

Return of Organization Exempt from Income Tax

2001

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

Tucson Association For The Blind and Visually Impaired, Inc
3767 E Grant Road
Tucson, AZ 85716

D Employer identification number

86-6056057

E Telephone number

(520) 795-1331

F Accounting method

Cash Accrual

Other (specify) _____

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

H and I are not applicable to Section 527 organizations

H (a) Is this a group return for affiliates? Yes 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 No

I Enter 4-digit group GEN _____

M Check 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)

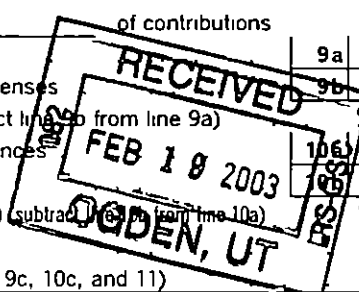
501(c) 3 (insert no) 4947(a)(1) or 527

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 12 959,426

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

1 Contributions, gifts, grants, and similar amounts received				
a Direct public support	1a	119,452		
b Indirect public support	1b			
c Government contributions (grants)	1c	448,671		
d Total (add lines 1a through 1c) (cash \$ 538,676 noncash \$ 29,447)	1d		568,123	
2 Program service revenue including government fees and contracts (from Part VII, line 93)	2		232,993	
3 Membership dues and assessments	3		2,085	
4 Interest on savings and temporary cash investments	4			
5 Dividends and interest from securities	5		48,696	
6a Gross rents	6a			
b Less rental expenses	6b			
c Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7 Other investment income (describe _____)	7			
8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
b Less cost or other basis and sales expenses	8a			
c Gain or (loss) (attach schedule) Statement 1	8b	1,669		
d Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	-1,669		
9 Special events and activities (attach schedule)				
a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	83,744		
b Less direct expenses other than fundraising expenses	9b	52,537		
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c		31,207	
10a Gross sales of inventory, less returns and allowances	10a	23,785		
b Less cost of goods sold	10b	20,088		
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		3,697	
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		885,132	
13 Program services (from line 44, column (B))	13		834,228	
14 Management and general (from line 44, column (C))	14		201,908	
15 Fundraising (from line 44, column (D))	15		35,534	
16 Payments to affiliates (attach schedule)	16			
17 Total expenses (add lines 16 and 44, column (A))	17		1,071,670	
18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		-186,538	
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		1,890,841	
20 Other changes in net assets or fund balances (attach explanation) See Statement 4	20		-26,738	
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		1,677,565	



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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) See Stmt 5 (cash \$ 5,800 non cash \$)	5,800	5,800		
23	Specific assistance to individuals (att sch)				
24	Benefits paid to or for members (att sch)				
25	Compensation of officers, directors, etc	55,000	42,900	10,450	1,650
26	Other salaries and wages	584,459	456,816	111,891	15,752
27	Pension plan contributions				
28	Other employee benefits	37,142	26,580	8,523	2,039
29	Payroll taxes	52,106	41,044	9,624	1,438
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees				
33	Supplies	34,924	27,960	4,256	2,708
34	Telephone	11,944	9,981	1,718	245
35	Postage and shipping	2,304	1,946	293	65
36	Occupancy				
37	Equipment rental and maintenance	22,258	12,883	8,989	386
38	Printing and publications	2,097	1,631	423	43
39	Travel	9,672	9,662	10	
40	Conferences, conventions, and meetings				
41	Interest	1,560		1,560	
42	Depreciation, depletion, etc (attach schedule)	76,620	66,341	8,320	1,959
43	Other expenses not covered above (itemize)				
a	See Statement 6	175,784	130,684	35,851	9,249
b					
c					
d					
e					
44	Total functional expenses (add lines 22-43) Organizations completing columns (B) - (D), carry these totals to lines 13-15	1,071,670	834,228	201,908	35,534

