

Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2002

Department of the Treasury
Internal Revenue ServiceOpen to Public
Inspection

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

A For the 2002 calendar year, or tax year beginning

and ending

Check if applicable

Address change

Name change

Initial return

Final return

Amended return

Application pending

Please
use IRS
label or
print or
type
See
Specific
Instruc-
tions

C Name of organization

NEW HORIZONS RESOURCES, INC

Number and street (or P.O. box if mail is not delivered to street address)

21 VAN WAGNER ROAD

City or town

POUGHKEEPSIE

State or country

NY

Room/suite

ZIP + 4

12603

D Employer identification number

52-4862107

E Telephone number

(845) 473-3000

F Accounting method

☐ Cash☒ Accrual☐ 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)

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? ☐ Yes ☒ NoH(b) If "Yes" enter number of affiliates ☐ Yes ☐ NoH(c) Are all affiliates included? ☐ Yes ☐ No

(If "No" attach a list. See instructions.)

H(d) Is this a separate return filed by an organization

covered by a group ruling? ☐ Yes ☒ No

I Enter 4-digit GEN

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

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

10,750,737

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions)

1 Contributions, gifts, grants, and similar amounts received

a Direct public support

1a 75,837

b Indirect public support

1b 21,030

c Government contributions (grants)

1c 71,272

d TOTAL (add lines 1a through 1c) (cash \$ 118,264 noncash \$ 49,875)

1d 168,139

2 Program service revenue including government fees and contracts (from Part VII, line 93)

2 10,529,533

3 Membership dues and assessments

3

4 Interest on savings and temporary cash investments

4 12,290

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 0

7 Other investment income (describe)

7

8a Gross amount from sales of assets other than inventory

(A) Securities (B) Other

8a 19,142

b Less cost or other basis and sales expenses

8b 10,284

c Gain or (loss) (attach schedule)

8c 8,858

d Net gain or (loss) (combine line 8c, columns (A) and (B))

8d 8,858

9 Special events and activities (attach schedule)

a Gross revenue (not including \$ of contributions reported on line 1a)

9a

b Less direct expenses other than fundraising expenses

9b

c Net income or (loss) from special events (subtract line 9b from line 9a)

9c 0

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 (attach schedule) (subtract line 10b from line 10a)

10c 0

11 Other revenue (from Part VII, line 103)

11 21,633

12 TOTAL REVENUE (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)

12 10,740,453

13 Program services (from line 44, column (B))

13 9,123,645

14 Management and general (from line 44, column (C))

14 1,075,456

15 Fundraising (from line 44, column (D))

15 0

16 Payments to affiliates (attach schedule)

16

17 TOTAL EXPENSES (add lines 16 and 44, column (A))

17 10,199,101

18 Excess or (deficit) for the year (subtract line 17 from line 12)

18 541,352

19 Net assets or fund balances at beginning of year (from line 73, column (A))

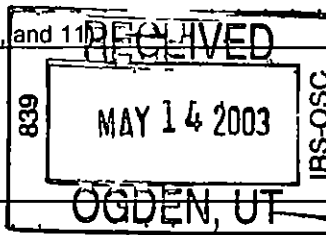
19 3,059,897

20 Other changes in net assets or fund balances (attach explanation)

20 -26,323

21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)

21 3,574,926



(HTA)

For Paperwork Reduction Act Notice, see the separate instructions

Form 990 (2002)

