Form 990

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
between the user according to this return to a startly state reporting requirements

OMB No 1545-0047 2002

Open to Public

Dep	artment e	of the Treasury enue Service	be The organization may ha	enefit trust or private four	ndation)	tate report	tına requiremen	ts		Open to P	
A			r year, or tax year beginning	, and end		- Сторы					
В			ase C Name of organization					Б	Emplo [*]	yer ID numb	er
ĪΓ	l	use change	Ronald McDonald	d House Charit	ties	of		-		172279	
F	1	change prin	""		5205			┢		one number	
F	1	return tyr			dress)		Room/suite	-	•	-477-22	
⊢	1	return Se	Transportant and or (or o . o ir .		uiess)		Noonisalle	F		iting method	$\overline{}$
⊢	1	nded return	Cific City or town, state or country and				 -	X	Accrual	ħ	(specify)
⊢	1	Jinsu	ruc-	FL 3250	3				Accruai	□ Orner ((Specify)
ᆫ	Applic	cation pending tion	Section 501(c)(3) organizations and 494				annicable to a		507		
							applicable to s				<i>₽</i>
_	14/ab a		trusts must attach a completed Schedu	18 A (FORM 990 OF 990-EZ)			group return fo		1es r	∐ fes	БИ МО
	Web s				⊣ ` :	'	enter no of affi			П.,	п.,
J	_	ization type	9 504/34 3 3 3 4 5 4 5 5 5] .o.z [] .o.z	1 ' '		affiliates include			∐ Yes	∐ No
			X 501(c) (3) ≤ (insert no)	4947(a)(1) or 527	_	-	att a list See i				
K		_	f the organization's gross receipts are n	•	H(d)		separate return		-	п	П
		-	tion need not file a return with the IRS, I	-	<u> </u>		ation covered by	-	up ruling?	? Yes	Nc
	_		ackage in the mail, it should file a return	n without financial data	1		I digit GEN				
_			a complete return	<u> </u>	_	Check	_	-		n is no t requir	
			es 6b, 8b, 9b, and 10b to line 12	500,48			ch Sch B (Fo				-)
	art I		e, Expenses, and Changes in I		<u>salanc</u>	es (Se	e page 17	or th	<u>ie instr</u>	<u>"uctions)</u>	
	1	· ·	gifts, grants, and similar amounts receiv	ved	1 1			_[1		
	a	Direct public si			1a		<u>193,66</u>	4			
	b	Indirect public			1b				- 1		
!	c		ontobutions (grants)		1c			_			
	d		44 through 1c) (cash \$1				L <u>,445</u>)	1	d	<u> </u>	<u>,667</u>
	4		ce revenue including government fees a	nd contracts (from Part VII,	, line 93))		2	—		
	30 2	Webparson of	ues and assessments					3	—		
	Lit	Interest on sav	ings and emporary cash investments					4			<u>,631</u>
	<u> </u> 5⊢		interest from secunties	,				5		<u> </u>	<u>,932</u>
	6a	GCDEN,			6a			_[
	 	tess rental ex	penses		6b			_⊧	-		
	С	Net rental inco	me or (loss) (subtract line 6b from line 6	ŝa)				6	c		
R	7	Other investme	ent income (describe				<u>.</u>	7			
٧	8a	Gross amount	from sales of assets other	(A) Secunties		(B)	Other				
e	1	than inventory		<u>126,451</u>	8a			_			
u	b	Less cost or o	ther basis and sales expenses	154,209				_			
E E	С	Gain or (loss) ((attach schedule)	<u>-27,758</u>				_			
29	d	Net gain or (los	ss) (combine line 8c, columns (A) and (E	3)) See Stmt	1			8	d		<u>,758</u>
	9	Special events	and activities (attach schedule)								
2	a	Gross revenue	(not including \$	of				F	-		
APR		contributions re	eported on line 1a)		9a		<u>142,97</u>	<u>7</u>	- 1		
¥	Ь	Less direct ex	penses other than fundraising expenses	3	_9b		<u>47,64</u>	7			
	С	Net income or	(loss) from special events (subtract line	9b from line 9a)				9	С	95	<u>,330</u>
Ω	10a	Gross sales of	inventory, less returns and allowances		10a						
7	b	Less cost of g	oods sold		10Ь						
ž	С	Gross profit or	(loss) from sales of inventory (att sch)	(subtract line 10b from line	10a)			10	ic		
3 @ TX W SCANNED	11		(from Part VII line 103)						1	1	,826
ᄶ	12	Total revenue	(add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 1	10c, and 11)			<u> </u>	1	2		,628
Ē	13		ces (from line 44, column (B))						3		,926
X P	14	Management a	and general (from line 44, column (C))					1	4		,436
è	15	=	om line 44, column (D))					1	5		,094
5	16	Payments to a	ffiliates (attach schedule)					1			
0 5	17	-	es (add lines 16 and 44, column (A))					1		216	,456
	18		icit) for the year (subtract line 17 from lir	ne 12)				1			,172
A Ns	19		und balances at beginning of year (from					1		1,509	
e e t t	20		in net assets or fund balances (attach		:	See s	Stmt 2	<u> </u>	0		,147
s	21	=	und balances at end of year (combine li	•	•				1	1,519	

