▶</span> <b>c</b> <u>1,224,549</u></p> <p><b>d</b> Amounts included on line 12, Form 990 but not on line a:</p> <p>(1) Investment expenses not included on line 6b, Form 990 \$</p> <p>(2) Other (specify):</p> <p>\$</p> <p>Add amounts on lines (1) and (2) <span style="float:right">▶</span> <b>d</b></p> <p><b>e</b> Total revenue per line 12, Form 990 (line c plus line d) <span style="float:right">▶</span> <b>e</b> <u>1,224,549</u></p>	<p><b>a</b> Total expenses and losses per audited financial statements. <span style="float:right">▶</span> <b>a</b> <u>1,245,485</u></p> <p><b>b</b> Amounts included on line a but not on line 17, Form 990:</p> <p>(1) Donated services and use of facilities \$ <u>45,000</u></p> <p>(2) Prior year adjustments reported on line 20, Form 990 \$</p> <p>(3) Losses reported on line 20, Form 990 \$</p> <p>(4) Other (specify):</p> <p>\$</p> <p>Add amounts on lines (1) through (4) <span style="float:right">▶</span> <b>b</b> <u>45,000</u></p> <p><b>c</b> Line a minus line b <span style="float:right">▶</span> <b>c</b> <u>1,200,485</u></p> <p><b>d</b> Amounts included on line 17, Form 990 but not on line a:</p> <p>(1) Investment expenses not included on line 6b, Form 990 \$</p> <p>(2) Other (specify):</p> <p>\$</p> <p>Add amounts on lines (1) and (2) <span style="float:right">▶</span> <b>d</b></p> <p><b>e</b> Total expenses per line 17, Form 990 (line c plus line d) <span style="float:right">▶</span> <b>e</b> <u>1,200,485</u></p>

**Part V List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated; see Specific Instructions on page 25.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contrib. to employee benefit plans & deferred compensation	(E) Expense account and other allowances
John Erwin 10290 Southton, San Antonio, TX	Exec. Dir. 40	0	0	0
Charles Wright 10290 Southton, San Antonio, TX	President As Needed	0	0	0
John Welsh 10290 Southton, San Antonio, TX	1st V. Pres. As Needed	0	0	0
Steve Hughes 10290 Southon, San Antonio, TX	2nd V. Pres. As Needed	0	0	0
Terry Kerr 10290 Southton, San Antonio, TX	Treasurer As Needed	0	0	0
Brad Bundrant 10290 Southton, San Antonio, TX	Secretary As Needed	0	0	0
Alvin Freidman 10290 Southton, San Antonio, TX	Director As Needed	0	0	0
Ken Garretson 10290 Southton, San Antonio, TX	Director As Needed	0	0	0
Anita Perry 10290 Southton, San Antonio, TX	Director As Needed	0	0	0
See Statement 2				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ▶  Yes  No

If "Yes," attach schedule-see Specific Instructions on page 26.

Part VI Other Information (See Specific Instructions on page 26.)		N/A	Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		X
78a	Did the organization have unrelated business gross inc. of \$1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.			
81a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81	81a		
b	Did the organization file Form 1120-POL for this year?	81b		X
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?	82a	X	
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.)	82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	N/A	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	N/A	
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.	85b	N/A	
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 in 85f?	85g	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A	
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		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> 0 ; section 4912 <input type="checkbox"/> 0 ; section 4955 <input type="checkbox"/> 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		X
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 <input type="checkbox"/> None			
b	Number of employees employed in the pay period that includes March 12, 2000 (See instructions)	90b		
91	The books are in care of <input type="checkbox"/> Bradley Wild Telephone no. <input type="checkbox"/> 210-633-0201 Located at <input type="checkbox"/> 10290 Southton, San Antonio, TX ZIP code <input type="checkbox"/> 78223			
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			<input type="checkbox"/>

**Part VII Analysis of Income-Producing Activities** (See Specific Instructions on page 30.)

	Unrelated business income		Excluded by sec 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
Enter gross amounts unless otherwise indicated.					
93 Program service revenue:					
a <u>Program services</u>					30,483
b _____					
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					6,746
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b 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			1	13,922	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b <u>Housing income</u>			3	8,525	
c <u>Miscellaneous income</u>			41	2,395	
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0		24,842	37,229
105 Total (add line 104, columns (B), (D), and (E))					62,071

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 Specific Instructions on page 31.)