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 page 21 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	0			
23	Specific assistance to individuals (attach schedule)	0			
24	Benefits paid to or for members (attach schedule)	0			
25	Compensation of officers, directors, etc	315,618	146,572	169,046	
26	Other salaries and wages	5,685,153	5,243,694	441,459	
27	Pension plan contributions	64,830	58,244	6,586	
28	Other employee benefits	1,024,066	920,023	104,043	
29	Payroll taxes	457,435	410,961	46,474	
30	Professional fundraising fees	0			
31	Accounting fees	16,455		16,455	
32	Legal fees	5,570		5,570	
33	Supplies	217,323	202,498	14,825	
34	Telephone	84,947	72,711	12,236	
35	Postage and shipping	8,598	2,730	5,868	
36	Occupancy	311,119	296,794	14,325	
37	Equipment rental and maintenance	38,067	34,134	3,933	
38	Printing and publications	0			
39	Travel	232,137	218,743	13,394	
40	Conferences, conventions, and meetings	20,953	10,059	10,894	
41	Interest	178,855	169,433	9,422	
42	Depreciation, depletion, etc (attach schedule)	520,692	440,534	80,158	
43	Other expenses not covered above (itemize) a see attached	1,017,283	896,515	120,768	
b		0			
c		0			
d		0			
e		0			
f		0			
44	TOTAL FUNCTIONAL EXPENSES (add lines 22 through 43) ORGANIZATIONS COMPLETING COLUMNS (B)-(D) CARRY THESE TOTALS TO LINES 13-15	10,199,101	9,123,645	1,075,456	0

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 (See page 24 of the instructions)		Program Service Expenses
What is the organization's primary exempt purpose? <input checked="" type="checkbox"/> To provide services to the developmentally disabled		Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others
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	Intermediate Care Facilities - provide residential care and supervision for 42 severely mentally retarded/developmentally disabled adults in a community setting	
	(Grants and allocations \$ _____)	3,213,392
b	Individual Residential Alternatives - provide residential care and supervision to 87 moderately mentally retarded/developmentally disabled adults in a community setting	
	(Grants and allocations \$ _____)	4,717,909
c	Service Coordination and At-Home Services - provide services to assist 194 mentally retarded/developmentally disabled children and adults in accessing medical, social, educational, and other services in the community that are necessary for their well-being	
	(Grants and allocations \$ _____)	825,913
d	Day Program - provide day habilitation opportunities for 28 mentally retarded/developmentally disabled adults in the community	
	(Grants and allocations \$ _____)	230,720
e	Other program services (attach schedule)	135,711
f	TOTAL OF PROGRAM SERVICE EXPENSES (should equal line 44, column (B), Program services)	9,123,645

Part IV Balance Sheets (See page 24 of the instructions)

Note		Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year		(B) End of year
Assets	45	Cash - non-interest-bearing		28,791	45	38,950
	46	Savings and temporary cash investments		922,056	46	1,407,043
	47 a	Accounts receivable	47a 779,453			
	b	Less allowance for doubtful accounts	47b 0	666,708	47c	779,453
	48 a	Pledges receivable	48a 0			
	b	Less allowance for doubtful accounts	48b 0	0	48c	0
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		0	50	0
	51 a	Other notes and loans receivable (attach schedule)	51a 0			
	b	Less allowance for doubtful accounts	51b 0	0	51c	0
	52	Inventories for sale or use			52	
	53	Prepaid expenses and deferred charges		40,494	53	9,169
	54	Investments - securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		0	54	0
	55 a	Investments - land, buildings, and equipment basis	55a			
	b	Less accumulated depreciation (attach schedule)	55b		55c	0
56	Investments - other (attach schedule)		0	56	0	
57 a	Land, buildings, and equipment basis	57a 8,052,822				
b	Less accumulated depreciation (attach schedule)	57b 3,501,829	4,834,286	57c	4,550,993	
58	Other assets (describe <input type="checkbox"/> See attached)		671,843	58	610,881	
59	TOTAL ASSETS (add lines 45 through 58) (must equal line 74)		7,164,178	59	7,396,489	
Liabilities	60	Accounts payable and accrued expenses		627,273	60	687,755
	61	Grants payable			61	
	62	Deferred revenue		42,614	62	56,039
	63	Loans from officers, directors, trustees, and key employees (attach schedule)		0	63	0
	64 a	Tax-exempt bond liabilities (attach schedule)		0	64a	0
	b	Mortgages and other notes payable (attach schedule)		2,934,314	64b	2,547,632
	65	Other liabilities (describe <input type="checkbox"/> See attached)		500,080	65	530,137
66	TOTAL LIABILITIES (add lines 60 through 65)		4,104,281	66	3,821,563	
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		2,612,444	67	3,153,796
	68	Temporarily restricted		397,453	68	371,130
	69	Permanently restricted		50,000	69	50,000
	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	TOTAL NET ASSETS OR FUND BALANCES (add lines 67 through 69 OR lines 70 through 72, column (A) MUST equal line 19, column (B) MUST equal line 21)		3,059,897	73	3,574,926
	74	TOTAL LIABILITIES AND NET ASSETS / FUND BALANCES (add lines 66 and 73)		7,164,178	74	7,396,489

