

# Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

**2001**

Open to Public Inspection

**A** For the 2001 calendar year, or tax year period beginning **JUL 1, 2001** and ending **JUN 30, 2002**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>GUIDE DOGS OF THE DESERT</b>	<b>D</b> Employer identification number <b>23-7296531</b>
	Number and street (or P O box if mail is not delivered to street address) <b>PO BOX 1692</b>	<b>E</b> Telephone number <b>(760) 329-6257</b>
	City or town, state or country, and ZIP + 4 <b>PALM SPRINGS, CA 92263</b>	<b>F</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (Specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

Hand I are not applicable to section 527 organizations

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? **N/A**  Yes  No (If "No," attach a list)

**G** Web site ▶ **WWW.GUIDEDOGSOFTHEDESERT.COM**

**J** Organization type (check only one) ▶  501(c) ( **3** ) ◀ (insert no)  4947(a)(1) or  527

**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

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

I Enter 4-digit GEN ▶

**L** Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **1,761,104.**

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

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received				
a	Direct public support	1a	673,932.		
b	Indirect public support	1b			
c	Government contributions (grants)	1c			
d	Total (add lines 1a through 1c) (cash \$ <b>673,932.</b> noncash \$ _____)	1d	673,932.		
2	Program service revenue including government fees and contracts (from Part VII line 9)	2			
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4	668.		
5	Dividends and interest from securities	5	33,806.		
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 sale of assets other than inventory	(A) Securities	1,004,861.	8a	
b	Less cost or other basis and sales expenses	(B) Other	1,059,662.	8b	
c	Gain or (loss) (attach schedule)		-54,801.	8c	
d	Net gain or (loss) (combine line 8c, columns (A) and (B))		STMT 1	8d	-54,801.
9	Special events and activities (attach schedule)				
a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	39,159.		
b	Less direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)		SEE STATEMENT 2	9c	39,159.
10a	Gross sales of inventory, less returns and allowances	10a	8,678.		
b	Less cost of goods sold	10b	26,091.		
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		STMT 3	10c	-17,413.
11	Other revenue (from Part VII line 9)	11			
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	675,351.		
13	Program services (from line 44, column (B))	13	918,994.		
14	Management and general (from line 44, column (C))	14	454,751.		
15	Fundraising (from line 44, column (D))	15	44,400.		
16	Payments to affiliates (attach schedule)	16			
17	Total expenses (add lines 16 and 44, column (A))	17	1,418,145.		
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	-742,794.		
19	Net assets or fund balances at beginning of year (from line 73 column (A))	19	3,506,937.		
20	Other changes in net assets or fund balances (attach explanation)	20	SEE STATEMENT 4		
21	Net assets or fund balances at end of year (combine lines 18, 19 and 20)	21	2,724,375.		

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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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)				
	cash \$ _____ noncash \$ _____				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc	64,346.	0.	64,346.	0.
26	Other salaries and wages	552,948.	453,831.	99,117.	
27	Pension plan contributions				
28	Other employee benefits	50,046.	50,191.	-145.	
29	Payroll taxes	56,405.	43,723.	12,682.	
30	Professional fundraising fees				
31	Accounting fees	5,000.		5,000.	
32	Legal fees	104,532.		104,532.	
33	Supplies	21,309.	14,116.	7,193.	
34	Telephone	18,847.	18,847.		
35	Postage and shipping	7,887.	7,762.	125.	
36	Occupancy				
37	Equipment rental and maintenance	24,765.	6,376.	18,389.	
38	Printing and publications	20,589.		20,589.	
39	Travel	9,026.	9,026.		
40	Conferences, conventions, and meetings				
41	Interest	41,536.		41,536.	
42	Depreciation, depletion, etc (attach schedule)	80,728.	75,668.	5,060.	
43	Other expenses not covered above (itemize)				
a					
b					
c					
d					
e	SEE STATEMENT 5	360,181.	239,454.	76,327.	44,400.
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D) carry these totals to lines 13-15	1,418,145.	918,994.	454,751.	44,400.

**Joint Costs** Check  if you are following SOP 98-2  
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (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**

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)
<b>TRAIN AND PROVIDE GUIDE DOGS TO THE BLIND</b> All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a <b>TRAIN AND PROVIDE GUIDE DOGS TO THE BLIND, INSTRUCT THE BLIND ON THE CARE AND USE OF THE DOGS.</b>	
(Grants and allocations \$ _____)	918,994.
b _____	
(Grants and allocations \$ _____)	
c _____	
(Grants and allocations \$ _____)	
d _____	
(Grants and allocations \$ _____)	
e Other program services (attach schedule)	(Grants and allocations \$ _____)
<b>f Total of Program Service Expenses (should equal line 44, column (B) Program services)</b>	<b>918,994.</b>