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).
93a	<b>Charges for providing halfway house services to persons who are not fully sponsored by government programs.</b>

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See Specific Instructions on page 31.)

(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 Specific Instructions on pg. 31.)

- (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).

Please 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. (Important: See General Instruction W on page 14.)

Date: 11/13/01  
 Type or print name and title: Board President  
 Date: NOV 13 2001  
 Check if self:   
 Preparer's SSN or PTIN: 585-28-5063

**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 Section 4947(a)(1) Nonexempt Charitable Trust  
**Supplementary Information**-(See separate instructions.)

OMB No. 1545-0047

**2000**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

Employer identification number

**Alcoholic Rehabilitation Center**

**74-1540097**

**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 ben. plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000 ▶				

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 1 of the instr. 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
None		
Total number of others receiving over \$50,000 for professional services ▶		

For Paperwork Reduction Act Notice, see page 1 of the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2000

**Part III** Statements About Activities

	Yes	No
1 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 <span style="float:right">▶ \$ _____</span> 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.	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its 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:		
a Sale, exchange, or leasing of property? .....	2a	X
b Lending of money or other extension of credit? .....	2b	X
c Furnishing of goods, services, or facilities? .....	2c	X
d Payment of compensation (or payment or reimbursement of exp. if more than \$1,000)? .....	2d	X
e Transfer of any part of its income or assets? If the answer to any question is "Yes," attach a detailed statement explaining the transactions.	2e	X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.?	3	X
4a Do you have a section 403(b) annuity plan for your employees?	4a	X
b Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See pg. 2 of the instr.)		

**Part IV** Reason for Non-Private Foundation Status (See pages 2 through 5 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, page 5.)
- 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) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 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 5 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 FY beginning in)	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
15 Gifts, grants, & contrib. received. (Do not incl. unusual grants. See line 28.)	1,393,396	1,074,581	854,246	959,772	4,281,995
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a busn. unrelated to the organization's charitable, etc., purpose	27,985	8,130	13,530	8,719	58,364
18 Gross inc. from int., dividends, amounts received from pymt. on securities loans (section 512(a)(5)), rents, royalties, & unrelated busn. taxable inc. (less sec. 511 taxes) from businesses acquired by the organization after June 30, 1975	3,973	306	10,391	8,719	23,389
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's ben. & either paid to it or expended on its behalf					
21 The value of services or facil. furnished to the org. by a governmental unit without charge. Do not incl. the value of serv. or facilities generally furnished to the public without charge	45,000	45,000	45,000	45,000	180,000
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of cap. assets					
23 Total of lines 15 through 22	1,470,354	1,128,017	923,167	1,022,210	4,543,748
24 Line 23 minus line 17	1,442,369	1,119,887	909,637	1,013,491	4,485,384
25 Enter 1% of line 23	14,704	11,280	9,232	10,222	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1996 through 1999 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts					26b
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____					26d
e Public support (line 26c minus line 26d total)					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list (which is not open to public inspection) to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year:					
(1999) _____ (1998) _____ (1997) _____ (1996) _____					
b For any amount included in line 17 that was received from a nondisqualified person, attach a list 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 11, as well as individuals.) 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:					
(1999) _____ (1998) _____ (1997) _____ (1996) _____					
c Add: Amounts from column (e) for lines: 15 4,281,995 16 _____ 17 58,364 20 _____ 21 180,000					27c 4,520,359
d Add: Line 27a total _____ and line 27b total _____					27d
e Public support (line 27c total minus line 27d total)					27e 4,520,359
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f 4,543,748
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 99.4852%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 0.5148%
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1996 through 1999, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See page 5 of the instr.)					