Form 990 (2002) Ronald McDonald House					Page 2
j j			s (B), (C), and (D) are req		
Functional Expenses and section 4947(a)(1) none	exempt chantable trusts b			ons)
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
2 Grants and allocations (attach schedule) Stmt 3	1			(<u>)</u>	585 V
(cash\$ 8,000 cash \$)	22	8,000	8,000	2,7	, ,
3 Specific assistance to individuals	23			` ,	٠
4 Benefits paid to or for members	24	-			
5 Compensation of officers, directors, etc	25	42,500	17,000	4,250	21,250
6 Other salaries and wages	26	55,659	49,523	1,561	4,57
7 Pension plan contributions	27	839	672	40	127
8 Other employee benefits	28				
Payroll taxes	29	7,509	5,089	445	1,975
0 Professional fundraising fees	30		- 1		- 1
1 Accounting fees	31	4,500		4,500	-
2 Legal fees	32				
3 Supplies	33	5,951	5,300	651	
4 Telephone	34	4,250	4,250		
5 Postage and shipping	35	2,000	1,400	600	
6 Occupancy	36				-
7 Equipment rental and maintenance	37	1,692	1,692		
8 Printing and publications	38	2,681	1,877	804	
9 Travel	39	4,846	4,846		
0 Conferences, conventions and meetings	40		2,020		-
11 Interest	41				
2 Depreciation, depletion, etc. (attach schedule)	42	26,131	26,131	<u>-</u>	
3 Other expenses not covered above (itemize) a	43a	20,131	20/131		
b See Statement 4	43b	49,898	42,146	5,585	2,16
o bee beatement 4	43c	45,650	42,140	3,363	` 2,10
d	43d				
•	43e				
4 Total functional expenses (add lines 22 - 43) Organizations	438	_			
completing columns (B)-(D), carry these totals to lines 13-15	44	216,456	167,926	18,436	30 004
loint Costs Check ▶ ☐ if you are following SOP 98-2	, ,	210,130	101,520	10,430	30,094
Are any joint costs from a combined educational campaign and	1 fundes	icina colleitation ranor	lod in (B) Broomm coi	7700c2	► 🛮 Yes 🔀 No
_		-	amount allocated to Proc		► □ IA2 EV W
iii) the amount allocated to Management and general				· · · · · · · · · · · · · · · · · · ·	
Part III Statement of Program Service Acc	ompli		amount allocated to Func		
Vhat is the organization's primary exempt purpose?	Ompni	siiii eiits (Gee pa	ge 24 or the mon	uctions)	Program Service
See Statement 5					Expenses
	nents in	a clear and concise n	nanner State the num	ber	(Required for 501(c)(3) (4) orgs & 4947(a)(1
If organizations must describe their exempt purpose achiever of clients served, publications issued, etc. Discuss achievement	nts that	are not measurable (Section 501(c)(3) and	(4)	trusts, but optional for
rganizations and 4947(a)(1) nonexempt chantable trusts mus a The operation of the Ronald					others)
a The operation of the Ronald home away from home for pare					
			n undergon	ng	
treatment of life threatening	ng 1			0 000 1	150.00
		(Grants and all	ocations \$	8,000)	159,920
D					
			_		
		(Grants and all	ocations 5)	
C					
			_		
· 		(Grants and all	ocations \$)	
a					
		(Grants and all	ocations \$)	
And the second s					
Other program services (attach schedule) Total of Program Service Expenses (should equal line 4)	-	(Grants and all			167,926

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

	Note	Where required, attached schedules and amounts with	thin the	description	(A)		(B)
		column should be for end-of-year amounts only			Beginning of year		End of year
	45	Cash - non-interest-bearing				45	
	46	Savings and temporary cash investments			238,837	46	177,050
			t	1			
	47a	Accounts receivable	47a	_			
	b	Less allowance for doubtful accounts	47b	e e ja		47c	
	40-	Diadaga sagawahia	40-	′			
	48a	Pledges receivable Less allowance for doubtful accounts	48a 48b			40-	
	49	Grants receivable	400			48c 49	
	50	Receivables from officers, directors, trustees, and key	, emala	vees		45	<u>-</u>
Α	30	(attach schedule)	y emplo	yces		50	
5	512	Other notes and loans receivable (attach		ł		30	
5	Jia	schedule)	51a				
8	١,	Less allowance for doubtful accounts	51b			51¢	
t	52	Inventones for sale or use	(J10			52	
5	53	Prepaid expenses and deferred charges				53	
•	54	Investments-securities See Stmt	6	► Cost X FMV	868,050	_	802,500
		Investments-land, buildings, and	•		000,000		002/500
		equipment basis	55a				
	ь	Less accumulated depreciation (attach	1				
		schedule)	55b			55c	
	56	Investments-other (attach schedule)		See Stmt 7	-	56	152,487
	57a	Land, buildings, and equipment basis	57a	683,037			
	þ	Less accumulated depreciation (attach					
		schedule) See Stmt 8	57b	299,895	380,293	57c	383,142
	58	Other assets (describe See Stmt 9	<u> </u>		24,956		6,674
				[
_	59	Total assets (add lines 45 through 58) (must equal lin	ne 74)		1,512,136	59	1,521,853
L	60	Accounts payable and accrued expenses			3,074	60	2,766
i	61	Grants payable		ļ		61	
a	62	Deferred revenue				62	
þ	63	Loans from officers, directors, trustees, and key empl	loyees (attach		. 1	
Ì		schedule)				63	
l t	64a	Tax-exempt bond liabilities (attach schedule)				64a	
	b	Mortgages and other notes payable (attach schedule))			64b	
e	65	Other liabilities (describe)			65	
S		T 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			2 074		0.866
_	66 Oraș	Total liabilities (add lines 60 through 65) inizations that follow SFAS 117, check here		ampleto base	3,074	66	2,766
	Orga	67 through 69 and lines 73 and 74	and C	ompiete inies			
NF	67	Unrestricted			981,812	27	968,332
e u	68	Temporanly restricted		ŀ	1,000		24,505
t n	69	Permanently restricted			526,250		526,250
, d		inizations that do not follow SFAS 117, check here	▶ □	and	320/230		3207230
A s B		complete lines 70 through 74	· _				
s a	70	Capital stock, trust principal, or current funds				70	
eΙ	71	Paid-in or capital surplus, or land, building, and equip	ment fu	nd I		71	
t a s n	72	Retained earnings, endowment, accumulated income				72	
C	73	Total net assets or fund balances (add lines 67 thro	ough 69	or lines			
0 8		70 through 72,					
Гs		column (A) must equal line 19, column (B) must equa	al line 2	11)	1,509,062		1,519,087
	74	Total liabilities and net assets / fund balances (add	d lines i	66 and 73)	1,512,136	74	1,521,853

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.

