Form **990**

Department of the Treasury
Internal Revenue Service

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 beginning 7/01 , 2001, and ending 6/30 , 20 02

B 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 instructions.

SENIOR CITIZENS, INC
3025 BULL STREET
SAVANNAH, GA 31405

D Employer Identification Number 58-0864009

E Telephone number 912-263-0363

F Accounting method: Cash [X] 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 [X] No

H (b) If yes enter number of affiliates ►

H (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 [X] No

I Enter 4 digit group GEN ►

M Check ► [X] if the organization is not required to attach Schedule B (Form 990, 990 EZ, or 990 PF)

G Web site ► N/A

J Organization type (check only one) ► [X] 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**

L Gross receipts Add lines 6b 8b 9b and 10b to line 12 ► 2,508 161

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

SCANNED OCT 30 '02

REVENUE				
1	Contributions gifts grants, and similar amounts received			
a	Direct public support	1a	364 353	
b	Indirect public support	1b		
c	Government contributions (grants)	1c	812,848	
d	Total (add lines 1a through 1c) (cash $ 1,144,670 noncash $ 32,531)		1d	1,177,201
2	Program service revenue including government fees and contracts (from Part VII, line 93)		2	1 138,463
3	Membership dues and assessments		3	12,228
4	Interest on savings and temporary cash investments		4	16,367
5	Dividends and interest from securities		5	
6a	Gross rents	6a	163,902	
b	Less rental expenses	6b		
c	Net rental income or (loss) (subtract line 6b from line 6a)		6c	163,902
7	Other investment income (describe ►)		7	
8a	Gross amount from sales of assets other than inventory — (A) Securities: ; (B) Other:	8a		
b	Less cost or other basis and sales expenses	8b		
c	Gain or (loss) (attach schedule)	8c		
d	Net gain or (loss) (combine line 8c columns (A) and (B))		8d	
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	
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	
11	Other revenue (from Part VII, line 103)		11	
12	**Total revenue** (add lines 1d 2 3 4 5 6c, 7, 8d 9c 10c, and 11)		12	2,508,161
EXPENSES				
13	Program services (from line 44, column (B))		13	1,797,898
14	Management and general (from line 44, column (C))		14	504 663
15	Fundraising (from line 44, column (D))		15	94,816
16	Payments to affiliates (attach schedule)		16	
17	**Total expenses** (add lines 16 and 44 column (A))		17	2,397,377
NET ASSETS				
18	Excess or (deficit) for the year (subtract line 17 from line 12)		18	110,784
19	Net assets or fund balances at beginning of year (from line 73, column (A))		19	988,743
20	Other changes in net assets or fund balances (attach explanation)		20	
21	Net assets or fund balances at end of year (combine lines 18 19, and 20)		21	1,099,527

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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 (att sch) (cash $ ______ non cash $ ______)	22				
23 Specific assistance to individuals (att sch)	23				
24 Benefits paid to or for members (att sch)	24				
25 Compensation of officers, directors, etc	25	71 000		71,000	
26 Other salaries and wages	26	875,607	628,094	199,982	47,531
27 Pension plan contributions	27	6,266		6,266	
28 Other employee benefits	28	107,137	79,280	25,919	1,938
29 Payroll taxes	29	70 120	46,741	19,753	3,626
30 Professional fundraising fees	30				
31 Accounting fees	31	36,184		36,184	
32 Legal fees	32				
33 Supplies	33	19,629	13,135	6,391	103
34 Telephone	34	14,493	9,406	4,509	578
35 Postage and shipping	35	4,685	1,198	3,074	413
36 Occupancy	36	54,252	40 632	13,620	
37 Equipment rental and maintenance	37	81,578	77,077	3,101	1,400
38 Printing and publications	38	14,638	5,765	8 873	
39 Travel	39	28,962	27,417	1,533	12
40 Conferences, conventions, and meetings	40				
41 Interest	41	42 766		42 766	
42 Depreciation, depletion etc (attach schedule)	42	71 040	68,863	881	1,296
43 Other expenses not covered above (itemize) a SEE STATEMENT 1	43a	899 020	800 290	60,811	37,919
b	43b				
c	43c				
d	43d				
e	43e				
44 Total functional expenses (add lines 22 43) Organizations completing columns (B) (D), carry these totals to lines 13 15	44	2,397,377	1,797,898	504,663	94,816