**Part IV Balance Sheets**

Note		(A) Beginning of year		(B) End of year	
<i>Where required, attached schedules and amounts within the description column should be for end-of-year amounts only</i>					
Assets	45	Cash - non-interest-bearing	94,427.	45	17,512.
	46	Savings and temporary cash investments	404,282.	46	625,438.
	47 a	Accounts receivable			
		b Less allowance for doubtful accounts		800.	47c
	48 a	Pledges receivable			
		b Less allowance for doubtful accounts			48c
	49	Grants receivable			49
	50	Receivables from officers, directors, trustees and key employees			50
	51 a	Other notes and loans receivable			
		b Less allowance for doubtful accounts			51c
	52	Inventories for sale or use	5,642.	52	4,672.
	53	Prepaid expenses and deferred charges	9,616.	53	16,249.
	54	Investments - securities <b>STMT 6</b>			
		▶ <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	567,177.	54	380,088.
	55 a	Investments - land, buildings, and equipment basis			
	b Less accumulated depreciation			55c	
56	Investments - other			56	
57 a	Land, buildings, and equipment basis	2,517,322.			
	b Less accumulated depreciation	558,510.			
58	Other assets (describe ▶ <b>SEE STATEMENT 7</b> )	2,030,818.	57c	1,958,812.	
		1,068,323.	58	329,265.	
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)	4,181,085.	59	3,332,036.	
Liabilities	60	Accounts payable and accrued expenses	129,267.	60	108,674.
	61	Grants payable		61	
	62	Deferred revenue		62	
	63	Loans from officers, directors, trustees, and key employees		63	
	64 a	Tax-exempt bond liabilities		64a	
		b Mortgages and other notes payable		64b	
	65	Other liabilities (describe ▶ <b>LONG TERM DEBT</b> )	544,881.	65	498,987.
66	<b>Total liabilities</b> (add lines 60 through 65)	674,148.	66	607,661.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67	Unrestricted	2,965,812.	67	2,328,447.
	68	Temporarily restricted	541,125.	68	395,928.
	69	Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
	73	<b>Total net assets or fund balances</b> (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	3,506,937.	73	2,724,375.
	74	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	4,181,085.	74	3,332,036.

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 VI Other Information		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		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		X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year? <span style="float:right">N/A</span>		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80 a	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?		X
b	If "Yes," enter the name of the organization <span style="float:right">▶</span> _____ and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
81 a	Enter direct or indirect political expenditures. See line 81 instructions <span style="float:right">81a</span> 0.		
b	Did the organization file Form 1120-POL for this year?		X
82 a	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?		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 in Part III.) <span style="float:right">82b</span> N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? <span style="float:right">N/A</span>		
85	<b>501(c)(4), (5), or (6) organizations</b>		
a	Were substantially all dues nondeductible by members? <span style="float:right">N/A</span>		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? <span style="float:right">N/A</span> If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
c	Dues, assessments, and similar amounts from members <span style="float:right">85c</span> N/A		
d	Section 162(e) lobbying and political expenditures <span style="float:right">85d</span> N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices <span style="float:right">85e</span> N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) <span style="float:right">85f</span> N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f? <span style="float:right">N/A</span>		
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? <span style="float:right">N/A</span>		
86	<b>501(c)(7) organizations</b>		
a	Initiation fees and capital contributions included on line 12 <span style="float:right">86a</span> N/A		
b	Gross receipts, included on line 12 for public use of club facilities <span style="float:right">86b</span> N/A		
87	<b>501(c)(12) organizations</b>		
a	Gross income from members or shareholders <span style="float:right">87a</span> N/A		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) <span style="float:right">87b</span> N/A		
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		X
89 a	<b>501(c)(3) organizations</b> Enter amount of tax imposed on the organization during the year under section 4911 <span style="float:right">▶</span> 0., section 4912 <span style="float:right">▶</span> 0., section 4955 <span style="float:right">▶</span> 0.		
b	<b>501(c)(3) and 501(c)(4) organizations</b> 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		X
c	Enter amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <span style="float:right">▶</span> 0.		
d	Enter amount of tax on line 89c, above, reimbursed by the organization <span style="float:right">▶</span> 0.		
90 a	List the states with which a copy of this return is filed <span style="float:right">▶</span> CALIFORNIA		
b	Number of employees employed in the pay period that includes March 12, 2001 <span style="float:right">90b</span> 23		
91	The books are in care of <span style="float:right">▶</span> GUIDE DOGS OF THE DESERT Telephone no <span style="float:right">▶</span> 760-329-6257		
	Located at <span style="float:right">▶</span> P.O. BOX 1692 PALM SPRINGS, CA ZIP + 4 <span style="float:right">▶</span> 92263		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <span style="float:right">▶</span> <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <span style="float:right">▶</span> 92 N/A		

**Part VII Analysis of Income-Producing Activities** (See Specific Instructions on page 32)

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a _____					
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			14	668.	
96 Dividends and interest from securities			14	33,806.	
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			18	-54,801.	
101 Net income or (loss) from special events			02	39,159.	
102 Gross profit or (loss) from sales of inventory					-17,413.
103 Other revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		18,832.	-17,413.
105 Total (add line 104, columns (B) (D) and (E))					1,419.

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 32)

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)
102	SALE OF MERCHANDISE TO EDUCATE THE PUBLIC IN THE USE OF DOGS TO AID THE BLIND AND THE HANDICAPPED.

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See Specific Instructions on page 33)

(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 page 33)

- (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)

accompanying schedules and statements and to the best of my knowledge and belief, it is true information of which preparer has any knowledge

7-03  President  
Date Type or print name and title



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

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

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

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

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting** N/A  
 Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)					
<b>16</b> Membership fees received					
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
<b>18</b> 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					
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> 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.					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.					
<b>23</b> Total of lines 15 through 22	0.	0.	0.	0.	0.
<b>24</b> Line 23 minus line 17					
<b>25</b> Enter 1% of line 23					

**26 Organizations described on lines 10 or 11**

**a** Enter 2% of amount in column (e), line 24 ▶ 26a N/A

**b** Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts. ▶ 26b N/A

**c** Total support for section 509(a)(1) test. Enter line 24, column (e). ▶ 26c N/A

**d** Add: Amounts from column (e) for lines 18 \_\_\_\_\_ 19 \_\_\_\_\_  
 22 \_\_\_\_\_ 26b \_\_\_\_\_ ▶ 26d N/A

**e** Public support (line 26c minus line 26d total) ▶ 26e N/A

**f** Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶ 26f N/A %

**27 Organizations described on line 12**

**a** For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:

(2000)	(1999)	(1998)	(1997)
--------	--------	--------	--------

**b** For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:

(2000)	(1999)	(1998)	(1997)
--------	--------	--------	--------

**c** Add: Amounts from column (e) for lines 15 \_\_\_\_\_ 16 \_\_\_\_\_  
 17 \_\_\_\_\_ 20 \_\_\_\_\_ 21 \_\_\_\_\_ ▶ 27c N/A