DAA

990 (2002) Ronald McDona							econciliation o	f Ex	ens	es pe	r Audited	
				ŀ		•••••		_		_		
			•	ı								
Total revenue, gains, & other support	Т				a	Total expenses	and losses per		П			
per audited financial statements	a	ĺ	326,3	86		audited financial	statements		a		316,3	36:
Amounts included on line a but not on		7.5	٠ ١	,	ь	Amounts include	ed on line a but not			٧	, ,	
line 12, Form 990			^			on line 17, Form	990					
Net unrealized gains on					(1)	Donated service	s and use				,	
investments \$			^ *	- 4		of facilities \$, °	•	
Donated services and use	1	1	`		(2)	Pnor year adjust	tments		1	,	**	
of facilities \$					• •	-						
Recovenes of prior	1					Form 990 \$	•					
year grants \$			36		(3)	Losses reported	on line 20,		1		1	
·	7				` '	Form 990 \$		147				
•			,		(4)	Other (specify)			1	:	,	
\$.*	<		` '		See Stmt	11		کی را		
Add amounts on lines (1) through (4)	٦ь					s						
						Add amounts or			1ы		99,9	905
Line a minus line b	c		326.38	86l	С			•	c			
Amounts included on line 12,	Ť			\dashv	d			-	广			
Form 990 but not on line a			-	1								
		,		ļ	(1)					,		
not included on line 6b,	İ	,	^ _^ / _c	- 1	,	•						
· ·				-								
Other (specify)	1			- 1	(2)				1		•	
* * * * * * * * * * * * * * * * * * * *				- 1	\- /	(,,					,	
		Ÿ		ı		\$						
	┑.		-27.7	58		Add amounts on	lines (1) and (2)	•			•	
	Ť		,_,,	Ť	A		• • • • • •	וח	H			
	e		298.63	28	-			•	اما		216.4	156
	rs. 1	rustees			nplo			npens	ated.	see pa	ge 26 of	
the instructions)	·				•	, (,		g	
(A) No					(B) 1	litle and average	(C) Compensation	(D)	Contr	ib to		
(A) Name and addres	s 			no	urs p	position	(If not paid, enter	plan	s & de	ferred ation		
		-				-			•			
<u>ee Statement 12</u>											_	
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		•										
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	_					-		 				
								1			I	
Did any officer, director, trustee, or key er	יסוחת	ee receive	angregate 4	COM	nenr	ation of more than	n \$100 000 from vo] !r			L	
	Financial Statements Return (See page 26) Total revenue, gains, & other support per audited financial statements Amounts included on line a but not on line 12, Form 990 Net unrealized gains on investments Donated services and use of facilities Recovenes of prior year grants Other (specify) \$ Add amounts on lines (1) through (4) Line a minus line b Amounts included on line 12, Form 990 but not on line a linvestment expenses not included on line 6b, Form 990 See Stmt 10 \$ -27,758 Add amounts on lines (1) and (2) Total revenue per line 12, Form 990 (line c plus line d) Int V List of Officers, Director the instructions)	Financial Statements wir Return (See page 26 of total revenue, gains, & other support per audited financial statements Amounts included on line a but not on line 12, Form 990 Net unrealized gains on investments Donated services and use of facilities Recoveries of prior year grants Other (specify) Shatements Add amounts on lines (1) through (4) Line a minus line b Amounts included on line 12, Form 990 but not on line a linvestment expenses not included on line 6b, Form 990 Other (specify) See Stmt 10 Shatements 10 Shatements wire page 26 of total revenue per line 12, Form 990 (line c plus line d) (A) Name and address	Financial Statements with Reveredurn (See page 26 of the instructions) Total revenue, gains, & other support per audited financial statements Amounts included on line a but not on line 12, Form 990 Net unrealized gains on investments Donated services and use of facilities Recoveries of prior year grants Other (specify) \$ Add amounts on lines (1) through (4) Line a minus line b Amounts included on line 12, Form 990 but not on line a linvestment expenses not included on line 6b, Form 990 Other (specify) See Stmt 10 \$	Financial Statements with Revenue per Return (See page 26 of the instructions) Total revenue, gains, & other support per audited financial statements Amounts included on line a but not on line 12, Form 990 Net unrealized gains on investments Donated services and use of facilities Recovenes of prior year grants Other (specify) Add amounts on lines (1) through (4) Line a minus line b Amounts included on line 12, Form 990 but not on line a linvestment expenses not included on line 6b, Form 990 Other (specify) See Stmt 10 \$	Financial Statements with Revenue per Return (See page 26 of the instructions) Total revenue, gains, & other support per audited financial statements Amounts included on line a but not on line 12, Form 990 Net unrealized gains on investments Donated services and use of facilities Recovenes of prior year grants Cher (specify) Sea Stmt 10 Sea Stmt	Financial Statements with Revenue per Return (See page 26 of the instructions) Total revenue, gains, & other support per audited financial statements Amounts included on line a but not on line 12, Form 990 Net unrealized gains on investments Donated services and use of facilities Recovenes of prior year grants Other (specify) Line a minus line b Amounts included on line 12, Form 990 but not on line a linvestment expenses not included on line 6b, Form 990 Other (specify) See Stmt 10 Line c plus line d) Add amounts on lines (1) and (2) Total revenue per line 12, Form 990 (line c plus line d) Add amounts on lines (1) and (2) Total revenue per line 12, Form 990 (line c plus line d) Add amounts on lines (1) and (2) Total revenue per line 12, Form 990 (line c plus line d) Add amounts on lines (1) and (2) List of Officers, Directors, Trustees, and Key Emplethe instructions) (A) Name and address	Financial Statements with Revenue per Return (See page 26 of the instructions) Total revenue, gains, & other support per audited financial statements	Financial Statements with Revenue per Return (See page 26 of the instructions) Total revenue, gains, & other support per audited financial statements Amounts included on line a but not on line 12, Form 990 Net unrealized gains on investments \$ Donated services and use of facilities \$ Cother (specify) Add amounts on lines (1) through (4) See Stimt 10 \$	Financial Statements with Revenue per Return (See page 26 of the instructions) Total revenue, gains, & other support per audited financial statements	Financial Statements with Revenue per Return (See page 26 of the instructions) Total revenue, gains, & other support per audited financial statements a 326,386 Amounts included on line a but not on line 12, Form 990 Net unrealized gains on investments 5 Donated services and use of facilities 5 Other (specify) 5 Add amounts on lines (1) through (4) b Line a minus line b c 326,386 Amounts included on line 12, Form 990 5 Cither (specify) 5 Cither (specify) 6 Cither (specify) 7 Cither (specify) 7 Cither (specify) 7 Cither (specify) 8 Cither (specify) 9 C	Financial Statements with Revenue per Return (See page 26 of the instructions) Total revenue, gains, & other support per audited financial statements Amounts included on line a but not on line 12, Form 990 Net unrealized gains on investments \$ Donated services and use of facilities \$ Recovenes of pnor year grants \$ Other (specify) Add amounts included on line 12, Form 990 \$ Other (specify) See Stimt 10 See Stimt	Financial Statements with Revenue per Return (See page 26 of the instructions) Total revenue, garns, & other support per audited financial statements Amounts included on line a but not on line 12, Form 990 Net unrealized gains on investments \$ Other (specify) Line a minus line b Amounts included on line 12, Form 990 Line a minus line b Amounts included on line 20, Form 990 See Stimt 10 \$ Add amounts on lines (1) through (4) > Call (4) Other (specify) See Stimt 10 \$ Add amounts on line 6b, Form 990 Cher (specify) See Stimt 10 \$ \$ Add amounts on line 6b, Form 990 Cher (specify) See Stimt 10 \$ \$ Add amounts on line 12, Form 990 Cher (specify) Add amounts on line a lines (1) through (4) > Call (1) Investment expenses ont included on line 6b, Form 990 Cher (specify) Add amounts on lines (1) through (2) > Cher (specify) See Stimt 10 \$ \$ Add amounts on line 6b, Form 990 Cher (specify) See Stimt 10 \$ \$ Add amounts on lines (1) through (2) > Cher (specify) See Stimt 10 \$ \$ Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) See Stimt 10 \$ \$ Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on lines (1) and (2) > Cher (specify) Add amounts on