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? <input type="checkbox"/> See Statement 7	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
a <u>Rehabilitation - Multi-faceted instructional activity for daily living for people with vision loss</u> (Grants and allocations \$ _____)	164,450
b <u>Employment Services - Counseling, Training, and placement of people with vision loss in jobs</u> (Grants and allocations \$ _____)	239,826
c <u>Socialization Recreation - Offers activities at the center and in the community to reinforce rehabilitation skills and provide social opportunities</u> (Grants and allocations \$ _____)	78,603
d <u>Adaptive technology/Loaner program - making accessible adaptive technology for people with vision loss as well as providing specialized equipment to assist these individuals</u> (Grants and allocations \$ _____)	96,593
e <u>Other program services See Statement 8</u> (Grants and allocations \$ 5,800)	254,756
f Total of Program Service Expenses (should equal line 44, column (B), program services)	834,228

Part IV Balance Sheets (See instructions)

Note		(A)		(B)	
Where required, attached schedules and amounts within the description column should be for end of year amounts only		Beginning of year		End of year	
ASSETS	45	Cash — non-interest-bearing	53,992	45	36,390
	46	Savings and temporary cash investments	239,376	46	191,427
	47a	Accounts receivable			
		b Less allowance for doubtful accounts		47c	
	48a	Pledges receivable			
		b Less allowance for doubtful accounts		48c	
	49	Grants receivable	62,227	49	114,090
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)	73,145	50	36,930
	51a	Other notes & loans receivable (attach sch)			
		b Less allowance for doubtful accounts		51c	
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges	3,201	53	7,825
	54	Investments — securities (attach schedule)	959,219	54	756,086
		<input type="checkbox"/> Cost <input type="checkbox"/> FMV			
	55a	Investments — land, buildings, & equipment basis	7,627		
		b Less accumulated depreciation (attach schedule) Statement 9	7,627	55c	7,627
	56	Investments — other (attach schedule)		56	
	57a	Land, buildings, and equipment basis	1,521,067		
		b Less accumulated depreciation (attach schedule) Statement 10	946,751	57c	574,316
58	Other assets (describe See Statement 11)	7,563	58	17,031	
59	Total assets (add lines 45 through 58) (must equal line 74)	2,050,012	59	1,741,722	
LIABILITIES	60	Accounts payable and accrued expenses	67,796	60	47,169
	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)	79,146	64b	
	65	Other liabilities (describe See Statement 12)	12,229	65	16,988
66	Total liabilities (add lines 60 through 65)	159,171	66	64,157	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67	Unrestricted	1,707,594	67	1,485,427
	68	Temporarily restricted	71,155	68	80,046
	69	Permanently restricted	112,092	69	112,092
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
	73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19 and column (B) must equal line 21)	1,890,841	73	1,677,565
	74	Total liabilities and net assets/fund balances (add lines 66 and 73)	2,050,012	74	1,741,722

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.

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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		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
78b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement		X
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?		X
81a	Enter direct or indirect political expenditures See line 81 instructions	N/A and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt	
81b	Did the organization file Form 1120-POL for this year?		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?		X
82b	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)	N/A	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
84b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85a	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	N/A	
85b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	N/A	
85c	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	N/A	
85d	c Dues, assessments, and similar amounts from members	N/A	
85e	d Section 162(e) lobbying and political expenditures	N/A	
85f	e Aggregate nondeductible amount of Section 6033(e)(1)(A) dues notices	N/A	
85g	f Taxable amount of lobbying and political expenditures (line 85d less 85e)	N/A	
85h	g Does the organization elect to pay the Section 6033(e) tax on the amount on line 85f?	N/A	
86a	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?	N/A	
86b	86 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12	N/A	
86c	b Gross receipts, included on line 12, for public use of club facilities	N/A	
86d	87 501(c)(12) organizations Enter a Gross income from members or shareholders	N/A	
86e	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	N/A	
88	88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations Sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX		X
89a	89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under Section 4911 <u>0</u> , Section 4912 <u>0</u> , Section 4955 <u>0</u>		
89b	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		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	90a List the states with which a copy of this return is filed <u>Arizona</u>		
90b	b Number of employees employed in the pay period that includes March 12, 2001 (see instructions)	90b	36
91	91 The books are in care of <u>The organization</u> Telephone number <u>(520) 795-1331</u> Located at <u>Same as page one</u> ZIP + 4 <u></u>		
92	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	N/A	<input type="checkbox"/>