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? ► SERVICES FOR SR CITIZENS

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) & (4) organizations & section 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants & allocations to others)

	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts but optional for others)
a SEE ATTACHED (Grants and allocations $)	1 797,898
b (Grants and allocations $)	
c (Grants and allocations $)	
d (Grants and allocations $)	
e Other program services (Grants and allocations $)	
f **Total of Program Service Expenses** (should equal line 44 column (B), program services) ►	1,797,898

Part IV Balance Sheets (See 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			7,610	45	17 411
46 Savings and temporary cash investments			721,001	46	747,648
47a Accounts receivable	47a	250 420			
b Less allowance for doubtful accounts	47b		182,010	47c	250,420
48a Pledges receivable	48a				
b Less allowance for doubtful accounts	48b			48c	
49 Grants receivable				49	
50 Receivables from officers, directors trustees and key employees (attach schedule)				50	
51a Other notes & loans receivable (attach sch)	51a				
b Less allowance for doubtful accounts	51b			51c	
52 Inventories for sale or use			9,905	52	10,985
53 Prepaid expenses and deferred charges			3,547	53	28,830
54 Investments – securities (attach schedule) ► ☐ Cost ☐ FMV				54	
55a Investments – land, buildings, & equipment basis	55a				
b Less accumulated depreciation (attach schedule)	55b			55c	
56 Investments – other (attach schedule)			6,100	56	
57a Land, buildings, and equipment basis	57a	2,134,442			
b Less accumulated depreciation (attach schedule) STATEMENT 2	57b	1,490,016	705,402	57c	644,426
58 Other assets (describe ► SEE STATEMENT 3)			4,076	58	16,597
59 **Total assets** (add lines 45 through 58) (must equal line 74)			1,639,651	59	1,716,317
Liabilities 60 Accounts payable and accrued expenses			130 551	60	150,434
61 Grants payable				61	
62 Deferred revenue				62	
63 Loans from officers directors trustees, and key employees (attach schedule)				63	
64a Tax exempt bond liabilities (attach schedule)				64a	
b Mortgages and other notes payable (attach schedule)			520 357	64b	466,356
65 Other liabilities (describe ►)				65	
66 **Total liabilities** (add lines 60 through 65)			650,908	66	616,790
Net Assets or Fund Balances **Organizations that follow SFAS 117, check here** ► [X] and complete lines 67 through 69 and lines 73 and 74					
67 Unrestricted			706,288	67	825,161
68 Temporarily restricted			282,455	68	274,366
69 Permanently restricted				69	
Organizations that do not follow SFAS 117, check here ► ☐ 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 and column (B) **must** equal line 21)			988,743	73	1,099,527
74 **Total liabilities and net assets/fund balances** (add lines 66 and 73)			1,639,651	74	1,716,317

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

BAA

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.)

a	Total revenue, gains, and other support per audited financial statements ►	a	2,508,161
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 $		
(3)	Recoveries of prior year grants $		
(4)	Other (specify) ________ $		
	Add amounts on lines (1) through (4) ►	b	
c	Line a minus line b ►	c	2,508,161
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	
e	Total revenue per line 12, Form 990 (line c plus line d) ►	e	2,508,161

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

a	Total expenses and losses per audited financial statements ►	a	2,397,377
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities $		
(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	
c	Line a minus line b ►	c	2,397,377
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	
e	Total expenses per line 17, Form 990 (line c plus line d) ►	e	2,397,377