Form	990 (2002) Ronald McDonald House Charities of 59-2172279		Pa	age 5
<u> </u>	ort 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	76		_X_
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
	If "Yes," attach a conformed copy of the changes		,	. 123
78a	Did the organization have unrelated business gross inc. of \$1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a			_
	statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common	^		23
	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes " enter the name of the organization		•	
	and check whether it is exempt or nonexempt		-	,
81a	Enter direct or indirect political expenditures. See line 81 instr.	lj		٠,
b	Did the organization file Form 1120-POL for this year?	81Ь		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		Х
ь	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.)			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	x	
ь	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
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions	-		
_	or gifts were not tax deductible? N/A	84b		
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A	85a		
ь	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b		
Ü	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	030		
	received a waiver for proxy tax owed for the prior year			
_				
ب 2	Dues, assessments, and similar amounts from members Section 463(a) telebrate and political available assessments.			
d	Section 162(e) lobbying and political expenditures 85d			6
8	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			٠
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f	{		ĺ
9	Does the organization elect to pay the section 6033(e) tax on the amount in 85f? N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable	l		
	estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h		
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12			
ь	Gross receipts, included on line 12 for public use of club facilities 86b			
87	501(c)(12) orgs Enter a Gross income from members or shareholders			
þ	Gross income from other sources. (Do not net amounts due or paid to other			
	sources against amounts due or received from them)	!		۶,
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 7701-37 If "Yes," complete Part IX	88		<u>X</u>
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	1 ~ †		,6
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		i	
	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			
90a	List the states with which a copy of this return is filed None			
ь	Number of employees employed in the pay period that includes March 12, 2002 (See instructions)		5	
91	The books are in care of ▶ Bill Massey Telephone no ▶ 850-	435		00
	Located at ▶ 900 N. 12th Avenue, Pensacola, FL ZIP+4 ▶ 32501			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year			
		Form	990	(2002)

ESIDONT

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

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 org		- E			Employer identifi	cation number
	d McDonald House Charities cola, Inc.	OI			59-217227	٥
Part I	Compensation of the Five Highest Pa	id Employees Other T	han (Officers, Du	rectors, and Trus	tees
	(See page 1 of the instructions List ea					
(a)	Name and address of each employee paid more than \$50 000	(b) Title and average hours per week devoted to position	(c)	Compensation	(d) Contributions to employee ben plans & deferred compensation	(e) Expense account and other allowances
None						
					200	
Total number \$50,000	of other employees paid over					
Part II	Compensation of the Five Highest Pai (See page 2 of the instr List each one	id Independent Contra (whether individuals or	ctors	s for Profes s) If there a	sional Services are none, enter "l	None ")
	(a) Name and address of each independent contractor pa	aid more than \$ 50 000		(b) Type	of service	(c) Compensation
None						
				_		
						
Total number professional s	of others receiving over \$50,000 for ervices					
For Panerwoo	rk Reduction Act Notice, see the Instructions for	Form 900 and Form 900 E7			Schodulo A (Form 00	0 000 ET) 0000