**d** Add: Line 27a total \_\_\_\_\_ and line 27b total \_\_\_\_\_ ▶ 27d N/A

**e** Public support (line 27c total minus line 27d total) ▶ 27e N/A

**f** Total support for section 509(a)(2) test. Enter amount on line 23, column (e). ▶ 27f N/A

**g** Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶ 27g N/A %

**h** Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶ 27h N/A %

**28 Unusual Grants** For an organization described in line 10, 11, or 12, that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

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

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

		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?	X	
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?	X	
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 ) <b>STUDENT SOLICITATION IS CONDUCTED THROUGH BLIND SERVICE ORGANIZATIONS AND CALIF. DEPT. OF REHABILITATION</b>	X	
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c	Copies of all catalogues, brochures, announcements and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
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 )	X	
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		X
b	Admissions policies?		X
c	Employment of faculty or administrative staff?		X
d	Scholarships or other financial assistance?		X
e	Educational policies?		X
f	Use of facilities?		X
g	Athletic programs?		X
h	Other extracurricular activities? If you answered "Yes" to any of the above please explain (if you need more space, attach a separate statement )		X
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		X
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		X
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	X	

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

N/A

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

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred )		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
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 - If the amount on line 40 is -                      The lobbying nontaxable amount is - Not over \$500 000                                      20% of the amount on line 40 Over \$500 000 but not over \$1,000 000                      \$100 000 plus 15% of the excess over \$500 000 Over \$1 000 000 but not over \$1 500 000                      \$175 000 plus 10% of the excess over \$1 000,000 Over \$1,500 000 but not over \$17 000 000                      \$225,000 plus 5% of the excess over \$1,500 000 Over \$17 000 000                                      \$1 000 000	41	
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 11 of the instructions )

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(a))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(a))				0.
50	Grassroots lobbying expenditures				0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions )

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 )			0.

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



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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Supplementary Information for  
line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No 1545-0047

**2001**

Name of organization

GUIDE DOGS OF THE DESERT

Employer identification number

23-7296531

Organization type (check one)

Filers of

Section

Form 990 or 990 EZ

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

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

527 political organization

Form 990 PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

Check if your organization is covered by the **General rule** or a **Special rule** (Note Only a section 501(c)(7), (8), or (10) organization can check box(es) for both the General rule and a Special rule-see instructions)

**General Rule-**

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

**Special Rules-**

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

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

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

**Caution** Organizations that are not covered by the General rule and/or the Special rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2001)

Name of organization <b>GUIDE DOGS OF THE DESERT</b>	Employer identification number <b>23-7296531</b>
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**Part I Contributors** (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 7,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
2		\$ 82,957.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
3		\$ 12,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
4		\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
5		\$ 42,825.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
6		\$ 9,061.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

GUIDE DOGS OF THE DESERT

23-7296531

**Part I Contributors** (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>7</u>		\$ <u>13,652.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>8</u>		\$ <u>89,115.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>9</u>		\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>10</u>		\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>11</u>		\$ <u>60,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>12</u>		\$ <u>55,566.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

GUIDE DOGS OF THE DESERT

23-7296531

**Part I Contributors** (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>13</u>		\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>14</u>		\$ <u>5,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>15</u>		\$ <u>101,831.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>16</u>		\$ <u>16,017.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>17</u>		\$ <u>22,200.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>18</u>		\$ <u>15,125.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

GUIDE DOGS OF THE DESERT

23-7296531

**Part I Contributors** (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19		\$ 6,275.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
20		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
21		\$ 5,166.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