**Part V 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)

		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.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?			
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?			
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?			
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:			
a	Students' rights or privileges?			
b	Admissions policies?			
c	Employment of faculty or administrative staff?			
d	Scholarships or other financial assistance?			
e	Educational policies?			
f	Use of facilities?			
g	Athletic programs?			
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?			
b	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 7 of the instructions.)  
 (To be completed ONLY by an eligible organization that filed Form 5768) N/A

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

**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred.)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table-		
	<b>If the amount on line 40 is-</b>		
	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		
	<b>The lobbying nontaxable amount is-</b>		
	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	41	
	\$225,000 plus 5% of the excess over \$1,500,000		
	\$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

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 9 of the instructions.)

**Lobbying Expenditures During 4-Year Averaging Period**

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))					
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 9 of the instr.) N/A

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.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 9 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

Table with 3 columns: Question, Yes, No. Rows include 51a(i) Cash, 51a(ii) Other assets, 51b(i) Sales or exchanges of assets, 51b(ii) Purchases of assets, 51b(iii) Rental of facilities, 51b(iv) Reimbursement arrangements, 51b(v) Loans or loan guarantees, 51b(vi) Performance of services, and 51c Sharing of facilities.

- (i) Cash
(ii) Other assets
b Other transactions:
(i) Sales or exchanges of assets with a noncharitable exempt organization
(ii) Purchases of assets from a noncharitable exempt organization
(iii) Rental of facilities, equipment, or other assets
(iv) Reimbursement arrangements
(v) Loans or loan guarantees
(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. First row contains 'N/A'.

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No (with checked box for No)

b If "Yes," complete the following schedule:

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. First row contains 'N/A'.

**Federal Statements**Direct Public Support

<u>Contributor</u>	<u>Cash Contribution</u>	<u>Noncash Contribution</u>
Total	\$ 135,000	\$ 0
	<u>\$ 135,000</u>	<u>\$ 0</u>



## Federal Statements

Statement 1 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
Indirect Expense				
Property Taxes	1,996	1,896	100	
Food	121,347	121,347		
Utilities	47,060	44,707	2,353	
Building & ground maintenance	36,759	34,921	1,838	
Building rental	10,200	10,200		
Miscellaneous	8,304	7,889	415	
Education	3,921	3,921		
Dues & memberships	2,147	2,147		
Facility & other insurance	17,765	16,877	888	
Total	<u>\$ 249,499</u>	<u>\$ 243,905</u>	<u>\$ 5,594</u>	<u>\$ 0</u>

## Federal Statements

Statement 2 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees

<u>Name</u>	<u>Title</u>	<u>Average Hours</u>	<u>Address</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
John Jackson	Director	10290 Southton, As Needed	San Antonio, TX			
Don Clark	Director	10290 Southton, As Needed	San Antonio, TX			
Deborah Mayer	Director	10290 Southton, As Needed	San Antonio, TX			
Henry Ortega	Director	10290 Southton, As Needed	San Antonio, TX			
Lionel Redix	Director	10290 Southton, As Needed	San Antonio, TX			
Wandita Turner	Director	10290 Southton, As Needed	San Antonio, TX			
Dr. Gib Meadows	Director	10290 Southern, As Needed	San Antonio, TX			
Will Wilson	Director	10290 Southern, As Needed	San Antonio, TX			
Pete Lewis	Director	10290 Southern, As Needed	San Antonio, TX			