Sch	edule	A (Form 990 or 990-EZ) 2002 Ronald McDonald House Charities of 59-217227	9	<u>P</u> :	age 2
` , P.	art l	Statements About Activities (See page 2 of the instructions)		Yes	No
1	Đu	nng the year, has the organization attempted to influence national, state, or local legislation, including any			
	atte	empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid	1		X
	Ot 1	ncurred in connection with the lobbying activities		1.5	•
		t VI-A, or line I of Part VI-B)			
		ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other			
		anizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of	- [133	
_		lobbying activities	-		
2		nng the year, has the organization, either directly or indirectly, engaged in any of the following acts with any estantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or		٠.,	_
		n any taxable organization with which any such person is affiliated as an officer, director, trustee, majority			ĺ
		ner or principal beneficiary? (If the answer to any question is "Yes" attach a detailed statement explaining the		`	
		nsactions)	- .		`
а	Sal	e, exchange, or leasing of property?	2a		_x
Ь	Ler	ding of money or other extension of credit?	2b		Х
	_				
C	Fur	mishing of goods services, or facilities?	2c	ļ	X
	D-	mont of company (as an extensive transition of the company of the	١]
d	Pa	yment of compensation (or payment or reimbursement of exp. if more than \$1 000)? See Stmt 13	2d	X	-
е	Tes	insfer of any part of its income or assets?			х
٠	116	male of any part of its income of assets?	_2e	 	
3	Do	es the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below)	3		Х
4		you have a section 403(b) annuity plan for your employees?	4		x
Note		ach a statement to explain how the organization determines that individuals or organizations receiving grants		,	
		rom it in furtherance of its charitable programs "qualify" to receive payments			
p:	art l	V Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)			
	orga.	nization is not a private foundation because it is (Please check only ONE applicable box)			
5	Η	A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)			
6 7	Η	A school Section 170(b)(1)(A)(ii) (Also complete Part V) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)			
8	Η	A Federal state, or local government or governmental unit. Section 170(b)(1)(A)(v)			
9	Н	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)(ıv)		
		(Also complete the Support Schedule in Part IV-A)			
11a	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public			
44-	П	Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
11b	H	A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
12	Ц	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 chantable, 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 acquir			
		by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)	ilea		
13	П	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations	į.		
	_	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 n	numbe	r
		(e) italise(s) of authorized organization(s)	from a	above	
14	П	An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)			

DAA

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

Page 4 Private School Questionnaire (See page 7 of the instructions) Parf V (To be completed ONLY by schools that checked the box on line 6 in Part IV) N/A Yes No 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 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 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) 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 32b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 32c 32d 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) Does the organization discriminate by race in any way with respect to Students' rights or privileges? 33a b Admissions policies? 33b c Employment of faculty or administrative staff? 33c d Scholarships or other financial assistance? 33d Educational policies? 33e Use of facilities? 33f Athletic programs? 33g h Other extracumcular 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

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

Schedule A (Form 990 or 990-EZ) 2002 Part VI-A Lobbying Exper	Ronald McI	Oonald Hous	e Char:	iti age 9	es of !	59 - 2 structio	172	279	Page 5
	d ONLY by an elig					N/A			
. 11	ongs to an affiliated gro			_		nd "limit	ed co	ntrol" provisions a	ppty
	n Lobbying Exper				(a Affiliated (als	(b) To be comple for ALL electi organization	ated ng
	litures" means amounts							organization	ns
36 Total lobbying expenditures to influen				36					
37 Total lobbying expenditures to influen	-	irect lobbying)		37					
38 Total lobbying expenditures (add lines	35 and 37)			38					_
39 Other exempt purpose expenditures40 Total exempt purpose expenditures (a	idd lings 38 and 30)			39 40					
41 Lobbying nontaxable amount Enter the		owno table.		40					
If the amount on line 40 is-		ontaxable amount is	·-						
Not over \$500,000	20% of the amo		´					. 1	
Over \$500,000 but not over \$1,000,00		5% of the excess ove	r \$500.000			′ ′		<i>"</i> ,	
Over \$1,000,000 but not over \$1,500,		0% of the excess ove	4 1	41				^′	
Over \$1,500,000 but not over \$17,000									
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				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 eith	er line 43 or line 44, vo	u must file Form 4720	,			~			:
Saston Waller to All Amount on Cit		ging Period Und		501	(h)			l	
(Some organization	s that made a section 5					columns	s belov	w	
	structions for lines 45							-	
-									
		Lobbying Ex	penaitures L	Juring	4-Year Ave	raging	Perio	a 	
Calendar year (or	(a)	(b)	(c))		(d)		(e)	
fiscal year beginning in)	2002	2001	200	00		1999		Total	· -
45 Lobbying nontaxable amount									
46 Lobbying ceiling amount (150% of			ļ						
line 45(e))			,			,*			
47 Total lobbying expenditures									
48 Grassroots nontaxable amount			ļ						
49 Grassroots ceiling amount (150% of									
line 48(e))						·			
50 Grassroots lobbying expenditures									
	y by Nonelecting	Public Charities	<u>l</u>						
	ly by organization			l VI-A	\) (See na	ae 11	of th	ne instri)	N/A
During the year, did the organization atten					,, (-		
attempt to influence public opinion on a le				•		Yes	No	Amount	
a Volunteers									
b Paid staff or management (include of	compensation in expens	ses reported on lines	c through h)						
c Media advertisements						\coprod]		
d Mailings to members, legislators, or	•								
Publications, or published or broadc						\vdash			
f Grants to other organizations for lob		uala and the second	_			\vdash			
g Direct contact with legislators, their			-			 			
 h Rallies demonstrations, seminars, or i Total lobbying expenditures (add line) 		lectures, or any other	means						 -
If "Yes" to any of the above, also att		a detailed description	of the lobbies	na set	wies	<u> </u>			
			or are recover	.y 60L					