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-B	Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
------------------	---

Part I		Part II	
a	Total revenue, gains, and other support per audited financial statements ▶	a	10,825,773
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments \$		
(2)	Donated services and use of facilities \$ 85,320		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify)		
	\$		
	Add amounts on lines (1) through (4) ▶	b	85,320
c	Line a minus line b ▶	c	10,740,453
d	Amounts included on line 12, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify)		
	\$		
	Add amounts on lines (1) and (2) ▶	d	0
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	10,740,453
a	Total expenses and losses per audited financial statements ▶	a	10,284,421
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities \$ 85,320		
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 \$		
(4)	Other (specify)		
	\$		
	Add amounts on lines (1) through (4) ▶	b	85,320
c	Line a minus line b ▶	c	10,199,101
d	Amounts included on line 17, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify)		
	\$		
	Add amounts on lines (1) and (2) ▶	d	0
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	10,199,101

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page 26 of the instructions)

[illegible]

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**
If "Yes" attach schedule-see page 26 of the instructions

Part VI Other Information (See page 27 of the instructions)

		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?	N/A	
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 New Horizons Foundation and check whether it is <input checked="" type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
81 a	Enter direct or indirect political expenditures See line 81 instructions	81a	0
b	Did the organization file FORM 1120-POL for this year?	81b	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?	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 in Part III)	82b	85,320
83 a	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	X
84 a	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	
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	
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	
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	0
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	0
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	0
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) orgs Enter a Gross income from members or shareholders	87a	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)	87b	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	88	X
89 a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0</u> , section 4912 <u>0</u> , section 4955 <u>0</u>		
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
90 a	List the states with which a copy of this return is filed New York		
b	Number of employees employed in the pay period that includes March 12, 2002 (See instructions)	90b	251
91	The books are in care of Controller Telephone no (845) 473-3000 Located at 21 Van Wagner Road, Poughkeepsie, NY ZIP + 4 12603		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of FORM 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions)**Note** Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a Participant Room & Board					1,105,930
b					
c					
d					
e					
f Medicare/Medicaid payments					9,018,610
g Fees and contracts from government agencies					404,993
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	12,290	
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			18	8,858	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a Participant clothing					21,500
b Misc reimbursables/sales			01	133	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		21,281	10,551,033
105 TOTAL (add line 104, columns (B), (D) and (E))					10,572,314

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 page 32 of the instructions)

Line No ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93a	SSI, SSA, other income from participants contributes toward the cost of care and shelter in homes in the community
93f	Primary program service funding, received via NY State Office of Mental Retardation & Developmental Disabilities
93g	Program service fees are supplemented directly by the Office of Mental Retardation & Developmental Disabilities
103a	Income for clothing, participant incidentals also funded by Office of Mental Retardation & Developmental Disabilities

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions)

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the instructions)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note If "Yes" to (b), file Form 8870 AND Form 4720 (see instructions)

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

Date

4/21/03

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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)

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

OMB No 1545-0047

2002

Name of the organization

NEW HORIZONS RESOURCES, INC

Employer identification number

52-4862107

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Samuel Laganaro 69 College Avenue Poughkeepsie, NY 12603	HR Director/40	65,055	7,087	
Jayne Violon 20 Anderson Road Pawling, NY 12564	Program Coord /40	58,574	2,361	
Carol Engler 59 Main Street New Hamburg, NY 12590	Controller/40	51,846	7,062	
Total number of other employees paid over \$50,000	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Steve L. Deolde/Rondout Maintenance 64 Brucken Road Hurley, NY 12443	Maintenance & repairs	84,376
Total number of others receiving over \$50,000 for professional services	0	

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

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 \$ 0 (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B)

1

X

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

- 2 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)

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 expenses if more than \$1,000)?