**GUIDE DOGS**  
**Depreciation Expense [Depreciation]**  
**GAAP**  
**For the Period July 1, 2001 to June 30, 2002**

Asset ID	Placed in Service	Depr Meth/Conv	Life Yr Mo	Book Cost	Depreciation This Period	YEAR TO DATE				
						Beginning Accum Depr	Current Depreciation	Net Sec 179/179A	Net Additions Deletions	Ending Accum Depr
<i>Class 1610</i>										
000001	LAND									
	07/01/1974	SL100FM	0 0	24 564 00	0 00	0 00	0 00	0 00	0 00	0 00
000043	LAND 5 ACRES									
	02/17/1995	None	0 0	30 893 00	0 00	0 00	0 00	0 00	0 00	0 00
000070	DONATED LOT									
	07/15/1996	SL100FM	0 0	12 000 00	0 00	0 00	0 00	0 00	0 00	0 00
000090	LAND VERNON AVE HOUSE									
	09/17/1997	None	0 0	6 000 00	0 00	0 00	0 00	0 00	0 00	0 00
000169	DONTATED LOTS									
	09/23/1998	None	0 0	25 000 00	0 00	0 00	0 00	0 00	0 00	0 00
<i>Subtotal 1610 (5)</i>				98,457 00	0 00	0 00	0 00	0 00	0 00	0 00
<i>Class 1620</i>										
000002	BUILDING									
	07/01/1974	SL100FM	30 0	65,363 00	2,178 77	58,826 79	2,178 77	0 00	0 00	61 005 56
000003	BUILDING ADDITION									
	01/01/1981	SL100FM	30 0	8,426 00	280 87	5 757 83	280 87	0 00	0 00	6,038 70
000004	BUILDING ADDITION									
	06/30/1985	SL100FM	30 0	67,550 00	2 251 67	36,214 36	2,251 67	0 00	0 00	38,466 03
000005	BATHROOM REMODEL									
	03/01/1988	SL100FM	30 0	2,380 00	79 33	1 057 73	79 33	0 00	0 00	1,137 06
000006	OFFICE REMODEL									
	03/01/1989	SL100FM	30 0	15,402 00	513 40	6 331 93	513 40	0 00	0 00	6,845 33
000007	CARPETING									
	02/01/1989	SL100FM	5 0	1,187 00	0 00	1 187 00	0 00	0 00	0 00	1 187 00
000008	KENNEL IMPROVEMENTS									
	05/01/1989	SL100FM	10 0	4 430 00	0 00	4 430 00	0 00	0 00	0 00	4 430 00
000009	KITCHEN REMODEL									
	07/01/1989	SL100FM	30 0	9,840 00	328 00	3,936 00	328 00	0 00	0 00	4 264 00
000010	FRONT WALL & COLUMN									
	08/01/1989	SL100FM	30 0	1,700 00	56 67	675 31	56 67	0 00	0 00	731 98
000011	CARPETING									
	07/01/1989	SL100FM	5 0	671 00	0 00	671 00	0 00	0 00	0 00	671 00
000012	OFFICE SHELVES									
	01/01/1990	SL100FM	30 0	780 00	26 00	299 00	26 00	0 00	0 00	325 00
000013	LAUNDRY ROOM									
	09/12/1991	SL100FM	30 0	4,983 00	166 10	1,633 32	166 10	0 00	0 00	1,799 42
000014	BLINDS									
	09/18/1991	SL100FM	7 0	1 291 00	0 00	1 291 00	0 00	0 00	0 00	1,291 00
000015	SHOWER DOOR									
	09/20/1991	SL100FM	7 0	331 00	0 00	331 00	0 00	0 00	0 00	331 00
000016	OFFICE									
	09/27/1991	SL100FM	30 0	1,609 00	53 63	527 36	53 63	0 00	0 00	580 99
000017	PAINT									
	09/30/1991	SL100FM	7 0	658 00	0 00	658 00	0 00	0 00	0 00	658 00
000018	DORM FLOORING									
	10/25/1991	SL100FM	30 0	2,151 00	71 70	699 08	71 70	0 00	0 00	770 78
000019	PARKING LOT									
	01/27/1992	SL100FM	15 0	3 100 00	206 67	1 963 36	206 67	0 00	0 00	2 170 03
000020	STORAGE ROOM									
	03/25/1992	SL100FM	30 0	1,345 00	44 83	418 41	44 83	0 00	0 00	463 24
000031	TITLE FEES-NEW OFFIC									
	06/30/1996	SL100FM	30 0	500 00	16 67	84 74	16 67	0 00	0 00	101 41
000044	KENNEL BUILDING									
	02/17/1995	SL100FM	30 0	43,853 00	1,461 77	9 379 69	1 461 77	0 00	0 00	10,841 46
000045	OFFICE ADDTN (PLANS)									
	06/30/1995	SL100FM	30 0	1,350 00	45 00	273 75	45 00	0 00	0 00	318 75
000046	OFFICE PLAN APPROVAL									
	06/30/1995	SL100FM	30 0	1 168 00	38 93	236 82	38 93	0 00	0 00	275 75
000047	OFFICE ADDITION									
	06/30/1995	SL100FM	30 0	1,900 00	63 33	385 26	63 33	0 00	0 00	448 59
000048	WATER HEATER									
	12/16/1994	SL100FM	7 0	1,382 00	82 25	1,299 75	82 25	0 00	0 00	1 382 00
000053	BUILDING									
	06/30/1995	SL100FM	30 0	1,374 00	45 80	278 62	45 80	0 00	0 00	324 42