Schedule A (Form	n 990 or 990-EZ) 2002 Information Reg			ise Charities of 59-217227		<u>Р</u>	age 6
• •			ee page 12 of the instru				
51 Did the rep				ing with any other organization described in section	-	_	
				527, relating to political organizations?			
a Transfers fi	rom the reporting organ	nization to a	nonchantable exempt organiza	tion of		Yes	No
(i) Cash	1				51a(ı)		Х
(il) Othe	r assets				a(ii)		Х
b Other trans	actions						
			nchantable exempt organization	1	b(i)		X
			le exempt organization		b(ii)	 	X
• •	al of facilities, equipme		assets		P(m)		X
	bursement arrangeme	nts			b(iv)	<u> </u>	X
	s or loan guarantees				b(v)	ļ. —	<u> </u>
			or fundraising solicitations		b(vi)	-	X
		_	other assets, or paid employees		<u> </u>		X
				column (b) should always show the fair market value	of the		
				panization received less than fair market value in any			
(a)	(b)	II, SHOW III C		s, other assets, or services received			
Line no	Amount Involved	Name	(c) of noncharitable exempt organization	(d)			
N/A	Amount involved	I I I I I I I I I I I I I I I I I I I	i nonchaniapie exempt organization	Description of transfers transactions and shan	ng arrange	ments	
		<u> </u>	<u> </u>	 			
	 			-			
		_					
					<u>*-</u>		
						-	
				<u></u>			
		<u> </u>					
		ļ					
	L ,	<u> </u>	<u> </u>				
descnbed in		Code (other	d with, or related to, one or mo than section 501(c)(3)) or in se		_ Y	es 🗓	No
	(a)	_	(b)	(c)			
	Name of organization		Type of organization	Description of relationship			
<u> </u>							
		_					
						_	
		_					
		-					
		_					
							
 _							
	.						
	 -						
	<u></u> .						
				 		_	
				<u> </u>			

Gross revenue

Less direct expenses

Net income (loss)

000	<u> </u>	Special Events Schedule					
Form 990	For calendar year 2002, or tax year	ar beginning	, and endir	ng	2002		
Name	onald House Charit		•	Employer I	dentification Number		
Pensacola,			 _	59-21	72279		
	(A)	(B)	(C)	Others	Total		
Gross receipts	28,257	100,246	14,474	0	142,977		
Less contributi	ons <u>0</u>	0	0	0	0		

100,246

62,822

37,424

14,474

1,281

13,193

142,977

47,647

95,330

0

Descriptions A)	Firecracker 5K Run
В)	Kaps for Kids
C)	Scooper Bowl
Others	

28,257

8,942

19,315

	· -		
3/24/2003 2 34 PM		Gain/ -Loss	\$ -27,758
3124120	S	Deprec	○
	itory - Securitie	Cost & Expense	\$ 154,209
"	ne 8c - Sale of Assets Other Than Inventory - Securities	Sale Pnce	\$ 126,451
itements	f Assets Ot	Date Sold	Various
Federal Statements	Line 8c - Sale o	Date Acquired	Various
	Statement 1 - Form 990, Part I, Lir	Whom	
	Statement 1	How Rec'd	Purchase
59-2172279 FYE 12/31/2002		'	Sale of securities Pur Total

3/24/2003 2 34 PM

613 Ronald McDonald House Charities of 59-2172279 Federal Statements
FYE 12/31/2002

Statement 2 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

	Description							
Unrealized loss on i	nvestment securities	\$_	72,147					
Total		\$	-72,147					

613 Ronald McDonald House Charities of 59-2172279

Federal Statements

FYE 12/31/2002

Statement 3 - Form 990, Part II, Line 22 - Grants, Allocations, and Contributions

Description	Cash Contribution	Noncash Contribution
Sacred Heart Miracle Camp Grant	\$8,000	\$
Total	\$8,000	\$0

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

Description	To Expe	tal ns <u>es</u>	Program Service	Mgt & General	Fund- Raising
	\$	\$		\$	\$
Expenses					
Bank Charge		351		351	
Employee Health Insurance		6,690	4,771	459	1,460
House Maintenance		6,061	6,061		
Miscellaneous		4,878	3,539	1,339	
Other Insurance	1	3,743	10,307	3,436	
Promotions & Entertainment		6,217	5,510		707
Utilities	1	1,958	11,958		
Total	\$ 4	9,898 \$	42,146	\$ 5,585	\$ 2,167

Statement 5 - Form 990, Part III - Organization's Primary Exempt Purpose

To provide a home away from home for parents of children undergoing treatment for life threatening illnesses

Federal Statements

FYE 12/31/2002

Statement 6 - Form 990, Part IV, Line 54 - Investments in Securities

Description	Beginning of Year	End of Year	Basis of Valuation
US and State Government Government Bonds	111,454	108,084	Market
Corporate Stock Common Stocks Preferred Stocks	429 ,932 277,950	340,598 283,482	Market Market
Corporate Bonds Corporate Bonds	48,714	70,336	Market
-	868,050	802,500	

Statement 7 - Form 990, Part IV, Line 56 - Other Investments

Description	Beginning of Year	End of Year	Basis of Valuation				
Certificates of Deposit	\$	\$ 152,487	Market				
Total	\$0	\$ 152,487					

Statement 8 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description

		Beginning of Year	Accum Deprec	_	End of Year	Accum Deprec
Building & Improvements	<u> </u>	607 300 ¢	220 171	_	500 363 6	227 220
Equipment	Þ	607,328 \$	238,171	Þ	588,363 \$	237,298
Furniture & Fixtures		38,882	32,020		39,175	16,590
	_	47,004	42,730	_	55,499	46,007
Total	\$_	693,214 \$	312,921	\$_	683,037 \$	299,895

Statement 9 - Form 990, Part IV, Line 58 - Other Assets

Description	E	Beginning of Year	 End of Year
Due from Affiliate Prepaid Insurance Cash Restricted for Capital Campaign Deposits	\$	21,382 574 1,000 2,000	\$ 3,674 1,000 2,000
Total	\$	24,956	\$ 6,674