2d

X

e Transfer of any part of its income or assets?

2e

X

- 3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See NOTE below)

3

X

- 4 Do you have a section 403(b) annuity plan for your employees?

4

X

Note 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 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)
- 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)
- 11 a ☒ 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)
- 11 b ☐ 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 fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants and contributions received (Do not include unusual grants. See line 28.)	81,113	59,655	60,107	39,138	240,013
16 Membership fees received					0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	9,299,090	8,347,084	7,670,747	7,319,261	32,636,182
18 Gross income from interest dividends amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	25,713	97,043	55,041	36,621	214,418
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.	85,320	85,320	85,320	85,320	341,280
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	204	782	-467	454	973
23 Total of lines 15 through 22	9,491,440	8,589,884	7,870,748	7,480,794	33,432,866
24 Line 23 minus line 17	192,350	242,800	200,001	161,533	796,684
25 Enter 1% of line 23	94,914	85,899	78,707	74,808	
26 ORGANIZATIONS DESCRIBED ON LINES 10 OR 11 a Enter 2% of amount in column (e), line 24					26a 15,934
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 1998 through 2001 exceeded the amount shown in line 26a. DO NOT FILE THIS LIST WITH YOUR RETURN. Enter the total of all these excess amounts.					26b
c Total support for section 509(a)(1) test. Enter line 24, column (e).					26c 796,684
d Add: Amounts from column (e) for lines 18 <u>214,418</u> 19 <u>0</u>					
22 <u>973</u> 26b <u>0</u>					26d 215,391
e Public support (line 26c minus line 26d total)					26e 581,293
f PUBLIC SUPPORT PERCENTAGE (LINE 26E (NUMERATOR) DIVIDED BY LINE 26C (DENOMINATOR))					26f 72.96%
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.					
(2001) _____ (2000) _____ (1999) _____ (1998) _____					
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.					
(2001) _____ (2000) _____ (1999) _____ (1998) _____					
c Add: Amounts from column (e) for lines 15 <u>0</u> 16 <u>0</u>					
17 <u>0</u> 20 <u>0</u> 21 <u>0</u>					27c 0
d Add: Line 27a total <u>0</u> and line 27b total <u>0</u>					27d 0
e Public support (line 27c total minus line 27d total)					27e 0
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e).					27f 0
g PUBLIC SUPPORT PERCENTAGE (LINE 27E (NUMERATOR) DIVIDED BY LINE 27F (DENOMINATOR))					27g 0.00%
h INVESTMENT INCOME PERCENTAGE (LINE 18, COLUMN (E) (NUMERATOR) DIVIDED BY LINE 27F (DENOMINATOR))					27h 0.00%
28 UNUSUAL GRANTS For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. DO NOT FILE THIS LIST WITH YOUR RETURN. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		N/A	
		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)		
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)		
34 a	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 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**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	0 0
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	0 0
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	0 0
42	Grassroots nontaxable amount (enter 25% of line 41)	42	0 0
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	0 0
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	0 0

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)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45 Lobbying nontaxable amount					0
46 Lobbying ceiling amount (150% of line 45(e))					0
47 Total lobbying expenditures					0
48 Grassroots nontaxable amount					0
49 Grassroots ceiling amount (150% of line 48(e))					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 11 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

- 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)

Yes	No	Amount
		0

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

(See page 12 of the instructions)

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

Schedule A (Form 990 or 990-EZ) 2002

NEW HORIZONS RESOURCES, INC
EIN 52-4862107
FORM 990 (2002) SCHEDULE ATTACHMENT

PART I, line 8	Date Sold	Sales Price	Cost	Depreciation	Gain/(Loss)
Gross from sales of assets					
Wood shed	06/24/02	5,102	1,309	327	4,120
2000 Chevy Astro	04/24/02	14,040	21,263	11,961	4,738
		<u>19,142</u>	<u>22,572</u>	<u>12,288</u>	<u>8,858</u>
					0