Asset ID	Placed in Service	Depr Meth/Conv	Life Yr Mo	Book Cost	Depreciation This Period	YEAR TO DATE					
						Beginning Accum Depr	Current Depreciation	Net Sec 179/179A	Net Additions Deletions	Ending Accum Depr	
<i>Class 1620</i>											
000054	BUILDING										
	06/30/1995	SL100FM	30 0	1,200 00	40 00	243 33	40 00	0 00	0 00	283 33	
000055	NEW OFFICES										
	01/01/1996	SL100FM	30 0	35 951 00	1,198 37	6,591 03	1,198 37	0 00	0 00	7,789 40	
000056	FLOORING										
	08/01/1996	SL100FM	7 0	2,174 00	310 57	1 526 97	310 57	0 00	0 00	1,837 54	
000064	AIR CONDITIONER										
	11/07/1995	SL100FM	7 0	1,177 00	168 14	952 80	168 14	0 00	0 00	1 120 94	
000067	GRAVEL FOR KENNEL										
	01/09/1997	SL100FM	7 0	1,083 00	154 71	696 20	154 71	0 00	0 00	850 91	
000073	PAVING										
	01/23/1998	SL100FM	20 0	2,850 00	142 50	498 75	142 50	0 00	0 00	641 25	
000074	MISING SYSTEM										
	05/28/1998	SL100FM	40 0	2 671 00	66 78	211 47	66 78	0 00	0 00	278 25	
000075	VERNON AVE HOUSE										
	09/17/1997	SL100FM	40 0	35 846 00	896 15	3 435 24	896 15	0 00	0 00	4 331 39	
000089	NEW SCHOOL										
	09/01/1997	SL100FM	40 0	1 505,546 10	37 638 65	144,281 49	37,638 65	0 00	0 00	181 920 14	
000180	KENNEL FACILITY										
	03/31/1999	SL100FM	40 0	262,971 92	6 574 30	15,340 03	6,574 30	0 00	0 00	21 914 33	
000208	700 sq ft SIDEWALK										
	09/22/1999	SL100FM	40 0	1,500 00	37 50	68 75	37 50	0 00	0 00	106 25	
000211	FENCE										
	03/22/2000	SL100FM	40 0	1 875 00	46 88	62 51	46 88	0 00	0 00	109 39	
<i>Subtotal 1620 (38)</i>				2,099,569 02	55 285 94	312,755 68	55,285 94	0 00	0 00	368,041 62	
<i>Class 1630</i>											
000023	FURNITURE & FIXTURES										
	07/01/1974	SL100FM	10 0	28,719 00	0 00	28 719 00	0 00	0 00	0 00	28,719 00	
000026	FURNITURE										
	06/01/1984	SL100FM	5 0	470 00	0 00	470 00	0 00	0 00	0 00	470 00	
000027	ENGRAVING MACHINE										
	06/01/1988	SL100FM	7 0	2,000 00	0 00	2,000 00	0 00	0 00	0 00	2 000 00	
000028	TV/VCR										
	12/01/1989	SL100FM	7 0	420 00	0 00	415 00	0 00	0 00	0 00	415 00	
000029	BAR STOOLS (4)										
	02/01/1990	SL100FM	7 0	411 00	0 00	411 00	0 00	0 00	0 00	411 00	
000030	MATTRESSES (7)										
	08/17/1990	SL100FM	7 0	1 206 00	0 00	1 206 00	0 00	0 00	0 00	1 206 00	
000057	FURNITURE										
	11/15/1995	SL100FM	7 0	1 835 00	262 14	1,485 46	262 14	0 00	0 00	1 747 60	
000058	CEILING FANS										
	11/15/1996	SL100FM	7 0	349 00	49 86	232 68	49 86	0 00	0 00	282 54	
000059	BLINDS										
	02/07/1996	SL100FM	7 0	216 00	30 86	167 16	30 86	0 00	0 00	198 02	
000060	WASHER/DRYER										
	03/13/1996	SL100FM	7 0	1,077 00	153 86	820 59	153 86	0 00	0 00	974 45	
000068	CAMCORDER										
	06/30/1997	SL100FM	5 0	1,512 00	277 20	1 234 80	277 20	0 00	0 00	1,512 00	
000076	BEDS										
	12/05/1997	SL100FM	10 0	556 00	55 60	199 23	55 60	0 00	0 00	254 83	
000077	ORGAN										
	12/15/1997	SL100FM	10 0	1,200 00	120 00	430 00	120 00	0 00	0 00	550 00	
000078	WORKTABLE										
	01/23/1998	SL100FM	10 0	171 00	17 10	59 85	17 10	0 00	0 00	76 95	
000079	WASHERS & DRYERS										
	02/13/1998	SL100FM	10 0	2,963 00	296 30	1 012 36	296 30	0 00	0 00	1,308 66	
000164	DONATED BEDS, TABLES & CHAIRS										
	09/01/1997	SL100FM	10 0	30 000 00	3,000 00	11,500 00	3 000 00	0 00	0 00	14 500 00	
000165	DONATED ARTWORK										
	09/01/1997	SL100FM	10 0	13 700 00	1,370 00	5 251 67	1,370 00	0 00	0 00	6 621 67	
000166	DONATED REFRIGERATORS										
	09/01/1997	SL100FM	10 0	500 00	50 00	191 67	50 00	0 00	0 00	241 67	
000167	DONATED DRYERS										
	09/01/1997	SL100FM	10 0	700 00	70 00	268 33	70 00	0 00	0 00	338 33	
000168	DONATED COUCHES										
	09/01/1997	SL100FM	10 0	500 00	50 00	191 67	50 00	0 00	0 00	241 67	
000170	DOG CRATES										
	06/21/1999	SL100FM	10 0	499 52	49 95	104 06	49 95	0 00	0 00	154 01	
000171	WAHING MACHINE--DONATED										
	07/31/1998	SL100FM	10 0	343 72	34 37	103 11	34 37	0 00	0 00	137 48	