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613 Ronald McDonald House Charities of 59-2172279 **Fede**

Federal Statements

FYE 12/31/2002

Description		Amount
Realized loss on investment securities	\$_	-27,758
Total	\$	-27,758

Statement 11 - Form 990, Part IV-B - Other Expenses Included in Financial Statements

Description	 Amount
Realized loss on investment securities	\$ 27,758
Total	\$ 27,758

Federal Statements

Statement 12 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees

	City, State, Zip		5154 Bayou Blvd, Pensacola, FL		5154 Bayou Blvd, Pensacola, FL	בייוסני זה מהמשת בריים	Guil Breeze, ru 32562		Face, FD 325/1	Pensacola, FL 32520		Pensacola, FL 32501		Pensacola, FL 32504		Pensacola, FL 32501		Pensacola, FL 32503		Pensacola, FL 32501		Pensacola, FL 32503		Shalımar, FL 32579		Pensacola, FL 32501		Lynn Haven, FL 32444		Gulf Breeze, FL 32563		Mary Esther, FL 32569		Pensacola, FL 32501		Pensacola, FL 32503
Average Hours	Address	40		40	(ν)	ſ	n	,	ace.	м		Э	Hwy.	м	/e.	m	.e.	m	3t.	m	lve.	m	lub Rd	m	St	๛	Log N	ຕິ	ırcle	m	:le	м	St.	m	ox St
Title		Director		Manager	1 · · · · ·	Ξ:	:		V. Drosident 2	One Energy Pla	V President 3	7 E Desoto St.	Secretary 3	6700 N Davis	Treasurer	900 N 12th Ave.	Director	4751 N 9th Ave.	Director	30 S Spring St.	Director	2616 N. 12th A	Director	302 Country Cl	Director	100 W Garden	Director 3	909 College Bl	Director	1176 Jaquar Circle	Director	140 Brian Circle	Ü	100 W Garden St.	'n	6310 N Palafox St
	Expenses		0	•	0	C	>	C	0	0		0		0		0		0		0		0		0		0		0		0		0		0	•	0
Name	Benefits		133	ļ	54 I	c	>	c	o	0		0		0		0		0		0		0		0		0		0	1	0		0		0	•	0
Ne	Comp	Andrea Farage	42,500	Paige Adams	27,150	Anna Barbee	7 7 1	Mike Roberts	Brett Shaw		George Koper	0	Cathy England	0	Bıll Massey	0	Deborah Benn	0	Alan Bookman		Ed Carson	0	John Cargill	0	Trice Dukes	0	Tracy Johnstone		Bill Luttrell	0	Scott MacFadyen	0	Joe Miller	0	Jerry Mock	0

613 Ronald McDonald House Charities of59-2172279FYE 12/31/2002

Federal Statements

Statement 12 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees (continued)

	Cıty, State, Zıp	•	Pensacola, FL 32504		Pensacola, FL 32504		Pensacola, FL 32501		Pensacola, FL 32504		Ft Walton Beach, FL 32547 ·		Gulf Breeze, FL 32561		Gulf Breeze, FL 32561		Pensacola, FL 32504		Pensacola, FL 32503
Average Title Hours	yenses Address	Director 3	0 5225 Carmel Heights Rd.	Director 3	0 5153 N. 9th Ave.	Director 3	0 180 Governmental Center	Director 3	0 6330 N. Davis Hwy	Director 3	0 610 N Eglın Parkway	Director 3	0 1171 Gulf Breeze Pkwy	Director 3	0 P O. Box 579	Director 3	0 5151 N 9th Ave	Director 3	0 4400 Bayou Blvd , Ste 34
Nате	Comp Benefits Expenses	Michelle Newchurch	0 0	Cortney Owens	0 0	Derrik Owens	0	David Turner, M D.	0	King Vaughn	0 0	Rick West	0	Harry Wilder	0	Karen Emmanuel	0 0	Carolyn Appleyard	0 0

613 Ronald McDonald House Charities of 59,2172279 Federal Statements

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FYE 12/31/2002

Statement 13 - Schedule A, Part III, Line 2d - Payment of Compensation / Reimbursement of <u>Exp</u>

See Part V, Form 990

613 Ronald McDonald House Charities of

59-2172279

Federal Statements

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FYE 12/31/2002

Statement 14 - Schedule A, Part IV-A, Line 22 - Other Income

Description		2001		2000		1999		1998	
Miscellaneous Income	\$_	1,930	\$_	1,285	\$_	2,544	\$_	370	
Total	\$_	1,930	\$_	1,285	\$_	2,544	\$_	370	