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

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 4		71,000	1,029	0

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

If 'Yes,' attach schedule — see instructions

Part VI Other Information (See specific 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	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes ' attach a conformed copy of the changes	77		X
78a	Did the organization have unrelated business gross income of $1 000 or more during the year covered by this return?	78a		X
b	If 'Yes ' has it filed a tax return on **Form 990-T** for this year?	78b	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies trustees officers etc, to any other exempt or nonexempt organization?	80a	X	
b	If Yes, enter the name of the organization ► SEE STATEMENT 5 and check whether it is [X] exempt **or** [X] nonexempt			
81a	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
82a	Did the organization receive donated services or the use of materials, equipment or facilities at no charge or at substantially less than fair rental value?	82a		X
b	If Yes ' you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) — 82b: N/A			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If Yes did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85	*501(c)(4) (5), or (6) organizations* **a** Were substantially all dues nondeductible by members?	85a	N/A	
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85b	N/A	
	If Yes was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year			
c	Dues, assessments, and similar amounts from members — 85c: N/A			
d	Section 162(e) lobbying and political expenditures — 85d: N/A			
e	Aggregate nondeductible amount of Section 6033(e)(1)(A) dues notices — 85e: N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) — 85f: N/A			
g	Does the organization elect to pay the Section 6033(e) tax on the amount on line 85f?	85g	N/A	
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	N/A	
86	*501(c)(7) organizations* 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) organizations* 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	
89a	*501(c)(3) organizations* Enter Amount of tax imposed on the organization during the year under Section 4911 ► 0 Section 4912 ► 0 Section 4955 ► 0			
b	*501(c)(3) and 501(c)(4) organizations* Did the organization engage in any Section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If Yes, attach a statement explaining each transaction	89b		X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under Sections 4912 4955, and 4958 ► 0			
d	Enter Amount of tax on line 89c, above reimbursed by the organization ► 0			
90a	List the states with which a copy of this return is filed ► GEORGIA			
b	Number of employees employed in the pay period that includes March 12, 2001 (see instructions)	90b		57
91	The books are in care of ► PATRICIA LYONS Telephone number ► 912-236-0363 Located at ► 3025 BULL STREET, SAVANNAH, GA ZIP + 4 ► 31403			
92	*Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041* – Check here N/A ► [ ] 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 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 ADULT DAY CARE					131,741
b CONTRACT TRANSPORTATI					10,317
c MEMBERSHIP & MGMT					50,717
d NUTRITION					590,561
e OTHER SERVICES					40,277
f Medicare/Medicaid payments					314,850
g Fees & contracts from government agencies					
94 Membership dues and assessments					12,228
95 Interest on savings & temporary cash invmnts					16,367
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate					
a debt financed property					163,902
b not debt financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))					1,330,960

105 **Total** (add line 104, columns (B), (D), and (E)) ► 1,330,960

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 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)
	SEE STATEMENT 6

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See 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
SENIOR IN HOME SERVICES INC	100 000 %	INACTIVE	0	0
3025 BULL STREET	%			
SAVANNAH, GA 31403	%			
58-2142402	%			

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

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

b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note *If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions)*

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

[redacted]

9-25-02

Date

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)

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

2001

Name of the Organization: SENIOR CITIZENS, INC

Employer Identification Number: 58-0864009

Part I — Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See 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
NONE				

Total number of other employees paid over $50 000 ► 0

Part II — Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See 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
NONE		

Total number of others receiving over $50 000 for professional services ► 0

Part III Statements About Activities (See 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 ► $ N/A **(Must equal amounts on line 38, Part VI-A, or line i 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 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 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 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) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts grants and contributions received (Do not include unusual grants See line 28)	1,208,964	650,041	1,205,474	1 182,585	4,247,064
16 Membership fees received	15,960	15,930	9,127	28,436	69,453
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	1,077,697	541,773	1,025,132	955,862	3,600,464
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 organ ization after June 30 1975	38,440	16,006	12,649	12,196	79,291
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets SEE STMT 7	153 744	79 893	131 362	131,116	496,115
23 Total of lines 15 through 22	2,494,805	1,303,643	2 383,744	2 310,195	8,492,387
24 Line 23 minus line 17	1,417,108	761,870	1,358,612	1,354,333	4,891,923
25 Enter 1% of line 23	24,948	13,036	23,837	23,102	