Asset ID	Placed in Service	Depr Meth/Conv	Life Yr Mo	Book Cost	Depreciation This Period	YEAR TO DATE				
						Beginning Accum Depr	Current Depreciation	Net Sec 179/179A	Net Additions Deletions	Ending Accum Depr
<i>Class 1630</i>										
000172	CAMERA									
	08/26/1998	SL100FM	10 0	910 49	91 05	265 56	91 05	0 00	0 00	356 61
000173	PHONES@KENNEL									
	09/30/1998	SL100FM	10 0	740 00	74 00	209 67	74 00	0 00	0 00	283 67
000174	DOG SCALE									
	12/30/1998	SL100FM	10 0	695 00	69 50	179 54	69 50	0 00	0 00	249 04
000181	LASER JET PRINTER									
	05/29/1999	SL100FM	10 0	200 00	20 00	43 33	20 00	0 00	0 00	63 33
000182	OFFICE FURNITURE									
	06/01/1999	SL100FM	10 0	760 00	76 00	158 33	76 00	0 00	0 00	234 33
000183	COMPUTER									
	06/14/1999	SL100FM	10 0	751 00	75 10	156 46	75 10	0 00	0 00	231 56
000192	DRAPES									
	09/22/1999	SL100FM	10 0	1 907 82	190 78	349 77	190 78	0 00	0 00	540 55
000193	DRAPES									
	10/18/1999	SL100FM	10 0	1,807 82	180 78	316 37	180 78	0 00	0 00	497 15
000194	AUDIBLE PEDESTRIAN SIGNS									
	12/14/1999	SL100FM	10 0	1,310 24	131 02	207 45	131 02	0 00	0 00	338 47
000195	DRAPES									
	01/31/2000	SL100FM	10 0	673 00	67 30	100 95	67 30	0 00	0 00	168 25
000196	60" TELEVISION									
	03/03/2000	SL100FM	10 0	4,620 00	462 00	616 00	462 00	0 00	0 00	1 078 00
000197	15 6' ROUND TABLES									
	03/24/2000	SL100FM	10 0	1,615 44	161 54	215 39	161 54	0 00	0 00	376 93
000198	DONATED FURNITURE									
	02/03/2000	SL100FM	10 0	600 00	60 00	85 00	60 00	0 00	0 00	145 00
000199	DONATED DOME TENT									
	04/25/2000	SL100FM	10 0	123 91	12 39	15 49	12 39	0 00	0 00	27 88
000200	TABLES									
	04/25/2000	SL100FM	10 0	1 076 96	107 70	134 62	107 70	0 00	0 00	242 32
000201	DONATED PIANO									
	06/06/2000	SL100FM	10 0	2,000 00	200 00	216 67	200 00	0 00	0 00	416 67
000210	DRAPES									
	03/24/2000	SL100FM	10 0	673 00	67 30	89 73	67 30	0 00	0 00	157 03
000212	MISC									
	12/08/1999	SL100FM	10 0	484 88	48 49	76 77	48 49	0 00	0 00	125 26
<i>Subtotal 1630 (40)</i>				110,297 80	7 982 19	59 910 74	7,982 19	0 00	0 00	67,892 93
<i>Class 1640</i>										
000021	PLANTS									
	07/01/1974	SL100FM	30 0	3 500 00	116 67	3 150 09	116 67	0 00	0 00	3 266 76
000022	SIDEWALKS									
	03/19/1990	SL100FM	30 0	25 000 00	833 33	9 444 41	833 33	0 00	0 00	10,277 74
000080	TREES									
	02/18/1998	SL100FM	20 0	540 00	27 00	92 25	27 00	0 00	0 00	119 25
<i>Subtotal 1640 (3)</i>				29,040 00	977 00	12,686 75	977 00	0 00	0 00	13 663 75
<i>Class 1650</i>										
000033	1984 DODGE VAN									
	10/01/1985	SL100FM	5 0	9 153 00	0 00	9,153 00	0 00	0 00	0 00	9 153 00
000034	MICRO BUS									
	11/13/1986	SL100FM	5 0	2 000 00	0 00	2,000 00	0 00	0 00	0 00	2,000 00
000061	1991 DODGE VAN									
	02/29/1996	SL100FM	5 0	10 715 00	0 00	10,715 00	0 00	0 00	0 00	10,715 00
000062	1995 DODGE VAN									
	02/29/1996	SL100FM	5 0	19,465 00	0 00	19 465 00	0 00	0 00	0 00	19,465 00
000081	GOLF CART									
	12/15/1997	SL100FM	10 0	1,000 00	100 00	358 33	100 00	0 00	0 00	458 33
000082	GOLF CART									
	12/15/1997	SL100FM	10 0	1,200 00	120 00	430 00	120 00	0 00	0 00	550 00
000083	BUS									
	02/16/1998	SL100FM	10 0	17 976 00	1,797 60	6,141 80	1,797 60	0 00	0 00	7,939 40
000084	GOLF CART									
	03/13/1998	SL100FM	10 0	750 00	75 00	250 00	75 00	0 00	0 00	325 00
000163	1984 TOYOTA VAN									
	05/27/1998	SL100FM	10 0	1 000 00	100 00	316 67	100 00	0 00	0 00	416 67
000184	1999 FORD ECONOLINE VAN									
	06/28/2000	SL100FM	5 0	22,300 00	4,460 00	4,831 67	4 460 00	0 00	0 00	9,291 67
000185	1990 FORD E-350 BUS									
	06/06/2000	SL100FM	5 0	7,000 00	1,400 00	1,516 67	1,400 00	0 00	0 00	2,916 67