## Alcoholic Rehabilitation Ctr. DEPRECIATION EXPENSE REPORT

as of 06/30/2001

SYS No	In Svc Date	Acquired Value	Dep Meth	P Est T Life	Salvage/ Sect 179	Depreciable Basis	Prev Thru	Prior Accum Depreciation	Depreciation This Run	Current Year to Date	Curr Accum Depreciation	Key
<b>Book: Internal    FY: June</b>												
000039	06/30/73	250.00	SLMM	P 07 00	0.00	250.00	06/87	250.00	0.00	0.00	250.00	
000040	06/30/73	785.00	SLMM	P 07 00	0.00	785.00	06/87	785.00	0.00	0.00	785.00	
000041	06/30/74	1301.36	SLMM	P 07 00	0.00	1301.36	06/87	1301.36	0.00	0.00	1301.36	
000042	12/31/80	7411.00	SLMM	P 10 00	0.00	7411.00	06/91	7411.00	0.00	0.00	7411.00	
000043	12/31/80	7488.00	SLMM	R 10 00	0.00	7488.00	06/91	7488.00	0.00	0.00	7488.00	
000044	06/30/81	5300.00	SLMM	P 10 00	0.00	5300.00	06/91	5300.00	0.00	0.00	5300.00	
000053	06/01/88	2012.00	SLMM	R 07 00	0.00	2012.00	06/95	2012.00	0.00	0.00	2012.00	
000054	06/01/88	300.00	SLMM	R 07 00	0.00	300.00	06/95	300.00	0.00	0.00	300.00	
000059	01/15/89	3191.00	SLMM	R 11 07	0.00	3191.00	04/01	3191.00	0.00	0.00	3191.00	
000060	01/31/89	7091.66	SLMM	R 17 09	0.00	7091.66	06/00	5619.24	399.53	399.53	6018.77	
000061	04/05/89	7250.00	SLMM	R 10 00	0.00	7250.00	06/01	7250.00	0.00	0.00	7250.00	
000063	09/30/89	4361.00	SLMM	R 10 00	0.00	4361.00	06/01	4361.00	0.00	0.00	4361.00	
000065	12/31/89	1221.86	SLMM	P 05 00	0.00	1221.86	06/95	1221.86	0.00	0.00	1221.86	
000075	04/27/90	14865.00	SLMM	P 10 00	0.00	14865.00	06/01	14865.00	0.00	0.00	14865.00	
000077	07/31/89	4275.00	SLMM	R 10 00	0.00	4275.00	06/01	4275.00	0.00	0.00	4275.00	
000078	01/01/90	5361.47	SLMM	R 11 08	0.00	5361.47	06/00	5016.81	344.66	344.66	5361.47	
000079	08/20/90	10400.00	SLMM	P 10 00	0.00	10400.00	06/00	10226.67	173.33	173.33	10400.00	
000080	01/24/91	425.00	SLMM	P 10 00	0.00	425.00	06/00	400.21	24.79	24.79	425.00	
000081	02/13/91	432.00	SLMM	P 10 00	0.00	432.00	06/00	406.80	25.20	25.20	432.00	
000082	02/27/91	503.23	SLMM	P 06 08	0.00	503.23	06/01	503.23	0.00	0.00	503.23	
000083	02/27/91	200.00	SLMM	P 05 00	0.00	200.00	06/96	200.00	0.00	0.00	200.00	
000084	03/14/91	274.73	SLMM	P 10 00	0.00	274.73	06/00	256.39	18.34	18.34	274.73	
000089	06/01/91	15354.25	SLMM	R 11 08	0.00	15354.25	06/00	12192.02	1316.08	1316.08	13508.10	
000090	12/31/90	5000.00	SLMM	R 10 00	0.00	5000.00	06/00	4750.00	250.00	250.00	5000.00	
000114	06/30/92	300.00	SLMM	R 06 07	0.00	300.00	06/01	300.00	0.00	0.00	300.00	
000116	04/30/94	6290.00	SLMM	R 10 00	0.00	6290.00	06/00	3878.83	629.00	629.00	4507.83	
000121	05/31/95	5580.00	SLMM	P 10 00	0.00	5580.00	06/00	2836.50	558.00	558.00	3394.50	
000128	11/23/99	61739.80	SLMM	P 11 00	0.00	61739.80	05/00	3274.08	5612.71	5612.71	8886.79	
000135	01/10/00	4952.50	SLMM	P 10 00	0.00	4952.50	06/00	206.36	495.25	495.25	701.61	
000136	01/10/00	638.00	SLMM	P 10 00	0.00	638.00	06/00	26.59	63.80	63.80	90.39	
000137	01/10/00	2008.80	SLMM	P 10 00	0.00	2008.80	06/00	83.70	200.88	200.88	284.58	
000139	06/30/00	10615.00	SLMM	P 07 00	0.00	10615.00	06/00	0.00	1516.43	1516.43	1516.43	
000145	02/29/00	855.80	SLMM	P 05 00	0.00	855.80	06/00	57.05	171.16	171.16	228.21	
Count=	33	-----										
Class: B		198033.46			0.00	198033.46		110245.70	11799.16	11799.16	122044.86	
Less disposals		0.00			0.00	0.00		0.00			0.00	
Net		198033.46			0.00	198033.46		110245.70	11799.16	11799.16	122044.86	
000001	06/30/70	395.00	SLMM	P 07 00	0.00	395.00	06/87	395.00	0.00	0.00	395.00	
000002	06/30/70	395.00	SLMM	P 07 00	0.00	395.00	06/87	395.00	0.00	0.00	395.00	
000003	06/30/70	189.60	SLMM	P 07 00	0.00	189.60	06/87	189.60	0.00	0.00	189.60	
000004	06/30/70	299.00	SLMM	P 07 00	0.00	299.00	06/87	299.00	0.00	0.00	299.00	
000005	06/30/70	2237.57	SLMM	P 07 00	0.00	2237.57	06/87	2237.57	0.00	0.00	2237.57	
000006	06/30/70	200.00	SLMM	P 07 00	0.00	200.00	06/87	200.00	0.00	0.00	200.00	
000007	06/30/70	100.00	SLMM	P 07 00	0.00	100.00	06/87	100.00	0.00	0.00	100.00	