26 Organizations described on lines 10 or 11 a Enter 2% of amount in column (e), line 24 ► **26a** 97,838

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**

c Total support for Section 509(a)(1) test Enter line 24, column (e) ► **26c** 4,891,923

d Add Amounts from column (e) for lines 18 79,291 19 ______ 22 496,115 26b ______ **26d** 575,406

e Public support (line 26c minus line 26d total) ► **26e** 4,316,517

f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ► **26f** 88 24 %

27 Organizations described on line 12 N/A

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**

d Add Line 27a total ______ and line 27b total ______ **27d**

e Public support (line 27c total minus line 27d total) ► **27e**

f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ► **27f**

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ► **27g** %

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ► **27h** %

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 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 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?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	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?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures announcements and other written communications to the public dealing with student admissions programs and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered No to any of the above please explain (If you need more space attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered Yes to any of the above please explain (If you need more space attach a separate statement)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	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	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See 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		
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	41		
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			
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)

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

Part VI-B **Lobbying Activity by Nonelecting Public Charities**
(For reporting only by organizations that did not complete Part VI A) (See 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)			

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

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

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of			
(i) Cash	51 a (i)		X
(ii) Other assets	a (ii)		X
b Other transactions			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b (i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b (ii)		X
(iii) Rental of facilities equipment or other assets	b (iii)		X
(iv) Reimbursement arrangements	b (iv)		X
(v) Loans or loan guarantees	b (v)		X
(vi) Performance of services or membership or fundraising solicitations	b (vi)		X
c Sharing of facilities, equipment mailing lists other assets or paid employees	c		X

d If the answer to any of the above is Yes complete the following schedule Column (b) should always show the fair market value of the goods other assets, or services given by the reporting organization If the organization received less than fair market value in any transaction or sharing arrangement show in column (d) the value of the goods other assets or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

52a Is the organization directly or indirectly affiliated with or related to one or more tax exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ► ☐ Yes ☒ No

b If 'Yes complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

STATEMENT 1
FORM 990, PART II, LINE 43
OTHER EXPENSES

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
DELIVERY/TRANSPORTATION	183,438	183,438		
DEVELOPMENT	48,341		15,629	32,712
FOOD & NUTRITION	961,956	961,956		
IN-KIND SERVICES	32,531	32,531		
INSURANCE	67,030	52,815	14,019	196
INTERDEPARTMENTAL CHARGES	-1382415	-1222664	-159,751	
MARKETING & OTHER SERVICES	670,753	519,555	151,198	
MEMBERSHIPS	15,434	225	15,209	
MISCELLANEOUS	5,933	5,933		
PASS THRU GRANTS	500	500		
RECOGNITION & PROMOTION	19,992	676	19,316	
STIPENDS	193,880	193 880		
TAXES-OTHER	2 813	2,662	151	
TRAINING	7,432	1 149	1,272	5,011
UNIFORMS	4,293	4,293		
UTILITIES	67,109	63,341	3,768	
TOTAL	$ 899,020	$ 800,290	$ 60,811	$ 37,919

STATEMENT 2
FORM 990, PART IV, LINE 57
LAND, BUILDINGS, AND EQUIPMENT

CATEGORY	BASIS	ACCUM DEPREC	BOOK VALUE
AUTOMOBILES / TRANSPORTATION EQUIPMENT	$ 172,305	$ 170,258	$ 2,047
FURNITURE AND FIXTURES	108,074	107,807	267
MACHINERY AND EQUIPMENT	221,808	186,363	35,445
BUILDINGS	1,468,867	1,025,588	443,279
LAND	163,388		163,388
TOTAL	$ 2,134,442	$ 1 490,016	$ 644,426

STATEMENT 3
FORM 990, PART IV, LINE 58
OTHER ASSETS

CONSTRUCTION IN PROGRESS	$ 13,125
LOAN COSTS	3,472
TOTAL	$ 16,597

STATEMENT 4
FORM 990, PART V
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN-SATION	CONTRI-BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
PATRICIA C LYONS SAVANNAH, GA	PRESIDENT 40	$ 71,000	$ 1,029	$ 0
SEE ATTACHED LIST FOR REST SAVANNAH, GA	DIRECTORS NONE	0	0	0
	TOTAL	$ 71 000	$ 1,029	$ 0