Asset ID	Placed in Service	Depr Meth/Conv	Life Yr Mo	Book Cost	Depreciation This Period	YEAR TO DATE				
						Beginning Accum Depr	Current Depreciation	Net Sec 179/179A	Net Additons Deletions	Ending Accum Depr
<i>Class 1650</i>										
000187	1990 FORD E 350 BUS									
	06/06/2000	SL100FM	5 0	7 000 00	1 400 00	1 516 67	1,400 00	0 00	0 00	2,916 67
000213	DONATED GOLF CART									
	05/22/2000	SL100FM	10 0	1,500 00	150 00	175 00	150 00	0 00	0 00	325 00
000214	DONATED GOLF CARTS (2)									
	12/01/1999	SL100FM	10 0	5,000 00	500 00	791 67	500 00	0 00	0 00	1 291 67
000215	NEW ENGINE FOR BUS									
	10/20/1999	SL100FM	10 0	10,319 75	1,031 98	1 805 96	1,031 98	0 00	0 00	2,837 94
000218	Auto part replacement									
	01/01/2001	SL100FM	10 0	2 882 31	288 23	144 12	288 23	0 00	0 00	432 35
<i>Subtotal 1650 (16)</i>				119,261 06	11 422 81	59 611 56	11 422 81	0 00	0 00	71,034 37
<i>Class 1670</i>										
000036	DESK									
	02/10/1989	SL100FM	10 0	316 00	0 00	316 00	0 00	0 00	0 00	316 00
000038	LABEL MACHINE									
	08/17/1990	SL100FM	10 0	5 000 00	0 00	5 000 00	0 00	0 00	0 00	5 000 00
000039	COMPUTER									
	12/20/1990	SL100FM	5 0	2,461 00	0 00	2 420 00	0 00	0 00	0 00	2 420 00
000040	TAPE BACKUP & PRINTR									
	04/16/1992	SL100FM	5 0	1 403 00	0 00	1,382 00	0 00	0 00	0 00	1,382 00
000041	SOFTWARE									
	12/30/1992	SL100FM	5 0	564 00	0 00	564 00	0 00	0 00	0 00	564 00
000042	COMPUTER SOFTWARE									
	06/30/1993	SL100FM	5 0	2 780 00	0 00	2,780 00	0 00	0 00	0 00	2,780 00
000049	LASER PRINTER									
	06/02/1995	SL100FM	5 0	1 200 00	0 00	1 200 00	0 00	0 00	0 00	1 200 00
000050	COMPUTER NETWORK									
	06/04/1995	SL100FM	5 0	3 942 00	0 00	3 942 00	0 00	0 00	0 00	3,942 00
000051	PHONE SYSTEM									
	01/25/1995	SL100FM	5 0	3 693 00	0 00	3 693 00	0 00	0 00	0 00	3 693 00
000052	WELLS OFFICE MACHINE									
	05/03/1995	SL100FM	5 0	727 00	0 00	727 00	0 00	0 00	0 00	727 00
000063	PHONE									
	11/02/1995	SL100FM	5 0	458 00	0 00	458 00	0 00	0 00	0 00	458 00
000066	PAY PHONE									
	01/24/1996	SL100FM	5 0	1,100 00	0 00	1,100 00	0 00	0 00	0 00	1,100 00
000069	2 COMPUTERS									
	07/03/1996	SL100FM	5 0	1 500 00	0 00	1 500 00	0 00	0 00	0 00	1,500 00
000175	FAX									
	12/28/1998	SL100FM	10 0	215 49	21 55	55 67	21 55	0 00	0 00	77 22
000176	PHONES									
	04/02/1999	SL100FM	10 0	200 00	20 00	45 00	20 00	0 00	0 00	65 00
000177	COMPUTER									
	04/26/1999	SL100FM	10 0	953 95	95 40	214 65	95 40	0 00	0 00	310 05
000202	OKIDATA PRINTER									
	01/27/2000	SL100FM	5 0	640 70	128 14	192 21	128 14	0 00	0 00	320 35
000203	DONATED COMPUTER EQUIPMENT									
	02/18/2000	SL100FM	5 0	4 500 00	900 00	1,275 00	900 00	0 00	0 00	2 175 00
000204	PHOTO COPIER									
	02/29/2000	SL100FM	5 0	11,341 53	2 268 31	3,213 44	2,268 31	0 00	0 00	5,481 75
000205	COMPUTER EQUIPMANT									
	01/12/2000	SL100FM	5 0	3 838 31	767 66	1,151 49	767 66	0 00	0 00	1,919 15
000206	COMPUTER EQUIPMENT									
	01/12/2000	SL100FM	5 0	680 00	136 00	204 00	136 00	0 00	0 00	340 00
000207	COMPUTER EQUIPMENT									
	04/21/2000	SL100FM	5 0	275 00	55 00	68 75	55 00	0 00	0 00	123 75
000219	COMPUTER SYSTEM (PROLIANT)									
	04/30/2002	SL100FM	10 0	7,650 12	191 25	0 00	191 25	0 00	0 00	191 25
000220	MONITOR									
	05/31/2002	SL100FM	10 0	1 072 11	17 87	0 00	17 87	0 00	0 00	17 87
<i>Subtotal 1670 (24)</i>				56 511 21	4,601 18	31 502 21	4,601 18	0 00	0 00	36,103 39
<i>Class 1700</i>										
000071	WALKIE TALKIES/RADIO									
	06/27/1997	SL100FM	5 0	485 00	88 92	396 08	88 92	0 00	0 00	485 00
000086	PHONES									
	11/21/1997	SL100FM	10 0	824 00	82 40	302 13	82 40	0 00	0 00	384 53
000087	PHONES									
	11/21/1997	SL100FM	10 0	431 00	43 10	158 03	43 10	0 00	0 00	201 13

Asset ID	Placed in Service	Depr Meth/Conv	Life Yr Mo	Book Cost	Depreciation This Period	YEAR TO DATE				
						Beginning Accum Depr	Current Depreciation	Net Sec 179/179A	Net Additions Deletions	Ending Accum Depr
<i>Class 1700</i>										
000088	2 UHF RADIOS 12/01/1997	SL100FM	10 0	501 00	50 10	179 53	50 10	0 00	0 00	229 63
000178	CELL PHONE 03/29/1999	SL100FM	10 0	206 20	20 62	48 11	20 62	0 00	0 00	68 73
000179	PHONES 04/14/1999	SL100FM	10 0	323 23	32 32	72 72	32 32	0 00	0 00	105 04
000209	PHONE SOLUTIONS 05/01/2000	SL100FM	10 0	1,414 72	141 47	165 05	141 47	0 00	0 00	306 52
<i>Subtotal 1700 (7)</i>				4 185 15	458 93	1 321 65	458 93	0 00	0 00	1,780 58
<b>Grand Total</b>				<b>2,517,321 24</b>	<b>80,728 05</b>	<b>477,788 59</b>	<b>80,728 05</b>	<b>0 00</b>	<b>0 00</b>	<b>558,516 64</b>

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**FORM 990**                      **GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES**                      **STATEMENT**      **1**


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DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
FRANK ADJ US GOV'T SEC FD	190,198.	190,401.	0.	-203.
BRISTOL MYERS	1,056.	1,049.	0.	7.
MERRILL LYNCH A/C #22D-04420	2,398.	2,503.	0.	-105.
GUARANTY BROKERAGE A/C #36492504	4,067.	5,614.	0.	-1,547.
GUARANTY BROKERAGE A/C #36492491	807,142.	860,095.	0.	-52,953.
TO FORM 990, PART I, LINE 8	<u>1,004,861.</u>	<u>1,059,662.</u>	<u>0.</u>	<u>-54,801.</u>