Alcoholic Rehabilitation Ctr.  
DEPRECIATION EXPENSE REPORT

as of 06/30/2001

SYS No	In Svc Date	Acquired Value	Dep Meth	P Est T Life	Salvage/ Sect 179	Depreciable Basis	Prev Thru	Prior Accum Depreciation	Depreciation This Run	Current Year to Date	Curr Accum Depreciation	Key
000008	06/30/70	100.00	SLMM	P 07 00	0.00	100.00	06/87	100.00	0.00	0.00	100.00	
000009	06/30/68	1262.49	SLMM	P 07 00	0.00	1262.49	06/87	1262.49	0.00	0.00	1262.49	
000010	06/30/75	1680.00	SLMM	P 07 00	0.00	1680.00	06/87	1680.00	0.00	0.00	1680.00	
000011	12/31/71	100.00	SLMM	P 20 00	0.00	100.00	06/92	100.00	0.00	0.00	100.00	
000012	04/30/77	62.50	SLMM	P 07 00	0.00	62.50	06/87	62.50	0.00	0.00	62.50	
000013	04/30/77	259.00	SLMM	P 07 00	0.00	259.00	06/87	259.00	0.00	0.00	259.00	
000014	04/30/77	124.50	SLMM	P 07 00	0.00	124.50	06/87	124.50	0.00	0.00	124.50	
000015	01/01/87	1849.95	SLMM	P 07 00	0.00	1849.95	06/94	1849.95	0.00	0.00	1849.95	
000016	06/30/70	101.15	SLMM	P 07 00	0.00	101.15	06/87	101.15	0.00	0.00	101.15	
000017	06/30/71	126.90	SLMM	P 07 00	0.00	126.90	06/87	126.90	0.00	0.00	126.90	
000018	06/30/68	150.00	SLMM	P 07 00	0.00	150.00	06/87	150.00	0.00	0.00	150.00	
000019	06/30/66	125.00	SLMM	P 07 00	0.00	125.00	06/87	125.00	0.00	0.00	125.00	
000020	06/30/70	256.40	SLMM	P 07 00	0.00	256.40	06/87	256.40	0.00	0.00	256.40	
000021	06/30/74	345.00	SLMM	P 07 00	0.00	345.00	06/87	345.00	0.00	0.00	345.00	
000022	06/30/73	288.00	SLMM	P 07 00	0.00	288.00	06/87	288.00	0.00	0.00	288.00	
000023	06/30/71	200.00	SLMM	P 07 00	0.00	200.00	06/87	200.00	0.00	0.00	200.00	
000024	06/30/71	1200.00	SLMM	P 07 00	0.00	1200.00	06/87	1200.00	0.00	0.00	1200.00	
000025	07/31/77	430.00	SLMM	P 07 00	0.00	430.00	06/87	430.00	0.00	0.00	430.00	
000026	01/31/79	745.95	SLMM	P 07 00	0.00	745.95	06/87	745.95	0.00	0.00	745.95	
000027	04/30/87	120.00	SLMM	P 07 00	0.00	120.00	06/94	120.00	0.00	0.00	120.00	
000028	11/30/86	2130.00	SLMM	P 07 00	0.00	2130.00	06/94	2130.00	0.00	0.00	2130.00	
000029	06/30/86	50.00	SLMM	P 07 00	0.00	50.00	06/93	50.00	0.00	0.00	50.00	