Ronald McDonald House Fixed Asset Depreciation Schedule 31-Dec

Class	Asset Number	Description	Date Acquired	Life	Cost	Dec-01 Accumulated Deprec	2002 Deprec	Dec-02 Accumulated Deprec	Dec-02 Book Value
Building	1 Build		10/15/84	40	462,039	198,773	11,551	210,324	251,715
Building		Improvements 85	06/30/85	40	9.272	3,827	232	4,059	5,213
Building		Improvements 86	06/30/86	40	3 580	1,394	90	1,483	2,097
Building Building		room Floor Rm 6 Protection System	12/31/97 05/19/92	40 40	2 600 33,890	265 8,189	65 847	330 9,036	2,270 24,854
Building		s by Mgrs Office	02/25/95	10	1,400	968	140	1,108	292
Building		enovations	01/01/97	40	27,500	3,439	688	4,126	23,374
Building		Roof for House	01/31/01	15	42 882	2 859	2,859	5,718	37,165
Building	89 Drain	nage improvements	06/30/01	7	5 200	371	743	1,114	4,086
					588 363	220,084	17,214	237,298	351,065
Disposats	- 2002								
	15 Carp	et	06/30/97	7	649	425	224	649	(0)
		et & Paint	11/15/91	7	15 700	15 700	-	15,700	•
	83 Carp	et for Rooms	10/01/99	3	<u>2 616</u>	1,962	<u>654</u>	2,616	•
					<u>18 965</u>		18,092	18,965	
_				_					
Equip		er/Fax/Scanner	08/11/97	3	627	627	740	627	875
Equip	11 Sum 17 Van	p Pump	03/17/97 06/15/91	7 5	5 246 1,633	3,621 1 633	749	4,371 1,633	8/3
Equip Equip	17 van 34 Heat	Dump	09/29/95	5	4 000	4,000	-	4 000	-
Equip		Nater Heater	05/17/95	5	187	187	-	187	(0)
Equip		hing Mach & Dryer	05/15/96	5	600	600	_	600	- '
Equip		st Pump	02/18/98	5	800	627	160	787	13
Equip	84 Heat	er/AC Room 7	12/31/99	5	2,300	920	460	1,380	920
Equip	86 Lapte	op computer	05/31/01	3	1,768	344	589	933	835
Equip	87 Free		10/01/01	5	890	44	178	222	667
Equip		Unit Room 6	11/01/01	5	996	33	199	232	764
Equip		tronic Door Lock	01/02/02	5	1,519	-	304	304	1,215
Equip		Units 5 Rooms	01/02/02 03/27/02	5 5	4 731 1 109	•	946 166	946 166	3,785 943
Equip		ibing upgrades phone system	09/30/02	5	1,745	-	87	87	1,658
Equip Equip		ell Dimension 8200's	11/30/02	3	4.074		113	113	3,961
Equip		ımidıfier (Comm grade)	12/31/02	3	4,950	-	-	-	4,950
Equip		room fans	12/31/02	3	2 000				2,000
•					39 175	12 637	3 953	16, <u>5</u> 90	22 585
Disposats	- 2002								
Equip		ntosh Computer	10/31/95	3	4,316	4 316	-	4,316	-
Equip	39 Dish		05/08/95	5	429	429	-	429	0
Equip	40 Dish		06/30/95	5	429	429	-	429	0
Equip	65 Com	puter & Printer	09/12/96	3	400	400	-	400	(0)
Equip		ne System	12/30/96	5	843	843	-	843	(0)
Equip	75 PA S		08/20/98	5	1,185	810	375	1,185	-
Equip		puter System	07/27/98	3	7,227	7,227	-	7,227	-
Equip	80 Com	•	03/20/98	3	300	300	-	300	· (0)
Equip	82 Cam	puter	10/07/98	3	2,090	2 090	-	2 090	(0) -
	Adju	stment for #87&88	(a)		2,616		78	2 6 1 6	
					19 835		4 406	<u>19 835</u>	

⁽a) Disposal of book value for a/c units disposed in 2001 that were not properly removed from general ledger as of 12/31/01

Ronald McDonald House Fixed Asset Depreciation Schedule 31-Dec

			Data			Dec-01		Dec-02	Dec-02
Class	Asset Number	Description	Date Acquired	Life	Cost	Accumulated Deprec	2002 Deprec	Accumulated Deprec	Book Value
0,250	110111001	Description	, ioquiles	Ļ.10	0031	Серісс	Deprec	Deprec	Value
Fum	,	n & Fixtures	10/15/84	10	19,714	19,714	-	19,714	•
Fum		niture 1985	06/30/85	10	417	417	•	417	-
Fum	6 File	Cabinet	06/30/86	10	263	263	-	263	-
Fum	10 Sof	-	07/17/90	10	589	589	-	589	0
Fum	13 Des		07/01/90	10	917	917	-	917	0
Fum	18 Day	ybed	05/28/91	5	400	400	-	400	-
Fum	19 Fur		12/15/91	5	2,610	2,610	-	2,610	-
Fum	25 Fur		06/30/97	10	549	252	55	307	242
Fum	32 Des		06/30/97	10	300	138	30	168	132
Fum	33 VCI	R	06/30/95	5	225	225	-	225	-
Fum	38 Cat	pinet	12/29/95	5	173	173	-	173	0
Fum	41 Fire	Alarm System	09/29/95	7	3 798	3,438	360	3 798	0
Fum	42 Ste	llite Dish System	12/06/95	5	1,300	1,300	•	1,300	-
Fum	45 Cre	denza	12/29/95	5	230	230	•	230	-
Furn	46 Exe	cutive Chair	12/29/95	5	259	259	-	259	0
Fum	47 Am	n Chair Task	12/29/95	5	111	111	-	111	(0)
Fum	48 Am	n Chair Task	12/29/95	5	111	111	•	111	(0)
Furn	62 Offi	ce Furniture	06/30/95	5	2,500	2,500	-	2,500	-``
Furn	63 Cat	oinets	04/01/95	5	304	304	-	304	0
Fum	64 Was	shing Machine	01/01/95	5	450	450	-	450	-
Fum	71 Frai	med Prints	12/11/98	5	1,500	925	300	1,225	275
Fum	72 Xer	ox Copier	11/23/98	5	500	317	100	417	83
Furn	73 Pos	iters	07/16/98	5	300	210	60	270	30
Furn	74 Frai	med Cells	03/17/98	5	4,500	3 450	900	4,350	150
Fum	76 Tele	evisions	01/01/98	5	427	341	85	427	a
Fum	81 Hea	at Pump	10/15/98	5	4,200	2,730	840	3 570	630
Fum		pet for Rooms	03/02/02	5	2,852	•	475	475	2,377
Furn		v Beds (12)	06/30/02	7	6,000	-	429	429	5 571
					55,499	42,373	3,634	46 007	9,492
Disposals									
Disposais					-	-	-	-	•
Furn	24 Ceil	ing Fans	06/26/92	5	357	357	•	357	-
					357	357		357	
							3,634		
	Tota	als			683 037	275 094	26,132	299,895	383 142