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**FORM 990**                                      **SPECIAL EVENTS AND ACTIVITIES**                                      **STATEMENT**      **2**


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DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
SPECIAL FUNDRAISING EVENTS	39,159.		39,159.		39,159.
TO FM 990, PART I, LINE 9	<u>39,159.</u>		<u>39,159.</u>		<u>39,159.</u>

FORM 990

INCOME AND COST OF GOODS SOLD  
INCLUDED ON PART I, LINE 10

STATEMENT 3

## INCOME

1. GROSS RECEIPTS . . . . .	8,678	
2. RETURNS AND ALLOWANCES . . . . .		
3. LINE 1 LESS LINE 2 . . . . .		8,678
4. COST OF GOODS SOLD (LINE 13) . . . . .	26,091	
5. GROSS PROFIT (LINE 3 LESS LINE 4) . . . . .		-17,413

## COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR . . . . .	5,642	
7. MERCHANDISE PURCHASED . . . . .		
8. COST OF LABOR . . . . .		
9. MATERIALS AND SUPPLIES . . . . .	25,121	
10. OTHER COSTS . . . . .		
11. ADD LINES 6 THROUGH 10 . . . . .		30,763
12. INVENTORY AT END OF YEAR . . . . .	4,672	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12). . . . .		26,091

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**FORM 990**                      **OTHER CHANGES IN NET ASSETS OR FUND BALANCES**                      **STATEMENT**                      **4**


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DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS	-16,603.
CHANGE IN VALUE OF CHARITABLE TRUST	-23,165.
TOTAL TO FORM 990, PART I, LINE 20	-39,768.

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**FORM 990**    **OTHER EXPENSES**    **STATEMENT**                      **5**


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DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
WORKERS COMP INSURANCE	37,617.	37,617.		
LIABILITY INSURANCE	35,137.	35,137.		
VETERINARIAN	37,524.	37,524.		
DOG FOOD	10,476.	10,476.		
PUPPY EXPENSES	4,093.	4,093.		
AUTO EXPENSES	26,776.	26,776.		
CLASS EXPENSES	39,561.	39,561.		
UTILITIES	32,450.	32,450.		
ADVERTISING	1,127.	1,127.		
MISCELLANEOUS	112,008.	8,636.	58,972.	44,400.
DUES AND SUBSCRIPTIONS	2,687.		2,687.	
LICENSE AND FEES	11,632.	6,057.	5,575.	
AWARDS AND GIFTS	5,238.		5,238.	
BANK CHARGES	2,403.		2,403.	
AMORTIZATION OF LOAN FEES	1,452.		1,452.	
TOTAL TO FM 990, LN 43	360,181.	239,454.	76,327.	44,400.

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FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 6

SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
STOCKS & MUTUAL FUNDS			380,088.		380,088.
TO 990, LN 54 COL B			380,088.		380,088.

FORM 990 OTHER ASSETS STATEMENT 7

DESCRIPTION	AMOUNT
LOAN COSTS - NET CONTRIBUTIONS RECEIVABLE-CHARITABLE REMAINDER TRUSTS	3,508.
BEQUEST RECEIVABLE	240,001.
PLEDGE RECEIVABLE	68,843.
	16,913.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	329,265.

FORM 990 OTHER REVENUE NOT INCLUDED ON FORM 990 STATEMENT 8

DESCRIPTION	AMOUNT
COST OF GOODS SOLD	26,091.
UNREALIZED LOSSES	-16,603.
TOTAL TO FORM 990, PART IV-A	9,488.

FORM 990 OTHER EXPENSES NOT INCLUDED ON FORM 990 STATEMENT 9

DESCRIPTION	AMOUNT
COST OF GOODS SOLD	26,091.
CHANGE IN VALUE OF CRT	23,165.
TOTAL TO FORM 990, PART IV-B	49,256.

FORM 990

PART V - LIST OF OFFICERS, DIRECTORS,  
TRUSTEES AND KEY EMPLOYEES

STATEMENT 10

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
KAREN REYNOLDS PALM SPRINGS, CA	PRESIDENT 10	0.	0.	0.
LINDA FLORES SAN DIEGO, CA	VICE PRESIDENT 2	0.	0.	0.
FRANCES WHITNEY RIVERSIDE, CA	VICE PRESIDENT 2	0.	0.	0.
PATRICIA CRAINE PALM SPRINGS, CA	VICE PRESIDENT 2	0.	0.	0.
STEVE FEDOR YUCAIPA, CA	SECRETARY 10	0.	0.	0.
JERRY LONDON PALM SPRINGS, CA	TREASURER 10	0.	0.	0.
JOSEPH W. HAYDEN PALM SPRINGS, CA	DIRECTOR 2	0.	0.	0.
AL ALLEN HEMET, CA	DIRECTOR 2	0.	0.	0.
JANET ROUSE EL CAJON, CA	DIRECTOR 2	0.	0.	0.
JEAN TEAGUE EL CAJON, CA	DIRECTOR 2	0.	0.	0.
DWIGHT WINANS HEMET, CA	DIRECTOR 2	0.	0.	0.

GUIDE DOGS OF THE DESERT

23-7296531

CARL DECKER	DIRECTOR			
PALM SPRINGS, CA	2	0.	0.	0.
FRANK PERSINA	DIRECTOR			
DESERT HOT SPRINGS, CA	2	0.	0.	0.
BRIAN VAN DUSEN	DIRECTOR			
YUCAIPA, CA	2	0.	0.	0.
CYNTHIA WOODS	DIRECTOR			
PHOENIX, AZ	2	0.	0.	0.
DONALD ROBINSON	EXECUTIVE DIRECTOR			
WHITEWATER, CA	40+	64,346.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		<u>64,346.</u>	<u>0.</u>	<u>0.</u>