STATEMENT 5
FORM 990, PART VI, LINE 80B
RELATED ORGANIZATIONS

NAME OF ORGANIZATION	EXEMPT	NONEXEMPT
SENIOR INDEPENDENT LIVING ORG , INC	X	
SENIOR IN-HOME SERVICES INC		X

STATEMENT 6
FORM 990, PART VIII
RELATIONSHIP OF ACTIVITIES TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE #	EXPLANATION OF ACTIVITIES
93A-F	ALL ARE DEPARTMENT REVENUES PROVIDED BY THE AGENCY
94	DUES ARE FOR MEMBERSHIP IN SENIOR CITIZENS, INC
95	INVESTMENT INCOME IS FROM INTEREST-BEARING BANK ACCOUNTS WHICH CONTAIN FUNDS OF VARIOUS SR CITIZENS' PROGRAMS AS WELL AS OTHER SMALL INVESTMENT ACCOUNTS
97	GROSS RENTAL INCOME IS FROM THE RENTAL OF SECTIONS OF THE AGENCY'S BUILDING, THE MAJORITY OF TENANTS PROVIDE SERVICES TO ELDERLY CITIZENS INCOME IS NEGATIVE ONCE EXPENSES ARE ALLOCATED

STATEMENT 7
SCHEDULE A, PART IV-A, LINE 22
OTHER INCOME

DESCRIPTION		(A) 2000	(B) 1999	(C) 1998	(D) 1997	(E) TOTAL
RENTAL INCOME		$ 153,744	$ 79 893	$ 131,362	$ 131 116	$ 496,115
	TOTAL	$ 153,744	$ 79,893	$ 131 362	$ 131,116	$ 496 115

Form **4562** (Rev March 2002) Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

▶ See separate instructions ▶ Attach to your tax return

OMB No 1545-0172 **2001** Attachment Sequence No **67**

Name(s) shown on return: SENIOR CITIZENS, INC.

Identifying number: 58-0864009

Business or activity to which this form relates: All Business Activities

Part I Election To Expense Certain Tangible Property Under Section 179

Note If you have any listed property, complete Part V before you complete Part I

1	Maximum amount See page 2 of the instructions for a higher limit for certain businesses	1	$24 000
2	Total cost of section 179 property placed in service (see page 3 of the instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	$200,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less enter -0- If married filing separately see pg 3 of the instr	5	

	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6			
7	Listed property Enter the amount from line 29	7	

8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2000 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2002 Add lines 9 and 10 less line 12 ▶ 13		

Note Do not use Part II or Part III below for listed property Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)

14	Special depreciation allowance for certain property (other than listed property) acquired after Sept. 10 2001 (see pg 3 of the instr)	14	
15	Property subject to section 168(f)(1) election (see page 4 of the instructions)	15	
16	Other depreciation (including ACRS) (see page 4 of the instructions)	16	34,867

Part III MACRS Depreciation (Do not include listed property) (See page 4 of the instructions)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2001	17	29,861
18	If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts check here ▶ ☐		

Section B-Assets Placed in Service During 2001 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		3,000	5.0	HY	S/L	300
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental			27 5 yrs	MM	S/L	
property			27 5 yrs	MM	S/L	
i Nonresidential real			39 yrs	MM	S/L	
property				MM	S/L	

Section C-Assets Placed in Service During 2001 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See page 6 of the instructions)

21	Listed property Enter amount from line 28	21	4,119
22	**Total** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations-see instr	22	69,147
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)

Note For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A-Depreciation and Other Information (Caution See page 8 of the instructions for limits for passenger automobiles)

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No 24b If "Yes" is the evidence written? ☐ Yes ☐ No

(a) Type of prop (list vehicles first)	(b) Date placed in service	(c) Busn./invest. use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for listed property acquired after September 10, 2001, and used more than 50% in a qualified business use (see page 7 of the instructions)						25		
26 Property used more than 50% in a qualified business use (see page 7 of the instructions)								
M.O.W. 97 FORD ASTRO VAN (73949)	12/31/96	100.00%	15,500	15,500	5.0	S/L HY		
See Schedule		%	192,517	192,517			4,119	
27 Property used 50% or less in a qualified business use (see page 7 of the instructions)								
		%				S/L-		
		%				S/L-		
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1						28	4,119	
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1							29	

Section B-Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner" or related person