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 Bingo Program					26,973
b Emp Svs Fees - Tucso					14,233
c Fees for Program Svs					191,787
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					2,085
95 Interest on savings & temporary cash invmnts					
96 Dividends & interest from securities			14	48,696	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-1,669	
101 Net income or (loss) from special events			1	31,207	
102 Gross profit or (loss) from sales of inventory			3	3,697	
103 Other revenue					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				81,931	235,078
105 Total (add line 104, columns (B), (D), and (E))					317,009

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)
1	See Statement 16

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
N/A	%			
	%			
	%			
	%			

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.

Please Sarah A. [Signature]

Date 12-12-02

Date	Check if	Preparer's SSN or PTIN (see General Instruction W)
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Schedule A
(Form 990 or 990-EZ)

Organization Exempt Under
Section 501(c)(3)

OMB No 1545-0047

(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)

2001

Supplementary Information — (see separate instructions)

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

Department of the Treasury
Internal Revenue Service

Name of the Organization **Tucson Association For The Blind
and Visually Impaired, Inc**

Employer Identification Number
86-6056057

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 ▶ \$ <u>N/A</u> (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes,' must complete Part VI-B and attach a statement giving a detailed description of the lobbying activities.		X
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?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below)	X	
4 Do you have a section 403(b) annuity plan for your employees?		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)	742,849	849,207	477,813	1,146,431	3,216,300
16 Membership fees received	2,022	1,362	2,033	2,783	8,200
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	386,411	517,837	729,098	351,121	1,984,467
18 Gross income from interest, dividends, amounts received from payments on securities loans (Section 512(a)(5)), rents, royalties, and unrelated business taxable income (less Section 511 taxes) from businesses acquired by the organization after June 30, 1975	68,114	63,908	53,081	49,151	234,254
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 18			60,221	-1,389	58,832
23 Total of lines 15 through 22	1,199,396	1,432,314	1,322,246	1,548,097	5,502,053
24 Line 23 minus line 17	812,985	914,477	593,148	1,196,976	3,517,586
25 Enter 1% of line 23	11,994	14,323	13,222	15,481	

26 Organizations described on lines 10 or 11:

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

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

d Add Amounts from column (e) for lines 18 _____ 19 _____ ▶ 26d
 22 _____ 26b _____

e Public support (line 26c minus line 26d total) ▶ 26e

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

27 Organizations described on line 12:

a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' 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) _____ 0 (1999) _____ 0 (1998) _____ 0 (1997) _____ 0

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) _____ 0 (1999) _____ 0 (1998) _____ 0 (1997) _____ 0

c Add Amounts from column (e) for lines 15 3,216,300 16 8,200 ▶ 27c 5,208,967
 17 1,984,467 20 _____ 21 _____ ▶ 27d 0