000030	06/30/86	5048.00	SLMM	P 07 00	0.00	5048.00	06/93	5048.00	0.00	0.00	5048.00	
000031	06/30/72	156.65	SLMM	P 07 00	0.00	156.65	06/87	156.65	0.00	0.00	156.65	
000032	06/30/71	315.00	SLMM	P 07 00	0.00	315.00	06/87	315.00	0.00	0.00	315.00	
000033	06/30/70	1700.00	SLMM	P 07 00	0.00	1700.00	06/87	1700.00	0.00	0.00	1700.00	
000034	06/30/74	900.00	SLMM	P 08 08	0.00	900.00	06/87	900.00	0.00	0.00	900.00	
000035	12/31/79	628.83	SLMM	P 10 00	0.00	628.83	06/90	628.83	0.00	0.00	628.83	
000036	06/30/82	2763.00	SLMM	P 05 00	0.00	2763.00	06/87	2763.00	0.00	0.00	2763.00	
000037	10/01/86	250.00	SLMM	P 08 07	0.00	250.00	04/95	250.00	0.00	0.00	250.00	
000038	01/01/87	25.00	SLMM	P 08 09	0.00	25.00	09/95	25.00	0.00	0.00	25.00	
000045	03/31/87	15683.05	SLMM	P 06 08	0.00	15683.05	11/93	15683.05	0.00	0.00	15683.05	
000046	02/17/88	9108.17	SLMM	P 07 00	0.00	9108.17	06/95	9108.17	0.00	0.00	9108.17	
000047	03/16/88	199.00	SLMM	P 07 00	0.00	199.00	06/95	199.00	0.00	0.00	199.00	
000048	03/30/88	824.99	SLMM	P 08 07	0.00	824.99	10/96	824.99	0.00	0.00	824.99	
000049	12/15/87	350.50	SLMM	P 08 10	0.00	350.50	09/96	350.50	0.00	0.00	350.50	
000050	12/31/87	732.50	SLMM	P 07 00	0.00	732.50	06/95	732.50	0.00	0.00	732.50	
000051	12/15/87	170.00	SLMM	P 07 00	0.00	170.00	06/95	170.00	0.00	0.00	170.00	
000052	05/15/88	1295.00	SLMM	P 07 00	0.00	1295.00	06/95	1295.00	0.00	0.00	1295.00	
000055	04/28/88	1200.00	SLMM	P 07 00	0.00	1200.00	06/95	1200.00	0.00	0.00	1200.00	
000056	04/28/88	1101.00	SLMM	P 07 11	0.00	1101.00	06/96	1101.00	0.00	0.00	1101.00	
000057	08/15/88	1889.92	SLMM	P 07 00	0.00	1889.92	06/96	1889.92	0.00	0.00	1889.92	
000058	11/15/88	1300.00	SLMM	P 07 00	0.00	1300.00	06/96	1300.00	0.00	0.00	1300.00	
000062	09/18/89	2590.00	SLMM	P 10 00	0.00	2590.00	06/01	2590.00	0.00	0.00	2590.00	
000064	11/02/89	280.00	SLMM	P 05 00	0.00	280.00	06/95	280.00	0.00	0.00	280.00	
000066	04/12/90	1492.00	SLMM	P 05 00	0.00	1492.00	06/95	1492.00	0.00	0.00	1492.00	
000067	05/04/90	425.00	SLMM	P 06 08	0.00	425.00	12/96	425.00	0.00	0.00	425.00	
000068	05/04/90	425.00	SLMM	P 05 00	0.00	425.00	06/95	425.00	0.00	0.00	425.00	