If you provided vehicles to your employees first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (do not include commuting miles-see page 2 of the instructions)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C-Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see page 8 of the instructions)

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See page 8 of the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See page 9 of the instructions)		

Note If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2001 tax year (see page 9 of the instructions)					
Raiser's Edge Software	7/01/01	6,460	0	5.0	1,292
43 Amortization of costs that began before your 2001 tax year				43	604
44 **Total** Add amounts in column (f) See page 9 of the instructions for where to report				44	1,896

Form 4562 Subschedules
All Business Activities

Part V Depreciaton of Automobiles and Other Listed Property

Asset	(a) Property Description	(b) Date In Service	(c) Bus Pct	(d) Cost	(e) Basis for Depr	(f) Period	(g) Method Conv	(h) Depreciation Deduction	(i) Section 179 Expense
	Property Used More than 50%								
100	93 BUICK REGAL # 74 (99630)	3/31/97	100 00	10,361	10,361	5 0	S/L-HY	2,072	0
106	95 FORD E350 VANS#74 24660,2	3/27/95	100 00	69,027	69,027	5 0	S/L-HY	0	0
108	FORD LIFT VAN (36774)	11/13/96	100 00	31,520	31,520	5 0	S/L-HY	0	0
109	97 FORD (14961)	6/16/97	100 00	27,589	27,589	5 0	S/L-HY	0	0
110	97 FORD (14967)	6/16/97	100 00	27,589	27,589	5 0	S/L-HY	0	0
111	96 BUICK CENTURY (18019)	3/31/97	100 00	13,819	13,819	5 0	S/L-HY	0	0
127	PART OF FORD LIFT VAN # 74	11/13/96	100 00	2,379	2,379	5 0	S/L-HY	0	0
128	MATCH 2 VANS #74	2/07/97	100 00	10,233	10,233	5 0	S/L-HY	2,047	0
				192,517	192,517			4 119	0

Senior Citizens, Inc
Board of Directors
June 30, 2002

Name	Address	City	State	Zip Code
TONY ABBOT JR	117 WEST OGLETHORPE AVENUE	SAVANNAH	GA	31401
FRANK ARDEN III	121 ELKINS CEMETARY ROAD	GUYTON	GA	31812
COLEEN BIEZENBOS	1324 DEAN FOREST ROAD	SAVANNAH	GA	31405
BILL BINNS	33 ISLAND DRIVE	SAVANNAH	GA	31406
DAVID BYCK	13 EAST YORK STREET	SAVANNAH	GA	31401
DENA CLAUGHTON	1636 WILMINGTON ISLAND ROAD	SAVANNAH	GA	31410
FRANK HARDEMAN	7370 HODGSON MEMORIAL DR , C-8	SAVANNAH	GA	31406
AMY PARR HENNEMAN	150 HOPECREST AVENUE	SAVANNAH	GA	31406
JOHN A HENDERSON	104 MELROSE DRIVE	SAVANNAH	GA	31410
CLIFF JONES	11 SULGRAVE ROAD	SAVANNAH	GA	31406
DAVID JONES	1510 CATHY STREET	SAVANNAH	GA	31401
HUNTER LEAF	1540 BACON PARK DRIVE	SAVANNAH	GA	31406
PETE LIAKAKIS	17 EAST PERRY STREET	SAVANNAH	GA	31401
JOEL LYNCH	101 EAST 44TH STREET	SAVANNAH	GA	31405
DEANNE MITCHELL	402 EAST 45TH STREET	SAVANNAH	GA	31405
DANNY POWERS	P O BOX 8321	SAVANNAH	GA	31412
BOB REED	212 DEVONSHIRE ROAD	SAVANNAH	GA	31410
WILLIE MAE ROBINSON	203 EAST 31ST STREET	SAVANNAH	GA	31401
PAL SADLER	3100 KILOWATT DRIVE	SAVANNAH	GA	31405
BOB SCANLON	105 CHATSWORTH ROAD	SAVANNAH	GA	31410
KATHY SHARPE	136 BULL STREET, PO BOX 8759	SAVANNAH	GA	31412
REP RON J STEPHENS	103 ANSFORD DRIVE	SAVANNAH	GA	31408
RUTH STRIPLING	22 EAST 87TH STREET	SAVANNAH	GA	31401

and your community

Senior Citizens is Savannah's largest non-profit agency dedicated to enhancing the quality of seniors' lives. We are committed to fostering seniors' overall well-being and to offering families alternatives to premature institutionalization by providing a variety of comprehensive services that promote independent living