d Add Line 27a total 0 and line 27b total 0 ▶ 27e 5,208,967

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

f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ▶ 27f 5,502,053

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶ 27g 94.67 %

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶ 27h 4.26 %

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?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe, if 'No,' please explain (If you need more space attach a separate statement) ----- ----- -----		
32	Does the organization maintain the following		
	a Records indicating the racial composition of the student body, faculty, and administrative staff?		
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
	d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement) ----- -----		
33	Does the organization discriminate by race in any way with respect to		
	a Students' rights or privileges?		
	b Admissions policies?		
	c Employment of faculty or administrative staff?		
	d Scholarships or other financial assistance?		
	e Educational policies?		
	f Use of facilities?		
	g Athletic programs?		
	h Other extracurricular activities? If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement) ----- -----		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
	b Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75 50, 1975-2 C B 587, covering racial nondiscrimination? If 'No,' attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See 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		(a) Affiliated group totals	(b) To be completed for all electing organizations												
(The term 'expenditures' means amounts paid or incurred)															
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 –	41													
<table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">If the amount on line 40 is –</td> <td style="width: 50%;">The lobbying nontaxable amount is –</td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>				If the amount on line 40 is –	The lobbying nontaxable amount is –	Not over \$500,000	20% of the amount on line 40	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000
If the amount on line 40 is –	The lobbying nontaxable amount is –														
Not over \$500,000	20% of the amount on line 40														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
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)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(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 (See instructions)
 (For reporting only by organizations that did not complete Part VI-A)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a Volunteers
- b Paid staff or management (include compensation in expenses reported on lines c through h)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (add lines c through h)

Yes	No	Amount

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

Statement 1
Form 990, Part I, Line 8
Net Gain (Loss) from Noninventory Sales

Other Assets

Description	Sewell Reader			
Date Acquired	8/12/1994			
How Acquired	Purchase			
Date Sold	9/30/2001			
To Whom Sold				
Gross Sales Price		0		
Cost or Other Basis		633		
Depreciation		633		
			Gain (Loss)	0
Description	IBM Screenreader			
Date Acquired	9/19/1994			
How Acquired	Purchase			
Date Sold	9/30/2001			
To Whom Sold				
Gross Sales Price		0		
Cost or Other Basis		506		
Depreciation		506		
			Gain (Loss)	0
Description	IBM Screenreader			
Date Acquired	9/19/1994			
How Acquired	Purchase			
Date Sold	9/30/2001			
To Whom Sold				
Gross Sales Price		0		
Cost or Other Basis		739		
Depreciation		739		
			Gain (Loss)	0
Description	Visibility Tool Kit			
Date Acquired	9/19/1994			
How Acquired	Purchase			
Date Sold	9/30/2001			
To Whom Sold				
Gross Sales Price		0		
Cost or Other Basis		479		
Depreciation		479		
			Gain (Loss)	0
Description	Visibility Took Kit			
Date Acquired	9/19/1994			
How Acquired	Purchase			
Date Sold	9/30/2001			
To Whom Sold				
Gross Sales Price		0		
Cost or Other Basis		479		
Depreciation		479		
			Gain (Loss)	0
Description	ASAP Lite			
Date Acquired	10/06/1994			
How Acquired	Purchase			
Date Sold	9/30/2001			

Statement 1 (continued)
Form 990, Part I, Line 8
Net Gain (Loss) from Noninventory Sales

To Whom Sold				
Gross Sales Price		0		
Cost or Other Basis		900		
Depreciation		900		
			Gain (Loss)	0
Description	ASAP Lite			
Date Acquired	10/06/1994			
How Acquired	Purchase			
Date Sold	9/30/2001			
To Whom Sold				
Gross Sales Price		0		
Cost or Other Basis		900		
Depreciation		900		
			Gain (Loss)	0
Description	Speech Software			
Date Acquired	9/23/1996			
How Acquired	Purchase			
Date Sold	9/14/2001			
To Whom Sold				
Gross Sales Price		0		
Cost or Other Basis		1,455		
Depreciation		1,455		
			Gain (Loss)	0
Description	Telebraille III			
Date Acquired	9/30/1996			
How Acquired	Purchase			
Date Sold	8/07/2001			
To Whom Sold				
Gross Sales Price		0		
Cost or Other Basis		4,320		
Depreciation		4,320		
			Gain (Loss)	0
Description	Compact TTY's			
Date Acquired	9/26/1996			
How Acquired	Purchase			
Date Sold	9/14/2001			
To Whom Sold				
Gross Sales Price		0		
Cost or Other Basis		309		
Depreciation		309		
			Gain (Loss)	0
Description	Compact TTY's			
Date Acquired	9/26/1996			
How Acquired	Purchase			
Date Sold	9/14/2001			
To Whom Sold				
Gross Sales Price		0		
Cost or Other Basis		309		
Depreciation		309		
			Gain (Loss)	0
Description	ES Keys, Key Wiz			
Date Acquired	11/06/1996			