PART I, line 20 Other changes in net assets

Change in interest in net assets of New Horizons Foundation \$ (26,323)

PART II, line 42 and line 57	PART IV,	Cost	Prior Year Accumulated Depreciation	Useful Life (Years)**	Accum Depr Write Offs	Current Depreciation/Amortization	Book Value
Land		1,035,809					1,035,809
Land improvements		172,651	70,497	5-20		10,280	91,874
Buildings		4,066,994	1,481,021	20-25	(327)	169,297	2,417,003
Building improvements		1,358,407	769,387	15-20	(10,878)	69,010	530,888
Leasehold improvements		115,814	73,074	5	(13,602)	14,494	41,848
Furnishings and Equipment		651,977	486,325	5-10	(192,079)	83,360	274,371
Vehicles		651,170	377,971	4	(11,961)	125,960	159,200
Total Land, Buildings and Equipment		<u>\$8,052,822</u>	<u>\$3,258,275</u>		<u>(\$228,847)</u>	<u>\$472,401</u>	<u>\$ 4,550,993</u>
Mortgage costs		368,494	191,118	20-25		48,291	129,085
Deferred charges				1			0
Total Deferred Charges		<u>\$368,494</u>	<u>\$191,118</u>		<u>\$0</u>	<u>\$48,291</u>	<u>\$129,085</u>
Total Depreciation and Amortization			<u>\$3,449,393</u>			<u>\$520,692</u>	

**Straight-line depreciation used for all property, plant and equipment

PART II, line 43	(A)	(B)	(C)	(D)
Other Expenses	Total	Program Services	Management and General	Fundraising
Food	305,321	304,921	400	
Contracted services	271,800	240,627	31,173	
Health care assessment	213,429	213,429	0	
Insurance	84,316	27,817	56,499	
Residents' expenses	61,994	61,994	0	
Equipment and furniture	39,381	34,108	5,273	
Employment and Recruiting	10,781	0	10,781	
Dues and subscriptions	9,770	2,441	7,329	
Public relations	8,943	0	8,943	
Bond administration fees	8,309	8,309		
Bad debts	1,256	1,256		
Board activities	408	0	408	
Miscellaneous	1,575	1,613	(38)	
	<u>\$1,017,283</u>	<u>\$896,515</u>	<u>\$120,768</u>	<u>\$0</u>

NEW HORIZONS RESOURCES, INC
 EIN 52-4862107
 FORM 990 (2002) SCHEDULE ATTACHMENT

PART III, line e

	Program Service Expenses
Bnggs Farm	97,502
Internship Program	19,077
Developmental Disabilities Program	11,965
Cnsis Intervention	6,242
Other Miscellaneous Programs	925
	\$ 135,711

PART IV, line 58

Other Assets

	(A) Beginning	(B) End
Interest in net assets of New Horizons Foundation	294,286	267,963
Unamortized mortgage costs, net	172,710	129,085
Residents' funds	199,054	210,860
Securty deposits	5,793	2,973
	\$ 671,843	\$ 610,881

PART IV, line 64b

Mortgages and Other Notes Payable	Date of	Note	Maturity Date	Interest	Rate	Original Amount	Balance
Total mortgages payable							2,369,793
Note payable, Key Bank of New York							
Leasehold improvement loan							
secured by receivables of Dwight St residence	01/19/00		01/19/05	4 25%		66,000	29,248
Notes payable, Ford Motor Credit Corp							
Vehicle loans (2)	03/30/03		03/29/04	5 90%		53,822	18,195
Note payable, First Union National Bank							
Vehicle loan	07/10/01		07/10/04	7 00%		22,000	12,191
Note payable, First Union National Bank							
Commercial loan, vehicle refinancing	08/07/01		08/06/03	7 00%		243,000	84,862
Note payable, Rhinebeck Savings Bank							
Vehicle loan	04/18/02		04/18/05	5 49%		19,054	15,092
Note payable, M&T Bank							
Vehicle loan	07/22/02		07/22/05	7 74%		20,854	18,251
							\$ 2,547,632