At Senior Citizens, we strive constantly to meet the needs of our community's senior population because we believe "the best is yet to be"

Senior Companions

The Senior Companion Program is a perfect example of seniors helping seniors Volunteers age 60 and over, who meet minimum income guidelines, receive a stipend in exchange for assisting frail seniors These companions prepare meals, help with laundry, take out the trash and talk about grandchildren tasks that could reasonably be expected of a friend

The Ruth F Byck Adult Day Care Center

Since 1982, The Ruth F Byck Adult Day Care Center has focused on caring for seniors during the workday We specialize in the care of those who require personal assistance, in addition to those suffering from the effects of Alzheimer's disease and other forms of dementia Seniors receive two meals snacks, transportation and a day of fun Our professionally-trained staff is fully prepared to anticipate and meet the needs of your loved one

Club 55

Located in the south wing of Senior Citizens, Club 55 is a fun-filled activity center for all Senior Citizens' members Check in any day of the week and you'll find bridge clubs piano lessons and exercise classes, in addition to our computer center and fitness room Open Monday through Friday, Club 55 offers something for everyone *Club 55 is also available for rental to your group, please call for details*

Community Centers

Thanks to our partnership with the city councils of Garden City, Port Wentworth and Thunderbolt, Senior Citizens comes to you! Our community centers provide hot meals as well as educational and recreational activities for those 60 and over Center hours are 9 am until 2 pm, Monday through Friday

and your home

Meals on Wheels

Over 1,300 hot, nutritionally-balanced meals are delivered to homebound seniors and senior community centers every weekday. Our transportation fleet and dedicated volunteers make sure that all of our clients receive nourishing noonday meals. Along with daily fellowship, volunteers also provide monitoring of client's health and conditions and alert Senior Citizens to any changes.

Homemaker/Chore Services

Senior Citizens regularly makes life easier by providing assistance with home maintenance tasks, including light housekeeping, meal preparation, laundry, grocery shopping and other household essentials.

Home and Yard Maintenance

Senior Citizens is proud to offer basic maintenance services, such as light housekeeping, small repairs, and yard care at reduced fees compared to the open market. Our caring, professional staff performs a variety of household tasks, all designed to enable seniors to remain in their homes. And safety is assured because we perform background checks.

Senior Independent Living Organization

For seniors who do not meet the eligibility criteria specified by our grants, the Senior Independent Living Organization (SILO) can be a passport to independence. You can access all of the programs, such as Meals on Wheels, personal care assistance, home and yard maintenance, and transportation at reduced fees compared to the open market.

and you

Community Outreach/Crisis Intervention

Senior Citizens is your up-to-the-minute source regarding eligibility for social benefits programs. By supplying us with some basic information, we can provide you with a detailed listing of all the benefits to which you are entitled. No more running around town! *All client information is strictly confidential and used only to determine your eligibility for benefits.*

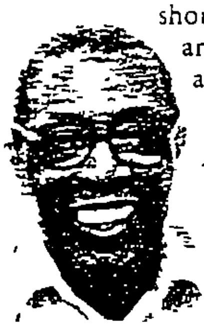
Our social workers are committed to responding promptly to crisis situations and to recommending specific services and programs for clients based on individual needs.

Transportation

Our transportation fleet helps fill the ever-increasing need for senior mobility. Our courteous drivers guarantee that you'll reach your destination safely and promptly. From doctors' appointments and grocery shopping to your attendance at entertainment events, Senior Citizens can help you get there!

Membership

Members of Senior Citizens enjoy many benefits including discounts at Savannah businesses, short-term loan of ambulatory equipment, and an informative newsletter. Members also are invited to visit Club 55 and participate in a wide array of activities, from line dancing to computer classes. Through your membership, you help guarantee that we will be able to continue providing services for all Chatham County seniors.



Join us today!