Statement 1 (continued)
Form 990, Part I, Line 8
Net Gain (Loss) from Noninventory Sales

How Acquired	Purchase		
Date Sold	9/14/2001		
To Whom Sold			
Gross Sales Price		0	
Cost or Other Basis		3,680	
Depreciation		3,680	
			Gain (Loss) 0
Description	Uniphone 1140		
Date Acquired	10/24/1996		
How Acquired	Purchase		
Date Sold	9/14/2001		
To Whom Sold			
Gross Sales Price		0	
Cost or Other Basis		505	
Depreciation		505	
			Gain (Loss) 0
Description	Intellikeys		
Date Acquired	10/14/1996		
How Acquired	Purchase		
Date Sold	9/14/2001		
To Whom Sold			
Gross Sales Price		0	
Cost or Other Basis		1,421	
Depreciation		1,421	
			Gain (Loss) 0
Description	Equipment switches		
Date Acquired	11/06/1996		
How Acquired	Purchase		
Date Sold	9/14/2001		
To Whom Sold			
Gross Sales Price		0	
Cost or Other Basis		1,150	
Depreciation		1,150	
			Gain (Loss) 0
Description	Keyboards/Adapters		
Date Acquired	10/24/1996		
How Acquired	Purchase		
Date Sold	9/14/2001		
To Whom Sold			
Gross Sales Price		0	
Cost or Other Basis		2,390	
Depreciation		780	
			Gain (Loss) -1,610
Description	Trackerball/Joystick		
Date Acquired	1/02/1997		
How Acquired	Purchase		
Date Sold	9/14/2001		
To Whom Sold			
Gross Sales Price		0	
Cost or Other Basis		1,235	
Depreciation		1,176	
			Gain (Loss) -59

Statement 1 (continued)
Form 990, Part I, Line 8
Net Gain (Loss) from Noninventory Sales

Total Gain (Loss) Other Assets \$ -1,669
 Total Net Gain (Loss) From Noninventory Sales \$ -1,669

Statement 2
Form 990, Part I, Line 9
Net Income (Loss) from Special Events

Special Events	Gross Receipts	Less Contri- butions	Gross Revenue	Less Direct Expenses	Net Income (Loss)
Eye Ball	52,120	0	52,120	36,900	15,220
Tee up for Tab	19,346	0	19,346	12,448	6,898
Bazaar	10,278	0	10,278	2,561	7,717
Other	2,000	0	2,000	628	1,372
Totals	\$ <u>83,744</u>	\$ <u>0</u>	\$ <u>83,744</u>	\$ <u>52,537</u>	\$ <u>31,207</u>

Statement 3
Form 990, Part I, Line 10
Gross Profit (Loss) From Sales Of Inventory

Sales of visually impaired merchandise	\$ 23,785
Gross Sales	\$ <u>23,785</u>
Less Returns & Allowances	<u>0</u>
Net Sales	\$ <u>23,785</u>
Less Cost Of Goods Sold	<u>20,088</u>
Gross Profit From Sales Of Inventory	\$ <u><u>3,697</u></u>

Statement 4
Form 990, Part I, Line 20
Other Changes in Net Assets or Fund Balances

Unrealized loss	\$ -26,738
Total	\$ <u><u>-26,738</u></u>

Statement 5
Form 990, Part II, Line 22
Grants and Allocations

Cash Grants and Allocations

Donee's Name	Scholarships to Visually Imp	
Relationship of Donee	none	
Amount Given		\$ 5,800
Total Cash Grants and Allocations		\$ <u>5,800</u>