PART IV, line 65

Other Liabilities

	(A) Beginning	(B) End
Due to NYS OMRDD	301,026	319,277
Residents' funds	199,054	210,860
	\$ 500,080	\$ 530,137

NEW HORIZONS RESOURCES, INC
EIN 52-4862107
FORM 990 (2002) SCHEDULE ATTACHMENT

PART V

List of Officers, Directors, Trustees, and Key Employees

(A)	(B)	(C)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Name and address	Title and average hours per week devoted to position	Compensation (If not paid, enter -0-)		
George F Decker, Jr UBS PaineWebber c/o 21 Van Wagner Road Poughkeepsie, NY 12603	President variable hrs/week	0	0	0
Emanuel F Sans, Esq Gellert & Quartararo PC c/o 21 Van Wagner Road Poughkeepsie, NY 12603	Vice President variable hrs/week	0	0	0
William J Lavery W J Lavery Real Estate c/o 21 Van Wagner Road Poughkeepsie, NY 12603	Treasurer variable hrs/week	0	0	0
Theresa Burdick 21 Enoch Crosby Road Brewster, NY 10509	Secretary variable hrs/week	0	0	0
Susan P Hochhauser Director of Special Programs Dutchess Community College c/o 21 Van Wagner Road Poughkeepsie, NY 12603	Board Director variable hrs/week	0	0	0
Mary Swanson c/o 21 Van Wagner Road Poughkeepsie, NY 12603	Board Director variable hrs/week	0	0	0
Peter Leonard Vassar College c/o 21 Van Wagner Road Poughkeepsie, NY 12603	Board Director variable hrs/week	0	0	0
Dr William Van Ornum Manst College c/o 21 Van Wagner Road Poughkeepsie, NY 12603	Board Director variable hrs/week	0	0	0
Stephanie K Brenner c/o 21 Van Wagner Road Poughkeepsie, NY 12603	Board Director variable hrs/week	0	0	0
Daniel G Hickey Hickey-Finn & Co , Inc c/o 21 Van Wagner Road Poughkeepsie, NY 12603	Board Director variable hrs/week	0	0	0

NEW HORIZONS RESOURCES, INC
EIN 52-4862107
FORM 990 (2002) SCHEDULE ATTACHMENT

PART V

List of Officers, Directors, Trustees, and Key Employees

(A)	(B)	(C)	(D)	(E)
Name and address	Title and average hours per week devoted to position	Compensation (If not paid, enter -0-)	Contributions to employee benefit plans & deferred compensation	Expense account and other allowances
Stacey M Langenthal Key Bank c/o 21 Van Wagner Road Poughkeepsie, NY 12603	Board Director variable hrs/week	0	0	0
Bruce Marley Central Hudson Gas & Electric c/o 21 Van Wagner Road Poughkeepsie, NY 12603	Board Director variable hrs/week	0	0	0
John R Walker c/o 21 Van Wagner Road Poughkeepsie, NY 12603	Board Director variable hrs/week	0	0	0
Manlyn McGaulley Dutchess County BOCES c/o 21 Van Wagner Road Poughkeepsie, NY 12603	Board Director variable hrs/week	0	0	0
Regis Obijiski 170 Ledge Road Kingston, NY 12401	Executive Director 40 hrs/week	100,898	7,170	2,704
William Beattie 1 Joray Road Sharon, CT 06069	Assistant Executive Director 40 hours/week	83,970	2,082	0
Diane Atwood 43 Hampton Court Clinton Corners, NY 12514	Director of Finance 40 hrs/week	68,148	1,627	0
Andrea Pollack 13 Creek Bend Road Poughkeepsie, NY 12603	Director of Program Operations - Ulster County 40 hours/week	62,602	8,338	0

SCHEDULE A

PART IV-A Line 22 Other Income

	2001	2000	1999	1998	Total
Miscellaneous sales				454	454
Special events and activities	204	782	(467)		519
	204	782	(467)	454	973