Alcoholic Rehabilitation Ctr.  
**DEPRECIATION EXPENSE REPORT**

as of 06/30/2001

SYS No	In Svc Date	Acquired Value	Dep Meth	P Est T Life	Salvage/ Sect 179	Depreciable Basis	Prev Thru	Prior Accum Depreciation	Depreciation This Run	Current Year to Date	Curr Accum Depreciation	Key
000069	05/04/90	425.00	SLMM	P 05 00	0.00	425.00	06/95	425.00	0.00	0.00	425.00	
000070	05/04/90	425.00	SLMM	P 06 07	0.00	425.00	11/96	425.00	0.00	0.00	425.00	
000071	05/04/90	400.00	SLMM	P 09 07	0.00	400.00	06/01	400.00	0.00	0.00	400.00	
000072	05/04/90	400.00	SLMM	P 05 00	0.00	400.00	06/95	400.00	0.00	0.00	400.00	
000073	05/04/90	400.00	SLMM	P 05 00	0.00	400.00	06/95	400.00	0.00	0.00	400.00	
000074	05/04/90	400.00	SLMM	P 05 00	0.00	400.00	06/95	400.00	0.00	0.00	400.00	
000076	06/30/90	154.99	SLMM	P 05 00	0.00	154.99	06/95	154.99	0.00	0.00	154.99	
000085	07/20/90	3005.00	SLMM	P 03 00	0.00	3005.00	06/94	3005.00	0.00	0.00	3005.00	
000086	07/27/90	799.99	SLMM	P 05 00	0.00	799.99	06/96	799.99	0.00	0.00	799.99	
000087	01/23/91	3495.00	SLMM	P 05 00	0.00	3495.00	06/96	3495.00	0.00	0.00	3495.00	
000088	06/26/91	500.00	SLMM	P 05 00	0.00	500.00	06/96	500.00	0.00	0.00	500.00	
000110	03/06/92	3601.00	SLMM	P 05 00	0.00	3601.00	06/01	3420.93	0.00	180.07	3601.00	
000111	07/31/91	250.00	SLMM	P 05 11	0.00	250.00	06/01	250.00	0.00	0.00	250.00	
000112	10/31/91	158.00	SLMM	P 05 00	0.00	158.00	06/01	158.00	0.00	0.00	158.00	
000113	12/15/91	2995.00	SLMM	P 05 00	0.00	2995.00	06/01	2995.00	0.00	0.00	2995.00	
000117	12/31/94	12450.60	SLMM	P 03 00	0.00	12450.60	06/01	12450.60	0.00	0.00	12450.60	
000118	03/31/95	1000.00	SLMM	P 05 00	0.00	1000.00	06/01	1000.00	0.00	0.00	1000.00	
000119	06/30/95	1350.00	SLMM	P 05 00	0.00	1350.00	06/01	1350.00	0.00	0.00	1350.00	
000120	01/31/95	1099.94	SLMM	P 05 00	0.00	1099.94	06/01	1099.94	0.00	0.00	1099.94	
000124	12/31/95	1200.00	SLMM	P 03 00	0.00	1200.00	06/01	1200.00	0.00	0.00	1200.00	
000126	02/01/99	19200.00	SLMM	P 05 00	0.00	19200.00	06/00	5440.00	3840.00	3840.00	9280.00	
000129	11/14/99	476.00	SLMM	P 05 00	0.00	476.00	06/00	55.54	95.20	95.20	150.74	
000130	11/14/99	476.00	SLMM	P 05 00	0.00	476.00	06/00	55.54	95.20	95.20	150.74	
000131	11/14/99	476.00	SLMM	P 05 00	0.00	476.00	06/00	55.54	95.20	95.20	150.74	
000132	11/14/99	430.00	SLMM	P 05 00	0.00	430.00	06/00	50.17	86.00	86.00	136.17	
000133	11/14/99	430.00	SLMM	P 05 00	0.00	430.00	06/00	50.17	86.00	86.00	136.17	
000134	11/14/99	430.00	SLMM	P 05 00	0.00	430.00	06/00	50.17	86.00	86.00	136.17	
000138	11/08/99	5000.00	SLMM	P 07 00	0.00	5000.00	06/00	416.67	714.29	714.29	1130.96	
000140	08/19/99	1949.82	SLMM	P 05 00	0.00	1949.82	06/00	324.97	389.96	389.96	714.93	
000141	08/19/99	1185.89	SLMM	P 05 00	0.00	1185.89	06/00	197.65	237.18	237.18	434.83	
000143	09/09/99	349.97	SLMM	P 05 00	0.00	349.97	06/00	52.50	69.99	69.99	122.49	
000144	09/09/99	179.98	SLMM	P 05 00	0.00	179.98	06/00	27.00	36.00	36.00	63.00	
000146	08/31/99	43.73	SLMM	P 05 00	0.00	43.73	06/00	7.29	8.75	8.75	16.04	
000147	09/30/99	17.89	SLMM	P 05 00	0.00	17.89	06/00	2.68	3.58	3.58	6.26	
000148	11/30/99	3117.48	SLMM	P 05 00	0.00	3117.48	06/00	363.71	623.50	623.50	987.21	
000149	12/31/00	1080.00	SLMM	P 03 00	0.00	1080.00	00/00	0.00	180.00	180.00	180.00	
000151	06/30/01	12633.23	SLMM	P 05 00	0.00	12633.23	00/00	0.00	0.00	0.00	0.00	
000152	04/30/01	6000.00	MF200	P 07 00	0.00	6000.00	00/00	0.00	857.14	857.14	857.14	
Count= 93		-----										
Class: E		-----										
		154361.13			0.00	154361.13		107854.67	7503.99	7684.06	115538.73	
	less disposals	0.00			0.00	0.00		0.00			0.00	
	Net	154361.13			0.00	154361.13		107854.67	7503.99	7684.06	115538.73	
Count= 1		-----										
Class: L		-----										
000123	03/20/95	25910.00	NoDep	R 00 00	0.00	25910.00	06/00	0.00	0.00	0.00	0.00	