Statement 5 (continued)
Form 990, Part II, Line 22
Grants and Allocations

Total Grants and Allocations \$ 5,800

Statement 6
Form 990, Part II, Line 43
Other Expenses

	(A) <u>Total</u>	(B) <u>Program Services</u>	(C) <u>Management & General</u>	(D) <u>Fundraising</u>
Bank Charges	2,344	415	1,831	98
Bingo	15,195	15,195		
Building repairs	39,354	32,929	5,296	1,129
Dues and Subscriptions	1,014	586	416	12
Insurance	25,687	22,543	2,631	513
License and Fees	529	135	388	6
Other Expenses	25,961	13,141	12,706	114
Professional services	11,524	6,187	5,170	167
Public Relations/Advertising	8,774	5,648	1,608	1,518
Training	3,752	927	2,816	9
Transportation Services	331	331		
Utilities	32,734	24,115	2,989	5,630
Vehicle Expenses	8,585	8,532		53
Total	\$ 175,784	\$ 130,684	\$ 35,851	\$ 9,249

Statement 7
Form 990, Part III
Organization's Primary Exempt Purpose

The Association's mission is to provide a wide variety of services to the blind and visually impaired who live in the greater Tucson area

Statement 8
Form 990, Part III, Line e
Statement of Program Service Accomplishments

<u>Description</u>	<u>Grants and Allocations</u>	<u>Program Service Expenses</u>
Developmental disability services - Day program activities providing training for adults with vision loss		233,761
Bingo Program		15,195
Scholarship Program	5,800	5,800
	<u>\$ 5,800</u>	<u>\$ 254,756</u>

Statement 9
Form 990, Part IV, Line 55b
Investments - Land, Buildings, and Equipment

Category	Basis	Accum Deprec	Book Value
Land	\$ 7,627		\$ 7,627
Total	<u>\$ 7,627</u>	<u>\$ 0</u>	<u>\$ 7,627</u>

Statement 10
Form 990, Part IV, Line 57
Land, Buildings, and Equipment

Category	Basis	Accum Deprec	Book Value
Automobiles / Transportation Equipment	\$ 37,807	\$ 35,011	\$ 2,796
Furniture and Fixtures	208,757	113,027	95,730
Machinery and Equipment	345,673	340,844	4,829
Buildings	459,114	349,847	109,267
Improvements	365,844	108,022	257,822
Land	103,872		103,872
Total	<u>\$ 1,521,067</u>	<u>\$ 946,751</u>	<u>\$ 574,316</u>

Statement 11
Form 990, Part IV, Line 58
Other Assets

Client equipment inventory	\$ 7,047
Interest receivable	967
Other assets	9,017
Total	<u>\$ 17,031</u>

Statement 12
Form 990, Part IV, Line 65
Other Liabilities

Other accrued liabilities	\$ 16,988
Total	<u>\$ 16,988</u>

Statement 13
Form 990, Part IV-A, Line b(4)
Other Amounts

Cost of equipment sales	\$ 20,088
Direct cost of special events	52,537
Loss on sale of assets	1,669
Total	<u>\$ 74,294</u>

Statement 14
Form 990, Part IV-B, Line b(4)
Other Amounts

Cost of equipment sales	\$	20,088
Direct Cost of Special Events		52,537
Loss on sale of asset		1,669
Total	\$	<u>74,294</u>

Statement 15
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
Sarah Jones 3767 East Grant Road Tucson, AZ	Executive Direc 40	\$ 55,000	\$ 0	\$ 0
Billy Joe Varney 3767 E Grant Rd Tucson, AZ 85716	Member As Needed	0	0	0
Charles Parker 3767 E Grant Rd Tucson, AZ 85716	Treasurer As Needed	0	0	0
Heath Lauseng 3767 E Grant Rd Tucson, AZ 85716	Secretary As Needed	0	0	0
Jeff Bishop 3767 E Grant Rd Tucson, AZ 85716	Member As Needed	0	0	0
Jason J Bryn 3767 E Grant Rd Tucson, AZ 85716	Member As Needed	0	0	0
Katie Kendrick 3767 E Grant Rd Tucson, AZ 85716	Member As Needed	0	0	0
Patty Lacy 3767 E Grant Rd Tucson, AZ 85716	Member As Needed	0	0	0
Arthur H Davis 3767 E Grant Rd Tucson, AZ 85716	President As Needed	0	0	0

Statement 15 (continued)
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
Michael Diesenhouse 3767 E Grant Rd Tucson, AZ 85716	Member As Needed	\$ 0	\$ 0	\$ 0
Penny Rosenblum 3767 E Grant Rd Tucson, AZ 85716	Member As Needed	0	0	0
James Flanagan 3767 E Grant Rd Tucson, AZ 85716	Vice President As Needed	0	0	0
W Burghardt Turner 3767 E Grant Rd Tucson, AZ 85716	Member As Needed	0	0	0
Della Lucus 3767 E Grant Rd Tucson, AZ 85716	Member As Needed	0	0	0
Rosalinda E Quiroga 3767 E Grant Rd Tucson, AZ 85716	Member As Needed	0	0	0
Jill Rickgauer 3767 E Grant Rd Tucson, AZ 85716	Member As Needed	0	0	0
Reid Schindler, M D 3767 E Grant Rd Tucson, AZ 85716	Member As Needed	0	0	0
Gary Rowlett 3767 E Grant Rd Tucson, AZ 85716	Member As Needed	0	0	0
Michael Zimet 3767 E Grant Rd Tucson, AZ 85716	Member As Needed	0	0	0
Total		\$ 55,000	\$ 0	\$ 0

Statement 16
Form 990, Part VIII
Relationship of Activities to the Accomplishment of Exempt Purposes

Line #	Explanation of Activities
93a	Income received from Bingo is used to provide supplies for the Bingo program
93b	Income generated from Employment services is used to provide training and development of blind and visually impaired individuals for the workplace
93c	Program service revenue is generated from a contract to provide support services by individuals that are blind or visually impaired. The income is used to provide the services that are offered as part of the exempt mission of the Association
94	Membership dues enhance the public's awareness of the charitable mission of the Association

Statement 17
Schedule A, Part III, Line 3
Qualifications of Recipients Receiving Grants or Loans

Scholarships are awarded to blind and visually impaired individuals

Statement 18
Schedule A, Part IV-A, Line 22
Other Income

Description	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
Realized loss on investments	\$ 0	\$ 0	\$ 0	\$ -1,389	\$ -1,389
Other income	0	0	60,221	0	60,221
Total	\$ 0	\$ 0	\$ 60,221	\$ -1,389	\$ 58,832

Application for Extension of Time to File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box.
 - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Note:** Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time — Only submit original (no copies needed)

Note: Form 990-T corporations requesting an automatic 6 month extension — check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization Tucson Association For The Blind	Employer Identification Number 86-6056057
	Number, Street, and Room or Suite Number. If a P.O. Box, see instructions. 3767 E Grant Road	
	City, Town or Post Office. For a foreign address see instructions. Tucson, AZ 85716	State ZIP Code

Check type of return to be filed (file a separate application for each return)

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (Section 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990 T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- If the organization does not have an office or place of business in the United States, check this box.
- If this is for a **group return**, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the **whole group**, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until 2/15, 20 03, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- calendar year 20 ____ or
- tax year beginning 7/01, 20 01, and ending 6/30, 20 02

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990 PF, 990 T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. \$ 0

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ 0

c Balance Due Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ 0

Signature and Verification

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, and that I am authorized to prepare this form.

Signature Marianne DeVries Title CPA Date 11-13-02

BAA For Paperwork Reduction Act Notice, see instructions.