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## Alcoholic Rehabilitation Ctr. DEPRECIATION EXPENSE REPORT

as of 06/30/2001

SYS No	In Svc Date	Acquired Value	Dep Meth	P Est T Life	Salvage/ Sect 179	Depreciable Basis	Prev Thru	Prior Accum Depreciation	Depreciation This Run	Current Year to Date	Curr Accum Depreciation	Key
		25910.00			0.00	25910.00		0.00	0.00	0.00	0.00	
	Less disposals	0.00			0.00	0.00		0.00			0.00	
	Net	25910.00			0.00	25910.00		0.00	0.00	0.00	0.00	
000122	03/20/95	60000.00	NoDep	R 00 00	0.00	60000.00	06/00	0.00	0.00	0.00	0.00	
000153	06/15/01	66815.30	SIMM	R 40 00	0.00	66815.30	00/00	0.00	139.20	139.20	139.20	
	Count= 2	-----										
	Class: P											
		126815.30			0.00	126815.30		0.00	139.20	139.20	139.20	
	Less disposals	0.00			0.00	0.00		0.00			0.00	
	Net	126815.30			0.00	126815.30		0.00	139.20	139.20	139.20	
000127	06/01/99	9841.02	SIMM	P 03 00	0.00	9841.02	06/00	546.72	3280.34	3280.34	3827.06	s
	Count= 1	-----										
	Class: V											
		9841.02			0.00	9841.02		546.72	3280.34	3280.34	3827.06	
	Less disposals	0.00			0.00	0.00		0.00			0.00	
	Net	9841.02			0.00	9841.02		546.72	3280.34	3280.34	3827.06	
	Count= 130	-----										
	Grand Total											
		514960.91			0.00	514960.91		218647.09	22722.69	22902.76	241549.85	
	Less disposals	0.00			0.00	0.00		0.00			0.00	
	Net	514960.91			0.00	514960.91		218647.09	22722.69	22902.76	241549.85	
		=====										

----- Calculation Assumptions -----

Book	Short Years	Midquarter Convention	Adjustment Convention
Internal	[N]	[N]	Postrecov.

----- Asset Grouping/Sorting -----

Group: By Class

Include Assets that meet the following conditions:

All FAS Assets

Sort Assets by:

Class in ascending order and report subtotals

